



**PUBLIC NOTICE
CITY OF ALAMEDA HEALTH CARE DISTRICT
BOARD OF DIRECTORS MEETING
AGENDA**

Monday, February 2, 2009

Location:

Alameda Hospital (Dal Cielo Conference Room)
2070 Clinton Avenue
Alameda, CA 94501

Office of the Clerk: (510) 814-4001

Regular Meeting

Members of the public who wish to comment on agenda items will be given an opportunity before or during the consideration of each agenda item. Those wishing to comment must complete a speaker card indicating the agenda item that they wish to address.

- I. **Call to Order** *(6:00 p.m.) Jordan Battani
- II. **Roll Call** Kristen Thorson
- III. **Regular Agenda**
- IV. **General Public Comments**
- V. **Closed Session**
 - 1. Approval of Closed Session Minutes –January 5, 2009
 - 2. Discussion of Report Involving Trade Secrets H & S Code Sec. 32106
 - 3. Instructions to Bargaining Representatives Gov't Code Sec. 54957.6
Regarding Salaries, Fringe Benefits and Working Conditions
 - 4. Consultation with Legal Counsel Regarding Gov't Code Sec. 54956.9(a)
Pending Litigation
 - 5. Discussion of Pooled Insurance Claims Gov't Code Sec. 54956.95
 - 6. Quality Improvement Committee Report (QIC) H & S Code Sec. 32155

VI. Reconvene to Public Session *(Expected to start at approximately 7:30 p.m.)

1. Announcements from Closed Session Jordan Battani

VI. Consent Agenda

1. Approval of January 5, 2009 Minutes **ACTION ITEM** [enclosure]

VII. Regular Agenda

1. Finance and Management Committee Report David A. Neapolitan
- Acceptance of November & December 2008 Financial Statements **ACTION ITEM** [enclosure]
 - Authorization to renew Bank of Alameda Letter of Credit and Note **ACTION ITEM** [to be distributed]
2. Strategic Planning and Community Relations Committee Report Robert Bonta
Deborah E. Stebbins
- Focus Group Results
 - Marketing and Communications Plans
 - Master Plan Update
3. Chief Executive Officer's Report Deborah E. Stebbins
- Approval to enter into an Agreement with Crestcom International for Management Training **ACTION ITEM** [enclosure]
 - Service Excellence - C.A.R.E. Program [enclosure]
 - Alameda Hospital Snapshot [enclosure]
 - Foundation Board Retreat Dennis Eloë
4. Medical Staff President Report Alka Sharma, MD
5. General Public Comments
6. Board Comments
7. Adjournment

**The next regularly scheduled board meeting will be on Monday, March 2, 2009.
Closed Session will begin at 6:00 p.m. Open Session will follow at approximately 7:30 p.m.**

Minutes of the Board of Directors

January 5, 2009

Directors Present:

Jordan Battani
 Robert Bonta
 Robert Deutsch, MD
 Steve Wasson
 J. Michael McCormick

Management Present:

Deborah E. Stebbins
 David A. Neapolitan

Medical Staff Present:

Alka Sharma, M.D.

Legal Counsel Present:

Thomas Driscoll, Esq.

Excused:

Submitted by: Kristen Thorson

Topic	Discussion	Action / Follow-Up
1. Call to Order	Jordan Battani called the Open Session of the Board of Directors of the City of Alameda Health Care District to order at 6:00 p.m.	
2. Roll Call	Kristen Thorson called roll, noting that a quorum of Directors were present.	
3. Swearing in of Board Members	Vice Mayor Lena Tam from the City of Alameda was on hand to administer the Oath of Office to the District Board Members that were elected in November of 2008. <ul style="list-style-type: none"> ▪ Jordan Battani ▪ Robert Bonta ▪ Robert Deutsch, MD ▪ J. Michael McCormick 	
4. General Public Comments	None at this time.	
5. Closed Session	At 6:20 p.m. the meeting adjourned to Executive Closed Session.	
5. Reconvene to Public Session & Adjournment	Jordan Battani reconvened the meeting into public session at 8:14 p.m. and made the following closed session announcements.	
6. Closed Session Announcements	[1] Minutes	[1] The Closed Session Minutes for the December 1, 2008 meeting were approved.

Topic	Discussion	Action / Follow-Up
7. Consent Agenda	<p>[1] Approval of December 1, 2008 Minutes</p> <p>[2] Approval of Investment Guideline Document for Alameda Hospital "ECHO" Pension Plan</p> <p>[3] Ratification of Local 29 Contract</p>	<p>Director Wasson moved to approve the consent agenda as presented. Director Bonta seconded the motion. The motion carried unanimously.</p>
8. Regular Agenda	<p>[1] Approval of Resolution 2008-6F Auxiliary Appreciation</p> <p>Deborah Stebbins thanked the members of the Alameda Hospital Auxiliary for their continued support of Alameda Hospital and for their recent contribution of \$20,000 to help purchase a Urology Services Cart to assist the Emergency Care Center, Hospital and physicians with diagnosis and treatment of patients. Members of the Auxiliary were present for the presentation of the Resolutions.</p> <p>[2] Nursing Department Presentation</p> <p>Executive Director of Nursing Services, Mary Bond, presented an overview of the Nursing Services Department. A copy of the presentation is available in Administration. Ms. Bond distributed a "Nursing Department Fact Sheet" for the Board and public that outlined key points in her presentation.</p> <p>[3] Election of Officers</p> <p>After reviewing the current slate of officers, the Board of Directors agreed to keep the current officers in place and nominate J. Michael McCormick to the office of 2nd Vice President. The current slate of officers are Jordan Battani (President), Robert Deutsch, MD (1st Vice President), Steve Wasson (Treasurer), and Robert Bonta (Secretary).</p> <p>[4] District Committee Assignments</p> <p>The Board of Directors Reviewed the Proposed Committee assignments as presented.</p> <p>Strategic Planning and Community Relations Committee</p> <ul style="list-style-type: none"> ▪ Robert Bonta, Chair ▪ Robert Deutsch, MD ▪ Steve Wasson ▪ J. Michael McCormick ▪ Jordan Battani, Ex Officio <p>Finance and Management Committee</p> <ul style="list-style-type: none"> ▪ Steve Wasson, Chair 	<p>Director Deutsch moved to Approve Resolution 2008-6F in honor of the Alameda Hospital Auxiliary. Director Bonta seconded the motion. The motion carried unanimously.</p> <p>Director Deutsch moved to keep the current Slate of Officer and nominate J. Michael McCormick to the office of 2nd Vice President. Director Wasson seconded the motion. The motion carried unanimously.</p> <p>Director Bonta moved to approve the committee assignments as outlined in the memorandum. Director Wasson seconded the motion. The motion carried unanimously.</p>

Topic	Discussion	Action / Follow-Up
	<ul style="list-style-type: none"> ▪ Robert Bonta ▪ Jordan Battani, Ex Officio <p>Quality Improvement Committee</p> <ul style="list-style-type: none"> ▪ Robert Deutsch, MD, Chair ▪ J. Michael McCormick ▪ Jordan Battani, Ex Officio <p>All Members of the Board were welcomed to attend any of the other meetings on any occasion.</p> <p>[5] Finance and Management Committee Report</p> <p><i>November 2008 Financial Statements Overview</i> David Neapolitan, CFO reviewed the November 2008 Financials noting the following statistics for the month. Average daily census was 84.5 versus 85.6 budgeted. Acute average daily census was 31.6 versus 30.2 budgeted. Sub-Acute average daily census was 33.8 versus 33.3 budgeted. South Shore average daily census 19.1 versus 22.0 budgeted. Total gross patient revenue less than budget by \$883,645. Inpatient revenue was less than budget by \$1,251,734 or 10.1%. Outpatient revenue was greater than budget by \$356,964 or 3.9% South Shore revenue was greater than budget by \$11,125 or 2.8%. Surgery cases were 432 versus 407 budgeted. Kaiser Surgical volume was greater than budget with 271 cases versus 234 cases budgeted and Alameda cases were lower at 161 versus 173 budgeted. Overall the month of November had a profit of \$29,745 versus a budgeted loss of \$41,996. YTD performance is a profit of \$70,473 versus a budgeted loss of \$101, 547.</p> <p>[6] Strategic Planning and Community Relations Committee Report</p> <p>Robert Bonta, Chair of the committee reported that there was no meeting in December and that the next meeting would be held on January 20, 2009. The focus of the committee will move toward master planning for Alameda Hospital. Included in the Board Packet were the recent press articles about Alameda Hospital. Director Bonta thought that the articles were well balanced articles that represented the hospital well.</p> <p>[7] Chief Executive Officer's Report</p> <p><i>Approval of Alameda Towne Centre Medical Office Building Upgrades</i> Ms. Stebbins presented an memorandum to the Board of Directors asking for approval to enter into a 5 year lease and aesthetic upgrades to the Medical Office Building at 501 South Shore Centre West.</p>	<p>No action was taken. The November and December 2008 Financial Statements will be brought to the Finance and Management Committee at the January 28, 2009 committee meeting and will then be brought to the Board for final approval.</p> <p>No action was taken</p> <p>Director McCormick moved approval of the aesthetic upgrades and entering into a 5-year lease agreement for the Medical office space at 501 South Shore Centre West. Director Bonta seconded</p>

Topic	Discussion	Action / Follow-Up																								
	<p>Deborah E. Stebbins, CEO reported on December Statistics.</p> <table border="1" data-bbox="467 296 1081 554"> <thead> <tr> <th data-bbox="467 296 740 390"><i>Statistics:</i></th> <th data-bbox="740 296 834 390">Dec. (Prelim)</th> <th data-bbox="834 296 954 390">Dec. Budget</th> <th data-bbox="954 296 1081 390">Nov. Actual</th> </tr> </thead> <tbody> <tr> <td data-bbox="467 390 740 426">Average Daily Census</td> <td data-bbox="740 390 834 426">78.8</td> <td data-bbox="834 390 954 426">89.7</td> <td data-bbox="954 390 1081 426">84.50</td> </tr> <tr> <td data-bbox="467 426 740 462">Patient Days</td> <td data-bbox="740 426 834 462">2,443</td> <td data-bbox="834 426 954 462">2,781</td> <td data-bbox="954 426 1081 462">2,535</td> </tr> <tr> <td data-bbox="467 462 740 497">ER Visits</td> <td data-bbox="740 462 834 497">1,471</td> <td data-bbox="834 462 954 497">1,535</td> <td data-bbox="954 462 1081 497">1,412</td> </tr> <tr> <td data-bbox="467 497 740 533">OP Registrations</td> <td data-bbox="740 497 834 533">2306</td> <td data-bbox="834 497 954 533">2462</td> <td data-bbox="954 497 1081 533">2,195</td> </tr> <tr> <td data-bbox="467 533 740 554">Total Surgeries</td> <td data-bbox="740 533 834 554">414</td> <td data-bbox="834 533 954 554">407</td> <td data-bbox="954 533 1081 554">432</td> </tr> </tbody> </table> <p>Ms. Stebbins reported that on December 18, there was a public meeting sponsored the Veterans Administration regarding possible development of land on Alameda Point. Ms. Stebbins attended the meeting and spoke on behalf of the Hospital.</p> <p>Ms. Stebbins also reported that on Tuesday, January 6, 2009, in response to the Strategic Plan, the Hospital will be sponsoring 2 focus groups on Bay Farm Island to collect more information on why the market share is less than on the main island.</p> <p>[8] Medical Staff President Report</p> <p>Dr. Alka Sharma, Medical Staff President, reported that the Annual Medical Staff Annual Holiday Party will be held on January 9, 2009 at the O'Club in Alameda. This was Dr. Sharma's first meeting as President of the Medical Staff.</p>	<i>Statistics:</i>	Dec. (Prelim)	Dec. Budget	Nov. Actual	Average Daily Census	78.8	89.7	84.50	Patient Days	2,443	2,781	2,535	ER Visits	1,471	1,535	1,412	OP Registrations	2306	2462	2,195	Total Surgeries	414	407	432	<p>the motion. The motion carried unanimously.</p>
<i>Statistics:</i>	Dec. (Prelim)	Dec. Budget	Nov. Actual																							
Average Daily Census	78.8	89.7	84.50																							
Patient Days	2,443	2,781	2,535																							
ER Visits	1,471	1,535	1,412																							
OP Registrations	2306	2462	2,195																							
Total Surgeries	414	407	432																							
8. General Public Comments	None at this time.																									
10. Board Comments	None at this time.																									
11. Adjournment		<p>A motion was made to adjourn the meeting and being no further business, the meeting was adjourned at 9:14 p.m.</p>																								

Attest:

Jordan Battani
President

Robert Bonta
Secretary

The logo for Alameda Hospital features the name "Alameda Hospital" in a serif font, with a large, dark, curved swoosh element that starts above the 'A' and ends below the 'l' in "Hospital".

Alameda Hospital

CITY OF ALAMEDA HEALTH CARE DISTRICT

ALAMEDA HOSPITAL

UNAUDITED

FINANCIAL STATEMENTS

FOR THE

PERIOD ENDING

11/30/08

ALAMEDA HOSPITAL
City of Alameda Health Care District
November 30, 2008

<u>Table of Contents:</u>	<u>Page</u>
Financial Management Discussion	1 - 12
Balance Sheet	13
Statement of Revenue and Expenses	14 - 16
Statement of Revenue and Expenses - Per Adjusted Patient Day	17 - 19
Key Statistics for Current Month and Year-to-Date	20

ALAMEDA HOSPITAL

November 30, 2008

The management of the Alameda Hospital (the Hospital) has prepared this discussion and analysis in order to provide an overview of the Hospital's performance for the period ending November 30, 2008 in accordance with the Governmental Accounting Standards Board Statement No. 34, *Basic Financial Statements; Management's Discussion and Analysis for State and Local Governments*. The intent of this document is to provide additional information on the Hospital's financial performance as a whole.

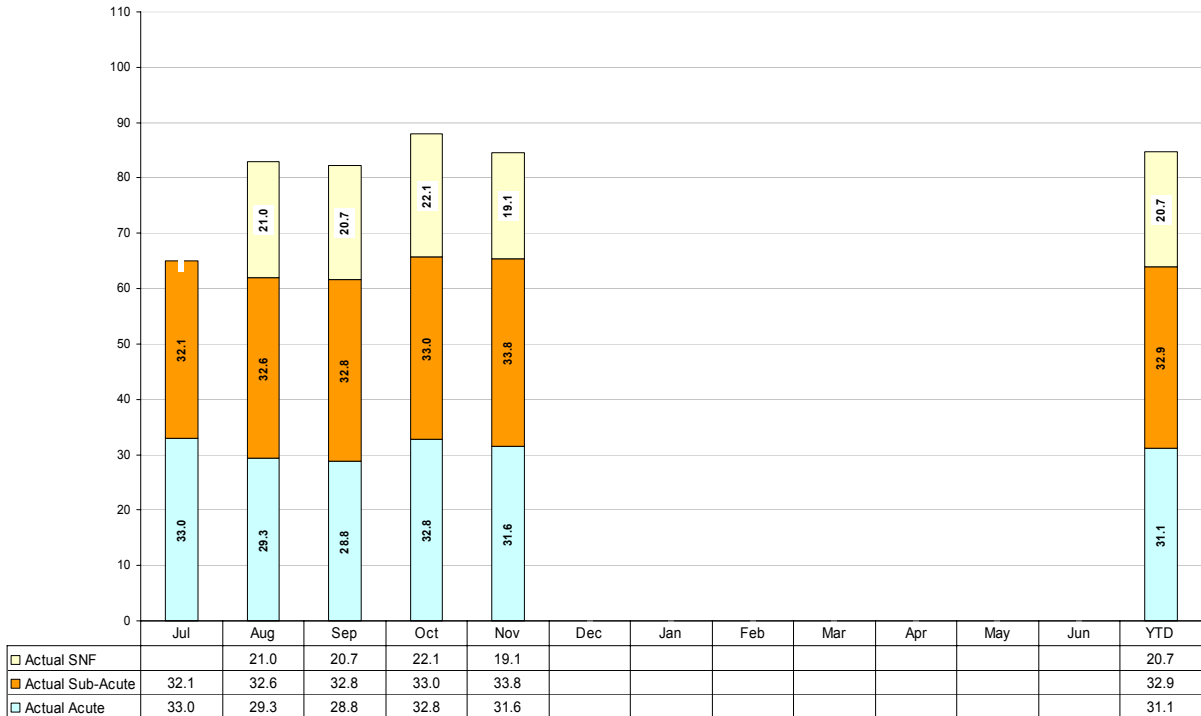
Financial Overview as of November 30, 2008

- Total assets on the balance sheet decreased by \$539,474 from the prior month as a result of a decrease of \$605,122 of cash and cash equivalents and an increase of \$111,426 in net accounts receivable.
- Total cash and cash equivalents for November decreased by \$605,122 which reduced our day's cash on hand to 4.7 as compared to 8.1 in the prior month. The decrease in cash and cash equivalents was primarily the result of lower November collections of patient accounts receivables.
- Net patient accounts receivable increased in November by \$111,426 compared to a decrease of \$436,291 in October. Accounts receivable days remained at 51 which is the same level as the prior months.
- Total liabilities decreased by \$579,214 compared to a decrease of \$1,789,198 in the prior month. This decrease was the result of a decrease of \$157,391 in payroll and benefit related accruals and \$477,000 in other liabilities. These decreases were offset by an increase of \$78,670 in accounts payable and accrued expenses.
- Accounts payable at November 30th was \$4,842,379, which represents a slight increase of \$78,670 from the prior month. As a result, days in accounts payable increased to 85 compared to prior month which was at 84.
- Payroll and benefit related accruals decreased by \$157,391 from the prior month. This decrease was primarily the result of payroll taxes that had been accrued in October as a result of the timing of the additional payroll that occurred in the month (2 months per year include an additional paid payroll as a result of the organizations bi-weekly payrolls) and reversed in November.
- Combined total revenue was less than budget by \$883,645 or 4.0% and net patient revenue was unfavorable to budget by \$199,539 or 3.9%. Inpatient revenue, excluding South Shore, was less than budgeted by 10.1% while outpatient revenue, excluding South Shore, was greater than budgeted by 3.9%. On an adjusted patient day basis total revenue, excluding South Shore, dropped to \$5,694 compared to a budgeted amount of \$6,513 and is solely caused by the drop in inpatient revenues experienced in the month. This unfavorable variance was the result of an overall case mix index that fell to 1.2029 from 1.2312 and resulted in virtually all inpatient cost centers generating fewer charges in the month of November (\$1,251,734).
- Total patient days were 2,535 and included 573 patient days from the South Shore facility as compared to the prior month's total patient days of 2,723 (684 South Shore days included) and the prior year's 1,750 total patient days. The average daily acute care census was 31.6 compared to a budget of 30.2 and 32.8 in the prior month; the average daily Sub-Acute census was 33.8 versus a budget of 33.3 and 33.0 in the prior month and the newly added South Shore unit had an average daily census of 19.1 versus a budget of 22.0 and prior month census of 22.1, respectively.
- ER visits were 1,412 or 2.8% less than the budgeted 1,453 visits. ER visits were greater than the prior year's November visits of 1,390 or 1.6%.

- Total surgery cases were 6.1% greater than budget, with Kaiser surgical cases making up 271 or 62.7% of the total cases. The mix of Kaiser eye cases continues to account for approximately 50% of the Kaiser volume during the fiscal year.
- Combined excess revenues over expense (profit) for November was \$29,745 versus a combined budgeted excess of expenses over revenue (loss) of \$41,995. This brings the year-to-date excess of revenues over expenses (profit) to \$70,405 or 169.3% better than budget. In looking at the Hospital only performance, excess revenues over expenses (profit) was \$26,098 for the month of November and the year to date excess revenues over expenses (profit) increased to \$56,302 for the five months ending November 30, 2008.

Volumes

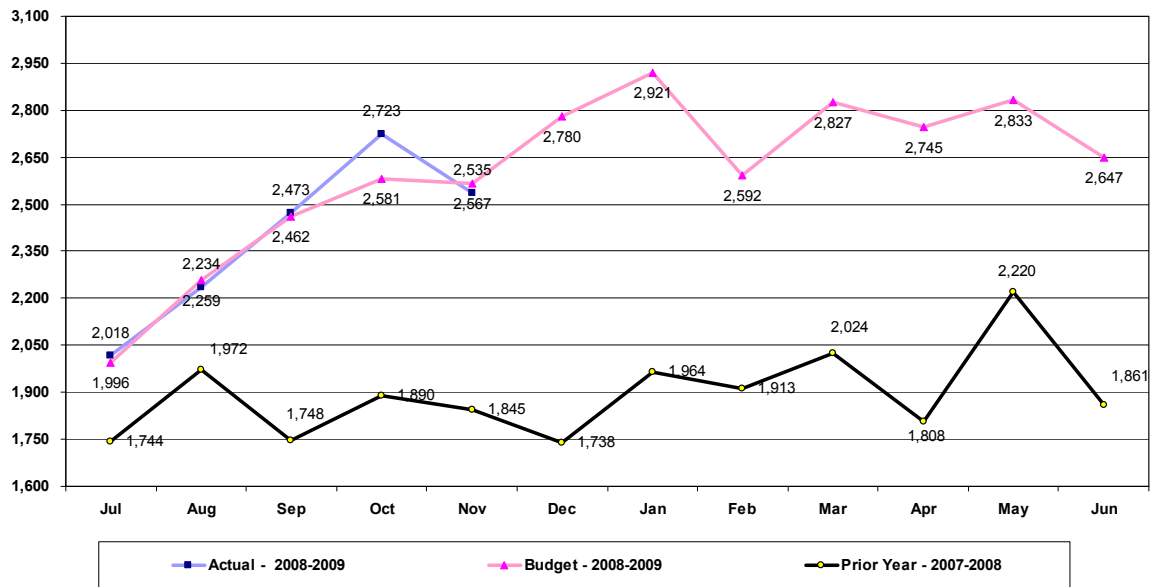
Overall actual daily census was 84.5 versus a budget of 85.6. Acute average daily census was 31.6 versus a budget of 30.2, Sub-Acute average daily census was 33.8 versus a budget of 33.3 and the South Shore unit had an average daily census of 19.1 versus a budget of 22.0.



Actual	65.1	82.9	82.3	87.9	84.5								84.7
Budget	64.4	83.2	82.1	83.3	85.6								84.1

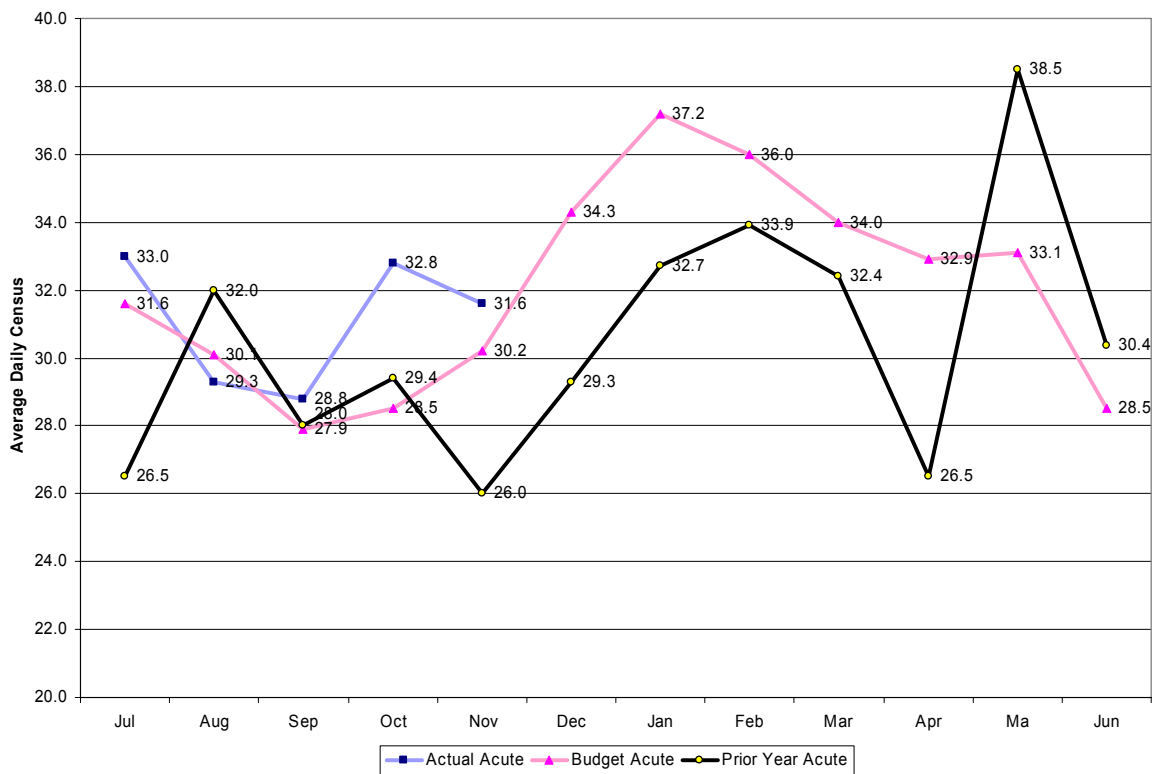
Total patient days in November were 1.2% less than budgeted but were 12.1% better than the prior year after removing the South Shore patient days from the current year total patient day count. The graph on the following page shows the total patient days for the month of November including South Shore.

Total Patient Days



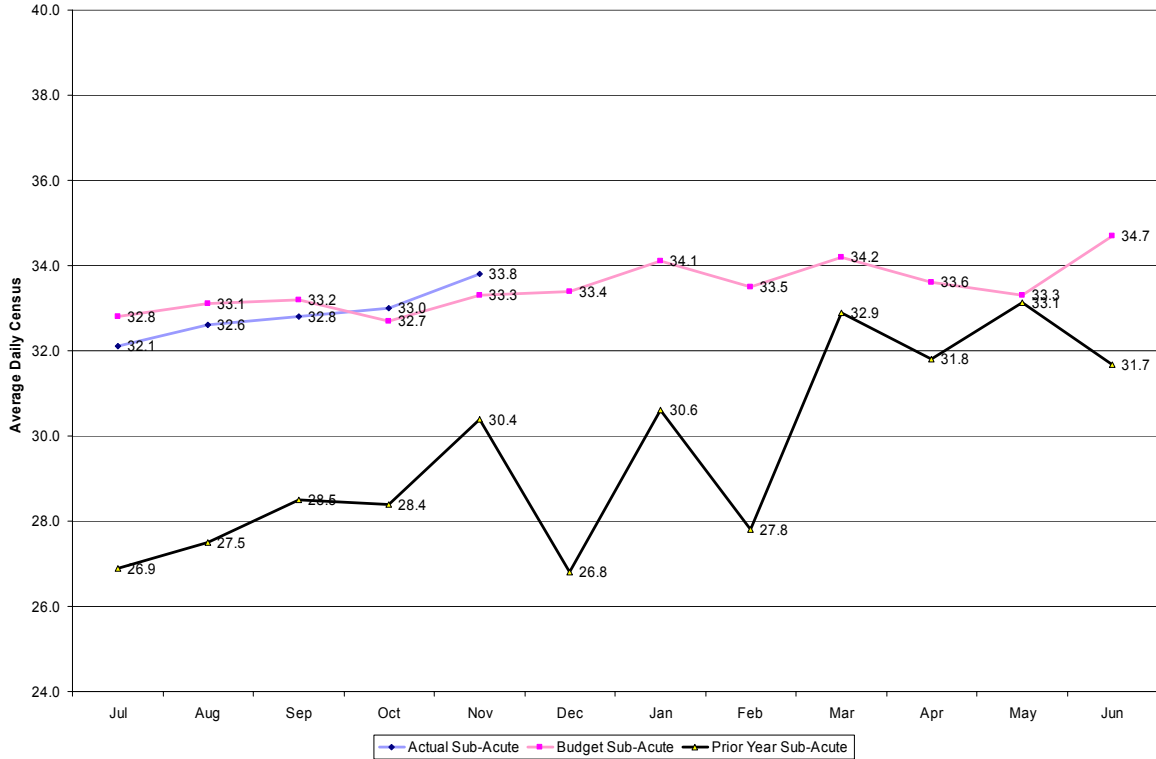
Acute care patient days were 4.5% (41 days) greater than budgeted and 17.5% (141 days) greater than the prior year. The acute average length of stay in November was 4.18.

Acute Care Average Daily Census



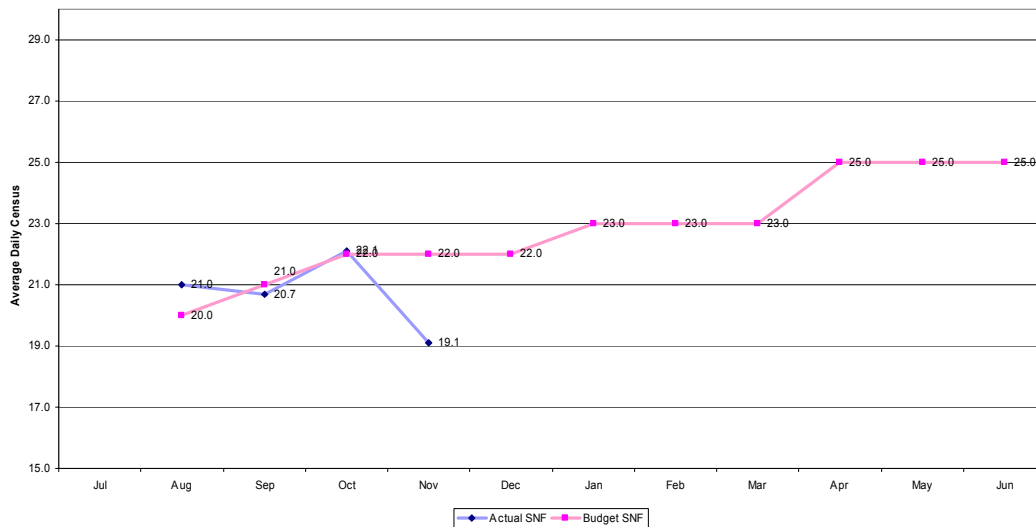
Sub-Acute patient days were 1.4% greater than budget and 19.6% greater than the prior year. The following graph shows the Sub-Acute programs average daily census.

Sub-Acute Average Daily Census



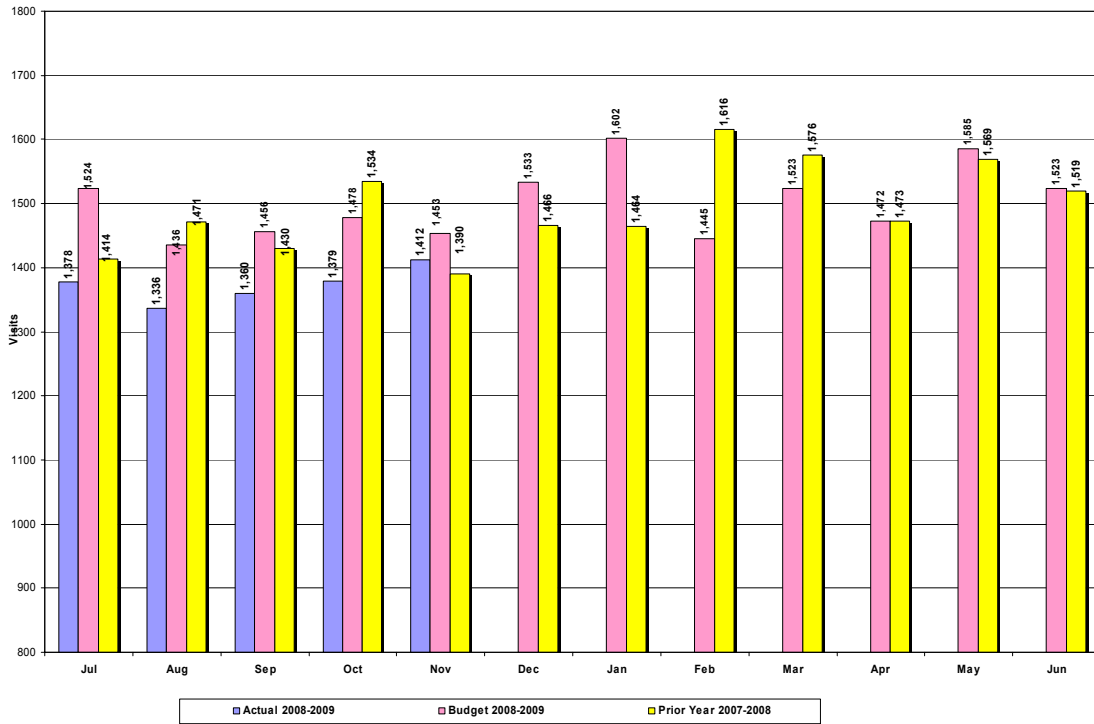
The Skilled Nursing Unit (South Shore) patient days were 13.2% less than budgeted for the month of November and are 3.5% less than budgeted for the first four months (August 17th through November 30th) of operations. This unfavorable variance from our budgeted patient day expectations has been the result of shorter length of stay cases. While this has negatively impacted our volume measure (patient days) we projecting a higher level of net reimbursement as we move from custodial care type patients to patients requiring a higher level of skilled nursing and ancillary care. The following graph shows the Skilled Nursing Unit average daily census as compared to budget by month.

Skilled Nursing Unit Average Daily Census



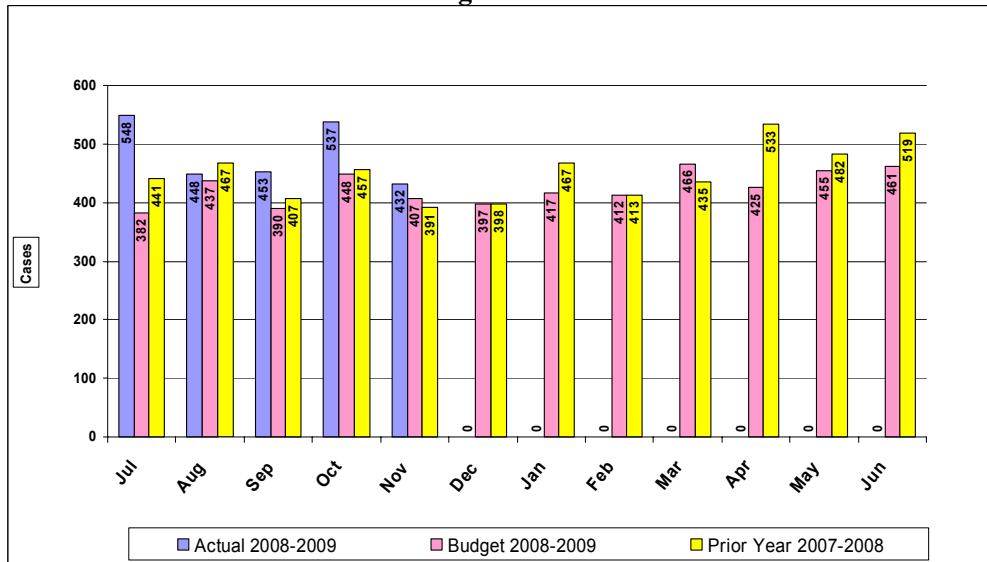
November ER visits were 2.8% less than budgeted but were 1.6% greater than the prior year's activity.

Emergency Room Visits



Surgery cases were 432 versus the 407 budgeted and 391 in the prior year. In November, Alameda physician cases remained strong at 162 cases versus 166 in the prior month. Additionally, out of the total surgical cases in November, Kaiser related cases declined to 271 from the prior months 371. As a result of the decrease in Kaiser surgical volumes Kaiser same day surgery revenue decreased by \$840,552 over the prior month, our reimbursement for Kaiser Outpatient cases in November increased to 21.3% as compared to 17.2% of gross charges in October. Management has engaged The Chartis Group to assist in the analysis of this program and we anticipate that in early January discussions with Kaiser will take place to develop modifications to improve our reimbursement of this program and a possible extension to the agreement.

Surgical Cases

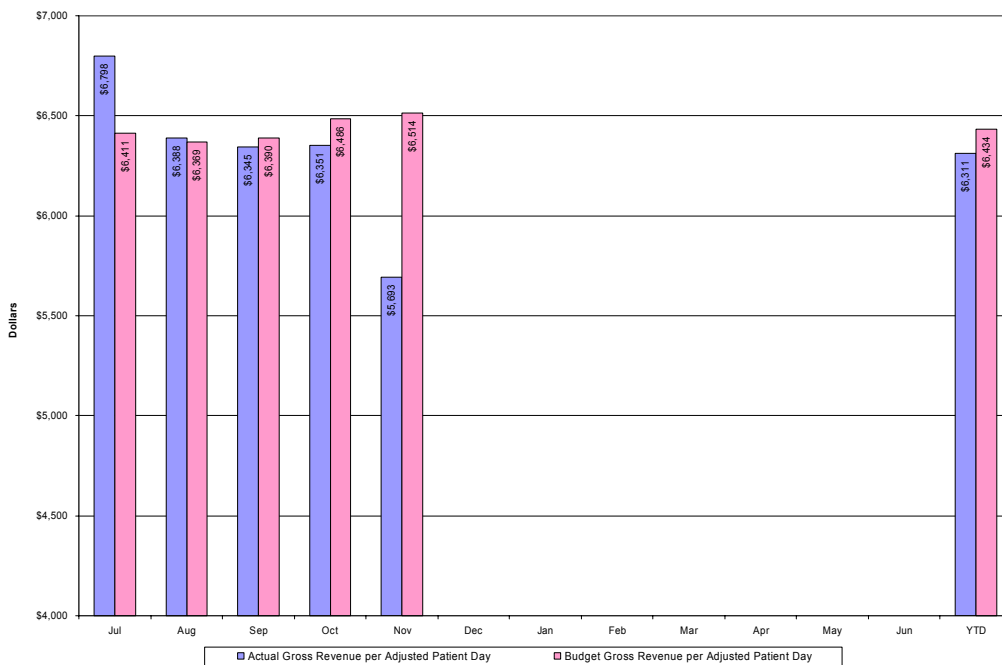


Income Statement – Hospital Only

Gross Patient Charges

Gross charges in November were less than budgeted by \$894,770 and was comprised of an unfavorable variance in inpatient services of \$1,251,734 while outpatient gross revenues again exceeded budget by \$356,964. However, on an adjusted patient day basis total patient revenue declined \$5,694 versus the budgeted \$6,513 or a 12.6% unfavorable variance from budget. The decline in inpatient revenues per adjusted patient day in November (14.4%) was driven by a lower overall case mix index (1.2029 versus 1.2312) and Medicare case mix index (1.2459 versus 1.3638). As a result of the decline in November year to date inpatient gross charges are now slightly unfavorable to our budgeted total gross revenues per adjusted patient day by 1.8%.

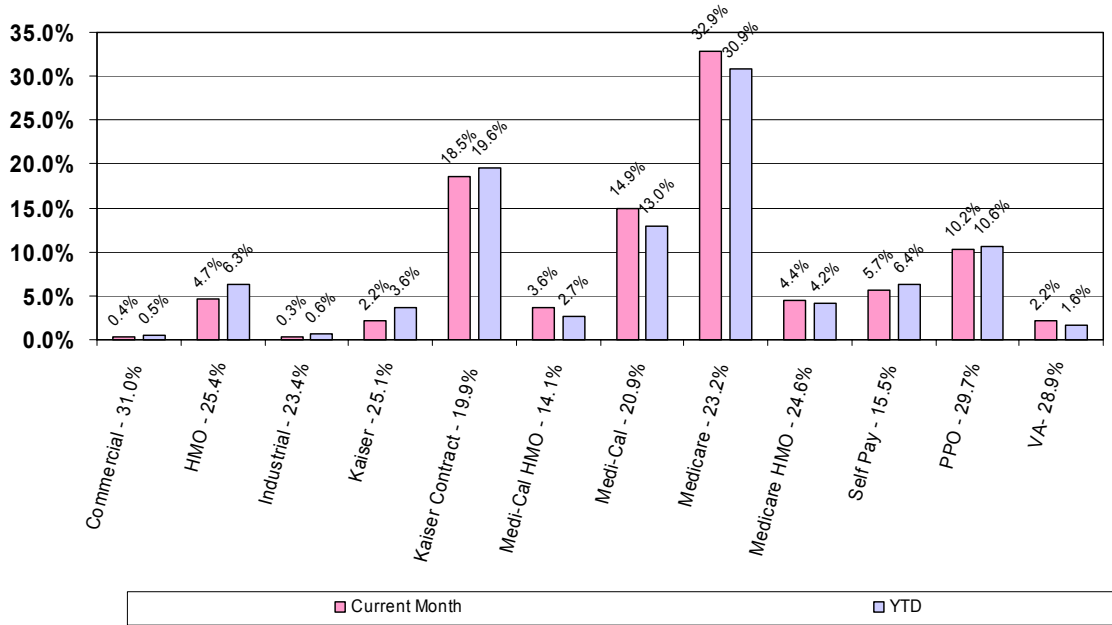
Gross Charges per Adjusted Patient Day



Payor Mix

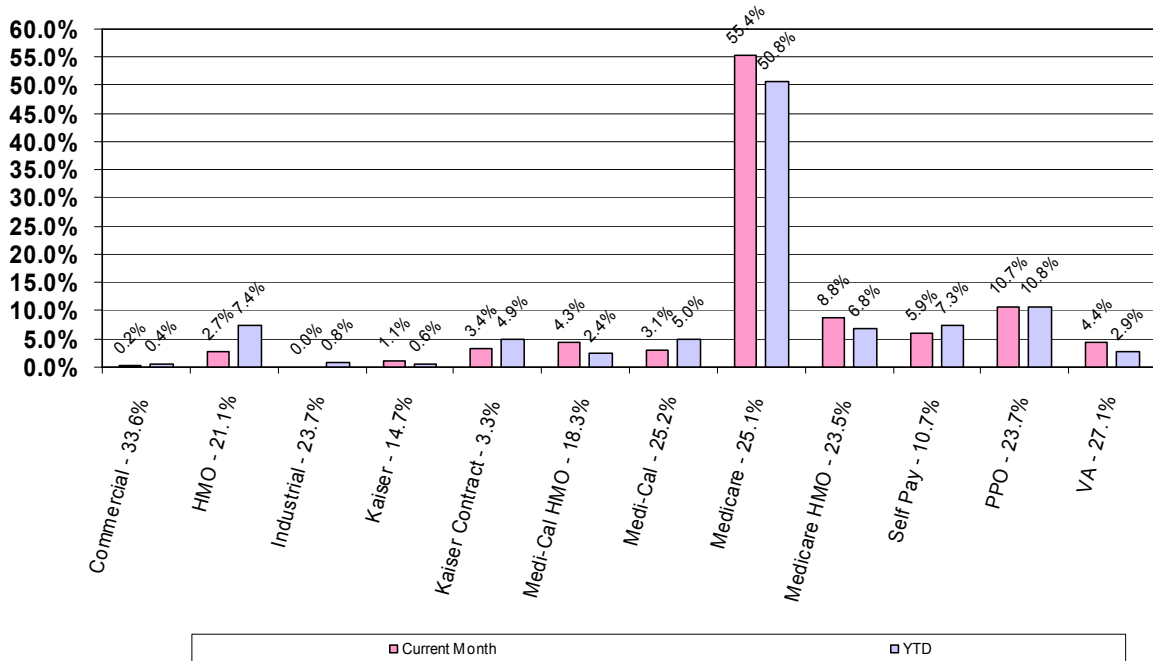
Medicare continues to hold the top payor position with total gross revenue representing 32.9% and 30.9% for the current month and year to date, respectively of our total gross patient charges with Kaiser as the second largest source of gross patient revenues at 20.7% and 23.2% for the current month and year to date, respectively. The graph on the following page shows the percentage of revenues generated by each of the major payors as well as the current months expected reimbursement for each.

Combined Payor Mix

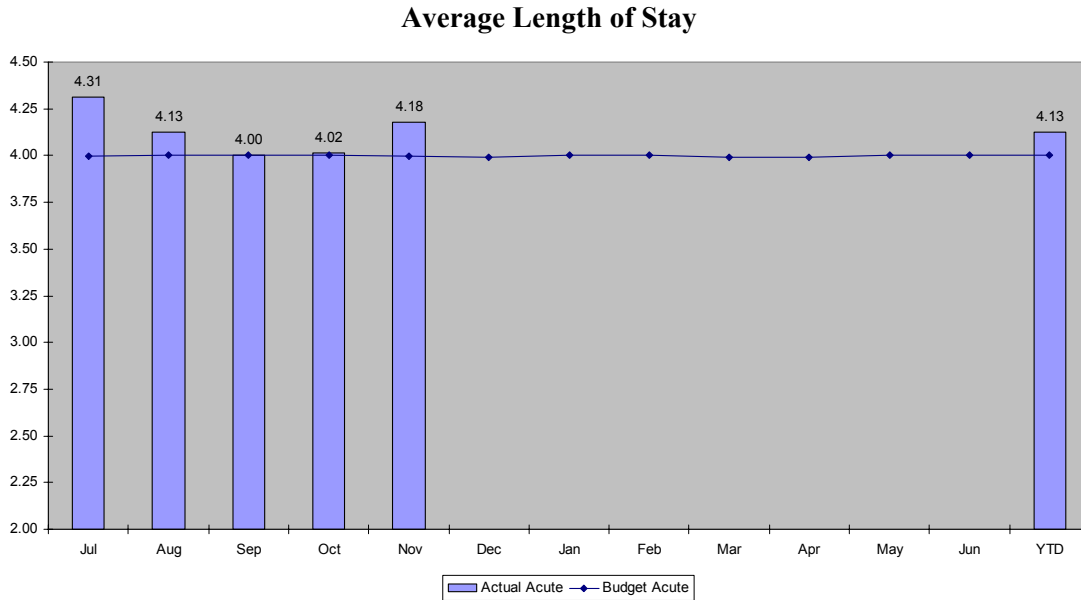


On the Hospital's inpatient acute side, 55.4% and 50.8% for the current month and year to date, respectively of the total gross revenue was generated by Medicare patients. Despite two (2) outlier threshold cases, expected reimbursement for November inpatient Medicare cases declined to an estimated 25.06%. This is a deterioration from the 27.4% expected reimbursement level that was experienced from October discharged Medicare cases and is primarily the result of the decline in the Medicare case mix index for November, 1.2459 versus October's case mix index of 1.3638.

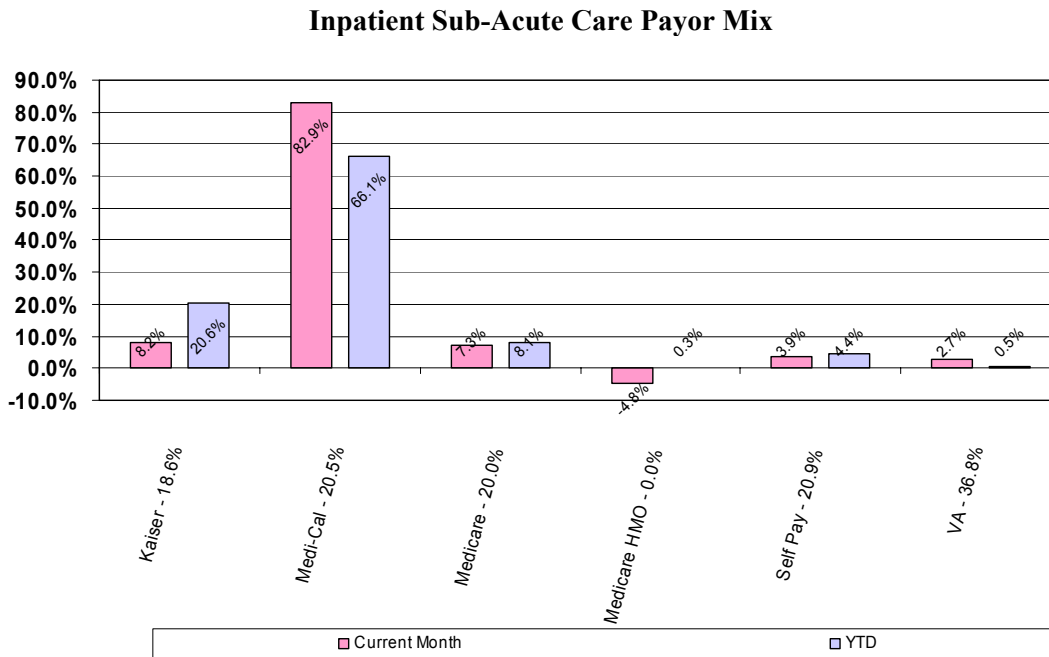
Inpatient Acute Care Payor Mix



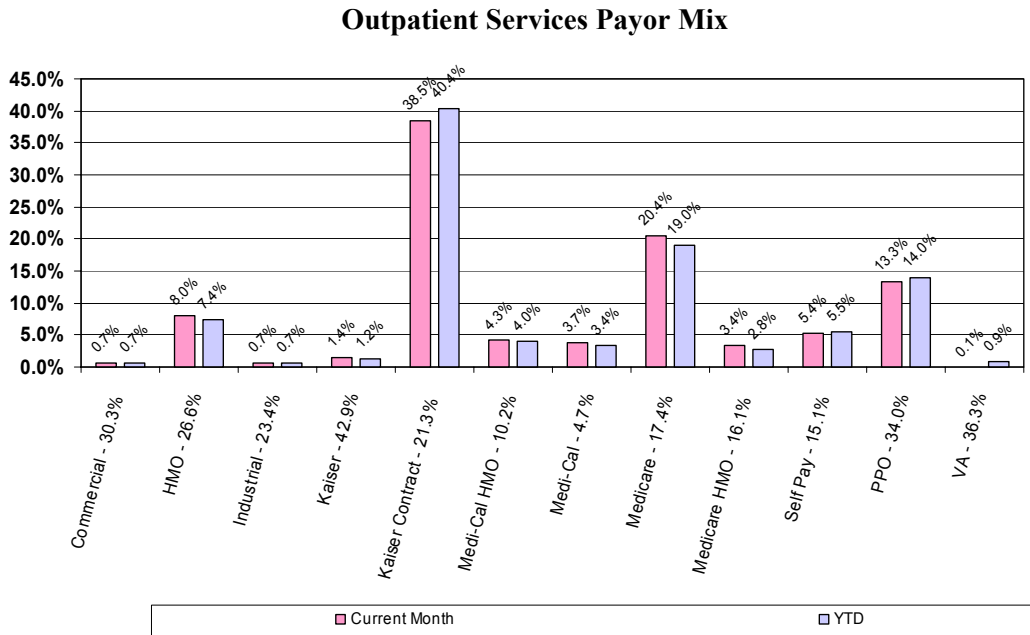
The average length of stay for the inpatient acute care units increased to 4.18.



In November, 82.9% of the Sub-Acute programs gross revenue was from Medi-Cal beneficiaries followed by 8.2% from Kaiser and 7.3% from Medicare as is seen in the graph below. The negative gross revenue percentage represent reclassifications of year-to-date gross revenues that were subsequently determined to be attributable other payor classifications that were corrected in November.



The outpatient gross revenue payor mix for November was comprised of 39.9% Kaiser, 20.4% Medicare, 13.3% PPO and 8.0% HMO and is shown on the following graph.



Deductions From Revenue

Contractual allowances are computed as deductions from gross patient revenues based on the difference between gross patient charges and the contractually agreed upon rates of reimbursement with third party government-based programs such as Medicare, Medi-Cal and other third party payors such as Blue Cross.

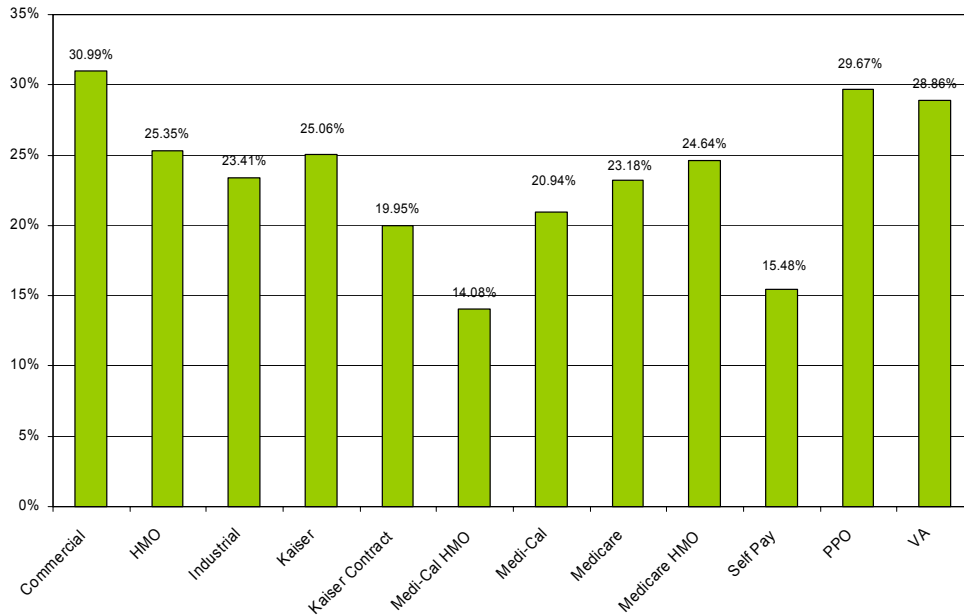
In the month of November contractual allowances, bad debt and charity adjustments (as a percentage of gross patient charges) were 76.8% versus the budgeted 77.0%. Contractual reserves in the month of November include additional reserves attributable to recently enacted legislation, AB 1183, the Health Budget Trailer Bill, which requires a reduction to the interim payment for inpatient services provided by hospitals that do not participate in the Selective Provider Contracting Program (commonly known as non-contract hospitals), unless the hospital meets exemption criteria contained in the bill. Effective October 1, 2008, AB 1183 requires the Department of Health Care Services (DHCS) to limit the amount paid to non-contract hospitals for inpatient services to the lesser of the interim per diem rate (28% of gross Medi-Cal patient charges) reduced by 10%, or the applicable regional average per diem contract rate for tertiary and non-tertiary hospitals (\$1,682 per Medi-Cal patient day) reduced by 5%. This resulted in additional contractual reserves of approximately \$58,000.

In November there were again no DRG “take backs” associated with the Recovery Audit Contractor (RAC) project. However, the new National Recovery Audit program is to be phased in state-by-state starting in the fall of 2008. A new RAC contractor has been selected by CMS for California, HealthDataInsights, Inc., with California RAC audits slated to resume sometime in the Spring of 2009.

Net Patient Service Revenue

Net patient service revenues are the resulting difference between gross patient charges and the deductions from revenue. This difference reflects what the actual anticipated cash payments the Hospital is to receive for the services provided. The graph on the following page shows the level of estimated reimbursement that the Hospital has experienced during the current month of fiscal year 2009 by major payor category.

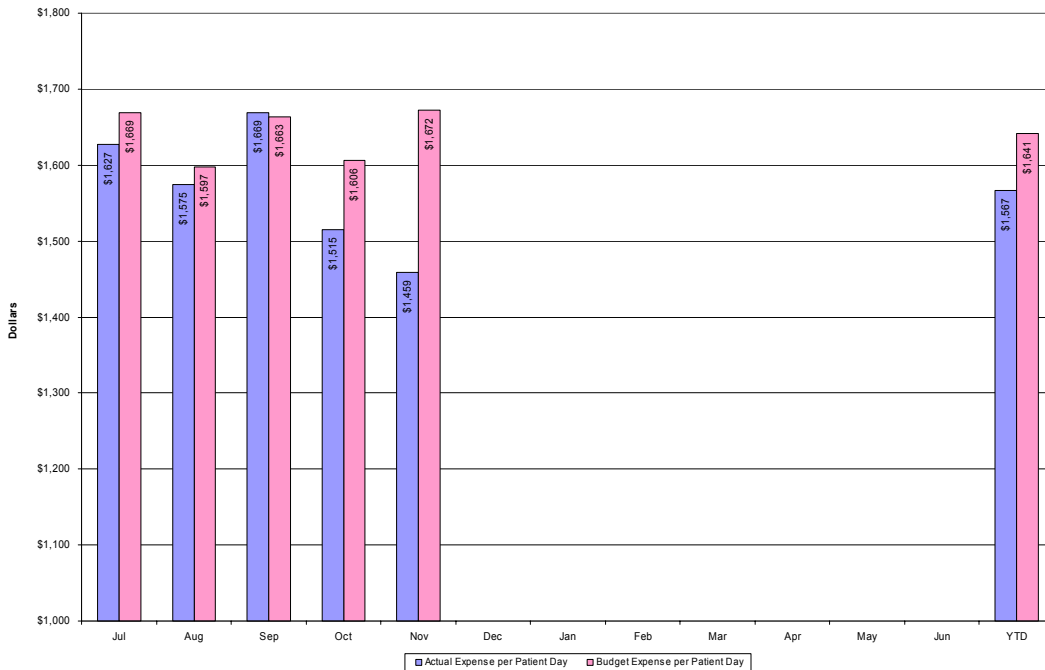
**Average Reimbursement % by Payor
 November 2008**



Total Operating Expenses

Total operating expenses were less than the fixed budget by \$238,695 or 4.3%. The graph below shows the hospital operating expenses on an adjusted patient day basis for the 2009 fiscal year by month and is followed by explanations of the significant areas of variance.

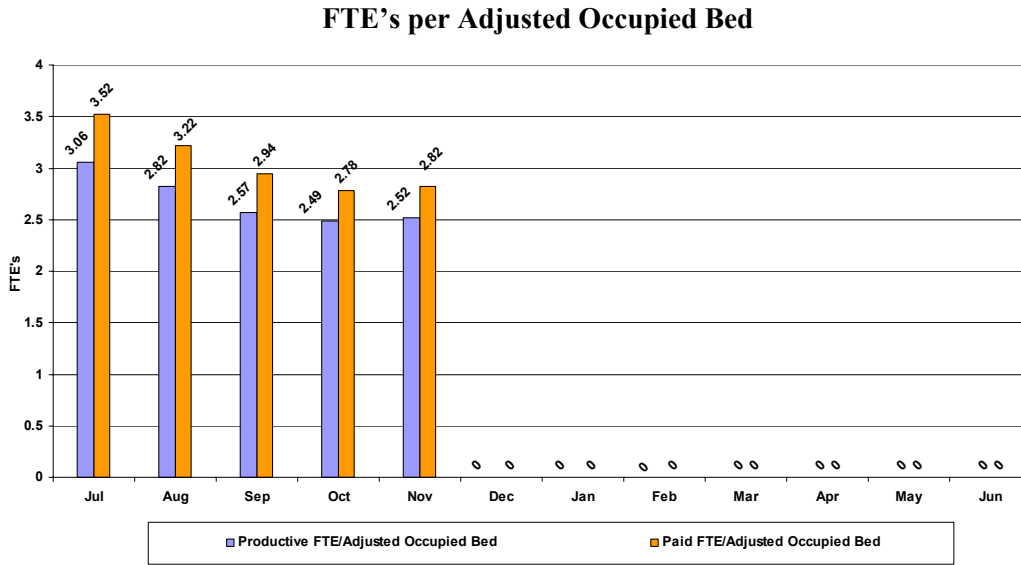
Expenses Per Adjusted Patient Day



The following discusses the significant areas that make up the variance from the fixed operating budget.

Salary and Registry Expenses

Salary and registry costs combined were favorable to budget by \$14,022. For the five months ending November 30, 2008, the hospital is \$70,339 unfavorable to the fixed budget but is \$34 per adjusted patient day favorable to budgeted expectations. Combined productive FTE's per adjusted occupied bed was 2.52 in November versus the budgeted 2.54. The graph below shows the combined (Hospital including South Shore) productive and paid FTE's per adjusted occupied bed for FY 2009.



Benefits

For the month of November benefit costs were favorable to budget by \$148,521 as a result of \$165,167 of stop loss recoveries received in November.

Supplies

Supply costs were \$107,426 or 15.0% favorable to the fixed budget in November. This variance from the fixed operating budget was the result of favorable variances in the medical supplies area (prosthetics \$50,000 and pharmacy \$39,000). Additionally, we determined that we had been treating the monthly Sodexo pre-billing for the subsequent month as a current period expense. This December expense, \$40,000 has been reclassified in November so that only the current period expense is reflected.

Purchased Services

Purchased services expense was \$40,400 unfavorable to budget in November primarily as a result additional collections generated by two revenue cycle projects.

- The first relates to the collection of additional payments (\$83,644) from the Medicare program for services provided to Medicare beneficiaries from October 2006 through March 2008 that were discharged from the hospital to either a Skilled Nursing Facility (SNF) or to a Home Health Agency (HHA). Under current DRG payment rules, if the patient receives skilled rehabilitation level services at a SNF or starts HHA with 72 hours of discharge we must share the DRG payment with these facilities. In these cases it was determined that these patients had not met these requirements. As a result we incurred approximately \$21,000 in fees for the collection of these previously under paid cases.

- The second project was the evaluation of previously paid workers compensation claims dating back some ten (10) years. This project which was started in late August and has just started to see recoveries from this project, resulted in fees of approximately \$15,000 on additional collections of \$49,845. This is an ongoing project which we expect to recover additional payments on previously incorrectly adjudicated claims.

Insurance

Insurance costs continue to be under budget as result of the favorable experience in our professional liability insurance program. We expect that for FY 2009 a savings of approximately 25% will be achieved in professional liability insurance rates over that of the prior year due to improved loss experience.

ALAMEDA HOSPITAL

**Balance Sheet
November 30, 2008**

	<u>November 30, 2008</u>	<u>October 31, 2008</u>	<u>Audited June 30, 2008</u>
Assets			
<i>Current assets:</i>			
Cash and cash equivalents	\$ 839,398	\$ 1,444,520	\$ 4,520,157
Net Accounts Receivable	8,329,846	8,218,420	7,944,522
Net Accounts Receivable %	22.20%	21.80%	20.17%
Inventories	1,022,550	1,012,723	1,048,503
Est.Third-party payer settlement receivable	303,420	293,335	245,115
Other assets	<u>6,924,905</u>	<u>6,946,648</u>	<u>7,270,116</u>
Total Current Assets	<u>17,420,119</u>	<u>17,915,646</u>	<u>21,028,413</u>
 Restricted by contributors and grantors for capital acquisitions and research-Jaber Estate	 522,927	 512,931	 602,817
Total fixed assets, net of accumulated depreciation	<u>7,233,802</u>	<u>7,287,745</u>	<u>7,450,244</u>
 Total Assets	 <u>\$ 25,176,848</u>	 <u>\$ 25,716,322</u>	 <u>\$ 29,081,474</u>
Liabilities and Net Assets			
<i>Current Liabilities:</i>			
Accounts payable and accrued expenses	4,842,379	4,763,709	5,423,290
Loans Payable	2,320,000	2,340,000	2,400,000
Payroll and benefit related accruals	4,160,623	4,318,014	4,099,642
Est.Third-party payer settlement payable	1,893,006	1,893,006	1,893,006
Other liabilities	<u>4,206,860</u>	<u>4,683,860</u>	<u>7,351,860</u>
Total Current Liabilities	<u>17,422,868</u>	<u>17,998,589</u>	<u>21,167,798</u>
<i>Long-Term Liabilities:</i>			
Long-term pension liabilities	(44,701)	(52,678)	(65,212)
Long-term IBNR reserves	120,000	120,000	120,000
Capitalized Lease payable	<u>136,162</u>	<u>147,632</u>	<u>425,862</u>
Total Long-Term Liabilities	<u>211,461</u>	<u>214,954</u>	<u>480,650</u>
Total Liabilities	<u>17,634,329</u>	<u>18,213,543</u>	<u>21,648,448</u>
<i>Net Assets</i>			
Unrestricted Funds	7,019,592	6,989,848	6,830,209
Restricted Funds	<u>522,927</u>	<u>512,931</u>	<u>602,817</u>
Net Assets	<u>7,542,519</u>	<u>7,502,779</u>	<u>7,433,026</u>
Total Liabilities and Net Assets	<u>\$ 25,176,848</u>	<u>\$ 25,716,322</u>	<u>\$ 29,081,474</u>

ALAMEDA HOSPITAL - SOUTH SHORE ONLY
Summary Statement of Revenues, Expenses
For the Five Months Ended November 30, 2008

	Current Month - Fixed Budget				Year to Date - Fixed Budget					
	Actual	Budget	Variance	Var %	FY08	Actual	Budget	Variance	Var %	FY08
Operating revenues:										
IP Revenue	\$ 408,679	\$ 397,554	\$ 11,125	2.8%	\$ -	\$ 1,538,025	\$ 1,369,221	\$ 168,804	12.3%	\$ -
OP Revenue	-	-	-	0.0%	-	-	-	-	0.0%	-
Total revenue	\$ 408,679	\$ 397,554	\$ 11,125	2.8%	\$ -	\$ 1,538,025	\$ 1,369,221	\$ 168,804	12.3%	\$ -
Less: Deductions from Revenue	(250,689)	(190,100)	(60,589)	-31.9%	-	(954,739)	(682,871)	(271,868)	-39.8%	-
Bad Debt	-	(9,661)	9,661	100.0%	-	-	(9,661)	9,661	100.0%	-
Charity	-	(1,869)	1,869	100.0%	-	-	(1,869)	1,869	100.0%	-
Net patient service revenue	\$ 157,990	\$ 195,925	\$ (37,935)	-19.4%	\$ -	\$ 583,286	\$ 674,821	\$ (91,536)	-13.6%	\$ -
	38.66%	49.28%			0.00%	37.92%	49.29%			0.00%
Other revenue	-	-	-	0.0%	-	-	-	-	0.0%	-
Total operating revenues	\$ 157,990	\$ 195,925	\$ (37,935)	-19.4%	\$ -	\$ 583,286	\$ 674,821	\$ (91,536)	-13.6%	\$ -
Operating expenses:										
Salaries	\$ 99,797	\$ 112,316	\$ 12,519	11.1%	\$ -	\$ 357,963	\$ 391,199	\$ 33,236	8.5%	\$ -
Registry	-	-	-	0.0%	-	-	-	-	0.0%	-
Benefits	10,479	33,129	22,650	68.4%	-	24,567	115,221	90,654	78.7%	-
Professional Fees	18,172	13,402	(4,770)	-35.6%	-	82,639	65,636	(17,003)	-25.9%	-
Supplies	7,478	9,995	2,517	25.2%	-	37,236	34,745	(2,491)	-7.2%	-
Purchase Services	2,669	1,480	(1,189)	-80.3%	-	16,130	5,145	(10,985)	-213.5%	-
Rents and Leases	8,686	7,732	(954)	-12.3%	-	27,644	26,879	(765)	-2.8%	-
Utilities and Telephone	2,311	2,546	235	9.2%	-	8,756	8,850	94	1.1%	-
Insurance	974	854	(120)	-14.1%	-	3,442	2,969	(473)	-15.9%	-
Interest Expense	-	-	-	0.0%	-	-	-	-	0.0%	-
Depreciation and amortization	875	1,002	127	12.7%	-	3,055	3,484	429	12.3%	-
Other Operating Expenses	2,902	1,126	(1,776)	-157.7%	-	7,751	3,915	(3,836)	-98.0%	-
Total operating expenses	\$ 154,343	\$ 183,582	\$ 29,239	15.9%	\$ -	\$ 569,183	\$ 658,043	\$ 88,860	13.5%	\$ -
Operating gain (loss)	\$ 3,647	\$ 12,343	\$ (8,696)	-70.5%	\$ -	\$ 14,103	\$ 16,778	\$ (2,676)	15.9%	\$ -
Non-operating revenues (expenses):	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Excess of revenues over expenses	\$ 3,647	\$ 12,343	\$ (8,696)	-70.5%	\$ -	\$ 14,103	\$ 16,778	\$ (2,676)	15.9%	\$ -

ALAMEDA HOSPITAL - COMBINED
Summary Statement of Revenues, Expenses
For the Five Months Ended November 30, 2008

	Current Month - Per Adjusted Patient Day			Year to Date - Per Adjusted Patient Day		
	Actual	Budget	Variance	Actual	Budget	Variance
Operating revenues:						
IP Revenue	\$ 2,507	\$ 2,913	\$ (406)	\$ 2,984	\$ 3,070	\$ (86)
OP Revenue	2,050	2,081	(21)	2,306	2,247	59
Total revenue	\$ 4,557	\$ 4,994	\$ (427)	\$ 5,290	\$ 5,317	\$ (27)
Less: Deductions from Revenue	(3,368)	(3,709)	341	(3,898)	(3,903)	5
Bad Debt	(120)	(94)	(26)	(166)	(150)	(16)
Charity	(5)	(18)	13	(23)	(24)	1
Net patient service revenue	\$ 1,074	\$ 1,173	\$ (99)	\$ 1,203	\$ 1,240	\$ (37)
	23.52%	23.49%	22.07%	22.74%	23.32%	22.46%
Other revenue	5	2	3	3	2	1
Total operating revenues	\$ 1,079	\$ 1,175	\$ (96)	\$ 1,206	\$ 1,242	\$ (36)
Operating expenses:						
Salaries	\$ 611	\$ 680	\$ 69	\$ 664	\$ 709	\$ 45
Registry	56	25	(31)	51	28	(23)
Benefits	154	201	47	192	211	19
Professional Fees	61	64	3	72	69	(3)
Supplies	134	165	31	175	178	3
Purchase Services	84	78	(6)	79	84	5
Rents and Leases	11	12	1	14	13	(1)
Utilities and Telephone	15	17	2	17	18	1
Insurance	10	14	4	9	14	5
Interest Expense	3	3	-	3	3	-
Depreciation and amortization	26	26	-	29	28	(1)
Other Operating Expenses	16	15	(1)	17	16	(1)
Total operating expenses	\$ 1,181	\$ 1,300	\$ 119	\$ 1,322	\$ 1,371	\$ 49
Operating gain (loss)	\$ (102)	\$ (125)	\$ 23	\$ (116)	\$ (129)	\$ 13
Non-operating revenues (expenses):	\$ 108	\$ 116	\$ (8)	\$ 118	\$ 124	\$ (6)
Excess of revenues over expenses	6	(9)	15	2	(5)	7
			166.7%			140.0%
			(224)			(81)

ALAMEDA HOSPITAL - HOSPITAL ONLY
Summary Statement of Revenues, Expenses
For the Five Months Ended November 30, 2008

	Current Month - Per Adjusted Patient Day				Year to Date - Per Adjusted Patient Day			
	Actual	Budget	Variance	Var %	Actual	Budget	Variance	Var %
Operating revenues:								
IP Revenue	\$ 3,075	\$ 3,749	\$ (674)	-18.0%	\$ 3,525	\$ 3,680	\$ (155)	-4.2%
OP Revenue	2,619	2,764	(145)	-5.2%	2,792	2,754	38	1.4%
Total revenue	\$ 5,694	\$ 6,513	\$ (819)	-12.6%	\$ 6,317	\$ 6,434	\$ (117)	-1.8%
Less: Deductions from Revenue	(4,212)	(4,869)	657	13.5%	(4,665)	(4,742)	77	1.6%
Bad Debt	(153)	(122)	(31)	-25.4%	(201)	(183)	(18)	-9.8%
Charity	(6)	(24)	18	75.0%	(27)	(29)	2	6.9%
Net patient service revenue	\$ 1,323	\$ 1,498	\$ (175)	-11.7%	\$ 1,424	\$ 1,480	\$ (56)	-3.8%
	23.23%	23.00%		22.07%	22.54%	23.00%		22.46%
Other revenue	6	3	3	100.0%	4	3	1	33.3%
Total operating revenues	\$ 1,329	\$ 1,501	\$ (172)	-11.5%	\$ 1,428	\$ 1,483	\$ (55)	-3.7%
Operating expenses:								
Salaries	\$ 749	\$ 869	\$ 120	13.8%	\$ 784	\$ 846	\$ 62	7.3%
Registry	71	34	(37)	-108.8%	62	34	(28)	-82.4%
Benefits	193	257	64	24.9%	231	252	21	8.3%
Professional Fees	73	81	8	9.9%	83	80	(3)	-3.8%
Supplies	168	216	48	22.2%	209	216	7	3.2%
Purchase Services	106	104	(2)	-1.9%	95	103	8	7.8%
Rents and Leases	12	14	2	14.3%	15	14	(1)	-7.1%
Utilities and Telephone	19	21	2	9.5%	20	22	2	9.1%
Insurance	13	18	5	27.8%	11	18	7	38.9%
Interest Expense	3	4	1	25.0%	4	4	-	0.0%
Depreciation and amortization	33	34	1	2.9%	35	34	(1)	-2.9%
Other Operating Expenses	19	20	1	5.0%	20	20	-	0.0%
Total operating expenses	\$ 1,459	\$ 1,672	\$ 213	12.7%	\$ 1,569	\$ 1,643	\$ 74	4.5%
Operating gain (loss)	\$ (130)	\$ (171)	\$ 41	24.0%	\$ (141)	\$ (160)	\$ 19	11.9%
Non-operating revenues (expenses):	\$ 138	\$ 154	\$ (16)	-10.4%	\$ 143	\$ 152	\$ (9)	-5.9%
Excess of revenues over expenses	8	(17)	25	147.1%	2	(8)	10	125.0%

ALAMEDA HOSPITAL - SOUTH SHORE ONLY
Summary Statement of Revenues, Expenses
For the Five Months Ended November 30, 2008

	Current Month - Per Adjusted Patient Day				Year to Date - Per Adjusted Patient Day					
	Actual	Budget	Variance	Var %	FY08	Actual	Budget	Variance	Var %	FY08
Operating revenues:										
IP Revenue	\$ 713	\$ 602	\$ 111	18.4%	\$ -	\$ 702	\$ 603	\$ 99	16.4%	\$ -
OP Revenue	-	-	-	0.0%	-	-	-	-	0.0%	-
Total revenue	\$ 713	\$ 602	\$ 111	18.4%	\$ -	\$ 702	\$ 603	\$ 99	16.4%	\$ -
Less: Deductions from Revenue	(438)	(288)	(150)	-52.1%	-	(436)	(301)	(135)	-44.9%	-
Bad Debt	-	(15)	15	100.0%	-	-	(4)	4	100.0%	-
Charity	-	(3)	3	100.0%	-	-	(1)	1	100.0%	-
Net patient service revenue	\$ 275	\$ 296	\$ (21)	-7.1%	\$ -	\$ 266	\$ 297	\$ (31)	-10.4%	\$ -
	38.57%	49.17%			0.00%	37.89%	49.25%			0.00%
Other revenue	-	-	-	0.0%	-	-	-	-	0.0%	-
Total operating revenues	\$ 275	\$ 296	\$ (21)	-7.1%	\$ -	\$ 266	\$ 297	\$ (31)	-10.4%	\$ -
Operating expenses:										
Salaries	\$ 174	\$ 170	\$ (4)	-2.4%	\$ -	\$ 163	\$ 172	\$ 9	5.2%	\$ -
Registry	-	-	-	0.0%	-	-	-	-	0.0%	-
Benefits	18	50	32	64.0%	-	11	51	40	78.4%	-
Professional Fees	32	20	(12)	-60.0%	-	38	29	(9)	-31.0%	-
Supplies	13	15	2	13.3%	-	17	15	(2)	-13.3%	-
Purchase Services	5	2	(3)	-150.0%	-	7	2	(5)	-250.0%	-
Rents and Leases	15	12	(3)	-25.0%	-	13	12	(1)	-8.3%	-
Utilities and Telephone	4	4	-	0.0%	-	4	4	-	0.0%	-
Insurance	2	1	(1)	-100.0%	-	2	1	(1)	-100.0%	-
Interest Expense	-	-	-	0.0%	-	-	-	-	0.0%	-
Depreciation and amortization	2	2	-	0.0%	-	1	2	1	50.0%	-
Other Operating Expenses	5	2	(3)	-150.0%	-	4	2	(2)	-100.0%	-
Total operating expenses	\$ 270	\$ 278	\$ 8	2.9%	\$ -	\$ 260	\$ 290	\$ 30	10.3%	\$ -
Operating gain (loss)	\$ 5	\$ 18	\$ (13)	-72.2%	\$ -	\$ 6	\$ 7	\$ (1)	14.3%	\$ -
Non-operating revenues (expenses):	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Excess of revenues over expenses	5	18	(13)	-72.2%	-	6	7	(1)	14.3%	-

ALAMEDA HOSPITAL
KEY STATISTICS
November, 2008

	ACTUAL NOVEMBER 2008	CURRENT FIXED BUDGET	VARIANCE (UNDER)OVER	%	NOVEMBER 2007	YTD NOVEMBER 2008	YTD FIXED BUDGET	VARIANCE	%	YTD NOVEMBER 2007
Discharges:										
Total Acute	227	227	-	0.0%	222	1,153	1,135	18	1.6%	1,144
Total Sub-Acute	3	2	1	50.0%	2	18	10	8	80.0%	7
Total Skilled Nursing	15	9	6	66.7%	11	46	30	16	53.3%	46
	245	238	7	2.9%	235	1,217	1,175	42	3.6%	1,197
Patient Days:										
Total Acute	948	907	41	4.5%	807	4,758	4,539	219	4.8%	4,370
Total Sub-Acute	1,014	1,000	14	1.4%	848	5,029	5,054	(25)	-0.5%	4,269
Total Skilled Nursing	573	660	(87)	-13.2%	95	2,192	2,272	(80)	-3.5%	465
	2,535	2,567	(32)	-1.2%	1,750	11,979	11,865	114	1.0%	9,104
Average Length of Stay										
Total Acute	4.18	4.00	0.18	4.5%	3.64	4.13	4.00	0.13	3.2%	3.82
Average Daily Census										
Total Acute	31.60	30.23	1.32	4.4%	26.90	31.10	29.67	1.43	4.8%	28.56
Total Sub-Acute	33.60	33.33	0.45	1.4%	28.27	32.87	33.03	(0.16)	-0.5%	27.90
Total Skilled Nursing	19.10	22.00	(2.81)	-12.8%	3.17	20.68	21.43	(0.75)	-3.5%	3.04
	84.50	85.57	(1.03)	-1.2%	58.33	84.65	84.13	1.27	1.5%	59.50
Emergency Room Visits	1,412	1,453	(41)	-2.8%	1,390	6,865	7,347	(482)	-6.6%	7,239
Outpatient Registrations	2,195	2,462	(267)	-10.8%	2,535	12,431	12,659	(228)	-1.8%	12,764
Surgery Cases:										
Inpatient	47	61	(14)	-23.0%	46	288	279	9	3.2%	258
Outpatient	385	346	39	11.3%	345	2,130	1,785	345	19.3%	1,919
	432	407	25	6.1%	391	2,418	2,064	354	17.2%	2,177
Kaiser Inpatient Cases	5	-	5	-	4	40	-	40	-	23
Kaiser Eye Cases	143	118	25	21.2%	127	811	603	208	34.5%	680
Kaiser Outpatient Cases	123	116	7	6.0%	101	771	637	134	21.0%	620
Total Kaiser Cases	271	234	37	15.8%	232	1,622	1,240	382	30.8%	1,323
% Kaiser Cases	62.7%	57.5%	5	59.3%	59.3%	67.1%	60.1%	6.0%	60.8%	60.8%
Adjusted Occupied Bed	153.93	142.18	(11.75)	-8.3%	104.16	138.81	134.47	4.34	3.2%	129.90
Productive FTE	388.31	360.54	(27.77)	-7.7%	339.70	368.90	355.34	(13.56)	-3.8%	350.32
Total FTE	433.33	433.44	0.11	0.0%	400.84	418.20	415.14	(3.06)	-0.7%	407.29
Productive FTE/Adj. Occ. Bed	2.52	2.54	0.01	0.5%	3.26	2.66	2.64	(0.02)	-0.6%	2.70
Total FTE/Adj. Occ. Bed	2.82	3.05	0.23	7.7%	3.85	3.01	3.09	0.07	2.4%	3.14

The logo for Alameda Hospital features the name "Alameda Hospital" in a serif font, with a large, dark, curved swoosh element that starts above the 'A' and ends below the 'l'.

CITY OF ALAMEDA HEALTH CARE DISTRICT

ALAMEDA HOSPITAL

UNAUDITED

FINANCIAL STATEMENTS

FOR THE

PERIOD ENDING

12/31/08

ALAMEDA HOSPITAL
City of Alameda Health Care District
December 31, 2008

<u>Table of Contents:</u>	<u>Page</u>
Financial Management Discussion	1 - 11
Balance Sheet	12
Statement of Revenue and Expenses	13 - 15
Statement of Revenue and Expenses - Per Adjusted Patient Day	16 - 18
Key Statistics for Current Month and Year-to-Date	19
Twelve Month Rolling Cash Projection	20 - 21

ALAMEDA HOSPITAL

December 31, 2008

The management of the Alameda Hospital (the Hospital) has prepared this discussion and analysis in order to provide an overview of the Hospital's performance for the period ending December 31, 2008 in accordance with the Governmental Accounting Standards Board Statement No. 34, *Basic Financials Statements; Management's Discussion and Analysis for State and Local Governments*. The intent of this document is to provide additional information on the Hospital's financial performance as a whole.

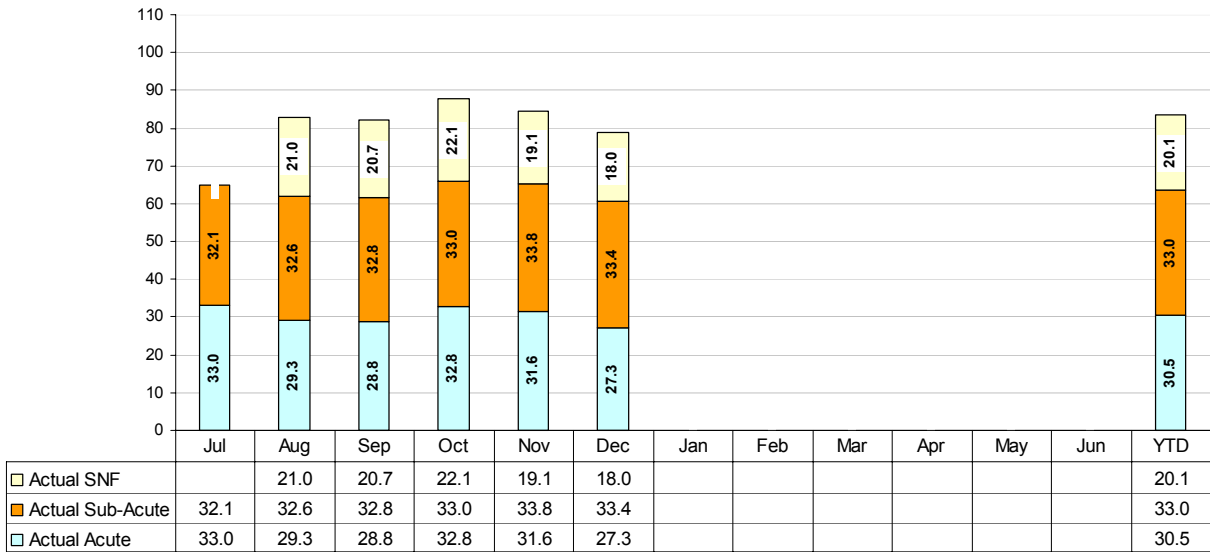
Financial Overview as of December 31, 2008

- Total assets on the balance sheet decreased by \$253,117 from the prior month as a result of an increase in cash and cash equivalents of \$2,405,587, an increase of \$220,736 in net accounts receivable offset by decreases in other assets of \$2,993,374 and net fixed assets of \$81,092.
- Total cash and cash equivalents for December increased by \$2,405,587 which increased our day's cash on hand to 18.2 as compared to 4.7 in the prior month. The increase in cash and cash equivalents was primarily the result of the receipt of the first installment of the 2008/2009 parcel taxes.
- Net patient accounts receivable increased in December by \$220,736 compared to an increase of \$111,426 in November. Accounts receivable days declined to 50 as compared to 51 in November.
- Total liabilities decreased by \$305,240 compared to a decrease of \$579,214 in the prior month. This decrease was the result of a decrease of \$477,000 in other liabilities and \$250,736 in accounts payable. These decreases were offset by an increase of \$405,883 in payroll and benefit related accruals.
- Accounts payable at December 31st was \$4,591,643, which represents a decrease of \$250,736 from the prior month. As a result, days in accounts payable decreased to 84 compared to prior month which was at 85.
- Payroll and benefit related accruals increased by \$405,883 from the prior month. This increase was primarily the result of requiring eleven (11) days of payroll accruals at month-end versus only eight (8) days at November 30th.
- Other liabilities decreased by \$477,000 as a result of the amortization of one month's deferred revenue related to the 2008/2009 parcel tax revenues.
- Combined total revenue was less than budget by \$957,469 or 4.2% and net patient revenue was unfavorable to budget by \$136,738 or 2.5%. Inpatient revenue, excluding South Shore, was less than budgeted by 8.8% while outpatient revenue, excluding South Shore, was greater than budgeted by 3.0%. On an adjusted patient day basis total revenue, excluding South Shore, was \$6,581 compared to a budgeted amount of \$6,484.
- Total patient days were 2,441 and included 559 patient days from the South Shore facility as compared to the prior month's total patient days of 2,535 (573 South Shore days included) and the prior year's 1,793 total patient days. The average daily acute care census was 27.3 compared to a budget of 34.3 and 31.6 in the prior month; the average daily Sub-Acute census was 33.4 versus a budget of 33.4 and 33.8 in the prior month and the newly added South Shore unit had an average daily census of 18.0 versus a budget of 22.0 and prior month census of 19.1, respectively.
- ER visits were 1,471 or 4.0% less than the budgeted 1,533 visits and slightly greater, (5), than the prior year's visits of 1,466.
- Total surgery cases were 4.3% greater than budget, with Kaiser surgical cases making up 272 or 65.7% of the total cases. Alameda physician surgical cases declined slightly from prior month levels to 142 from the 161 cases in November.
- Combined excess revenues over expense (profit) for December was \$20,129 versus a combined budgeted excess

of revenues over expense of (profit) of \$16,685. This brings the year-to-date excess of revenues over expenses (profit) to \$90,534 or 206.7% better than budget. In looking at the Hospital only performance, excess expense over revenue (loss) was \$22,719 for the month of December and the year to date excess revenues over expenses (profit) decreased to \$33,583 for the six months ending December 31, 2008, which is still 128.8% better than budgeted.

Volumes

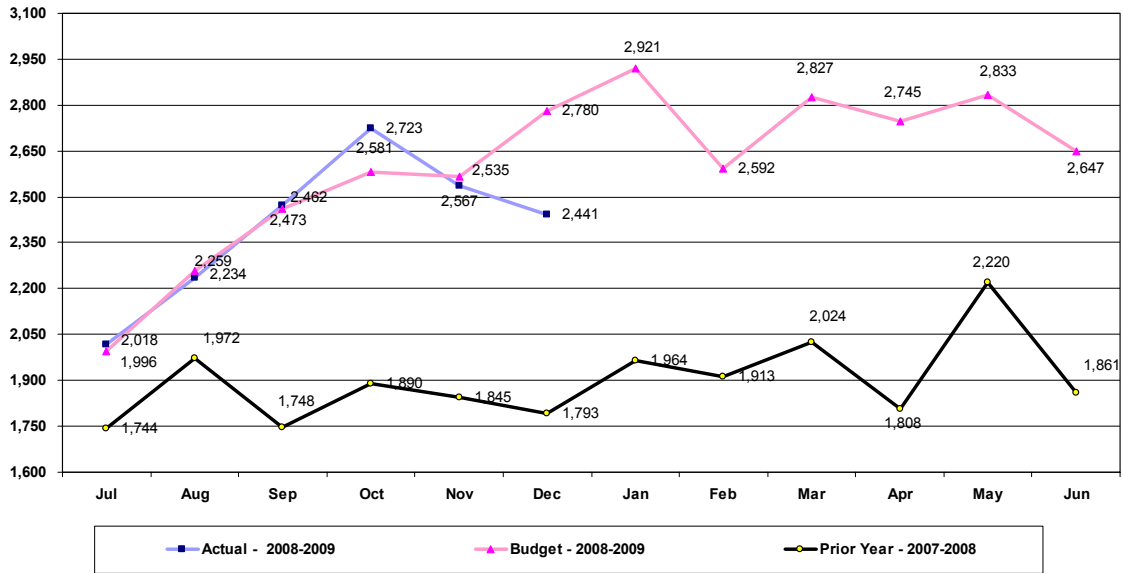
Overall actual daily census was 78.7 versus a budget of 89.7. Acute average daily census was 27.3 versus a budget of 34.3, Sub-Acute average daily census was 33.4 versus a budget of 33.4 and the South Shore unit had an average daily census of 18.0 versus a budget of 22.0.



Actual	65.1	82.9	82.3	87.9	84.5	78.7							83.5
Budget	64.4	83.2	82.1	83.3	85.6	89.7							85.1

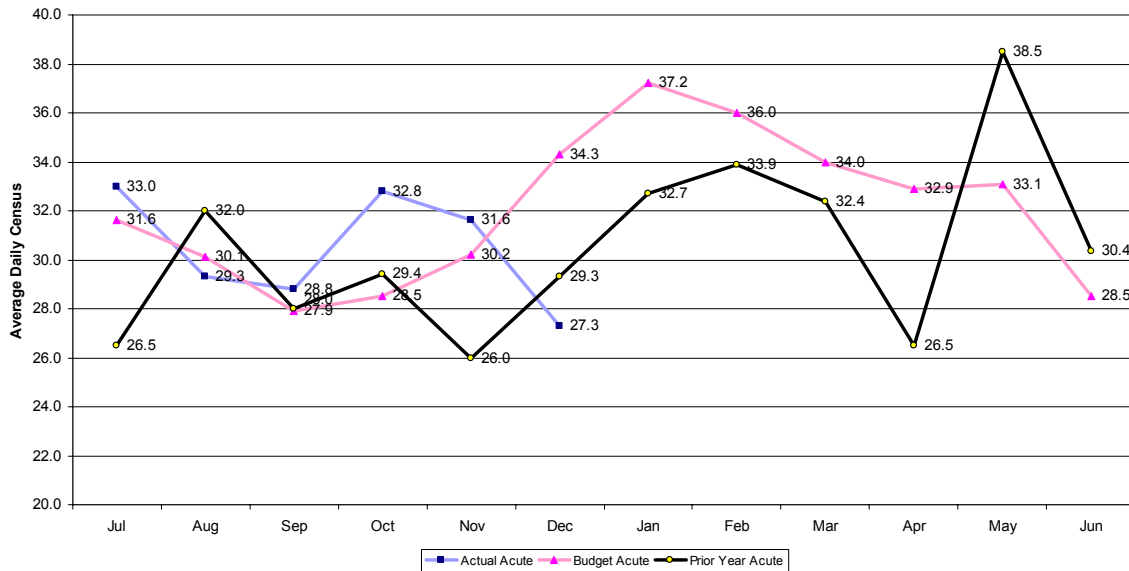
Total patient days in December were 12.2% less than budgeted but were 5.0% better than the prior year after removing the South Shore patient days from the current year total patient day count. The graph on the following page shows the total patient days for the month of December including South Shore.

Total Patient Days



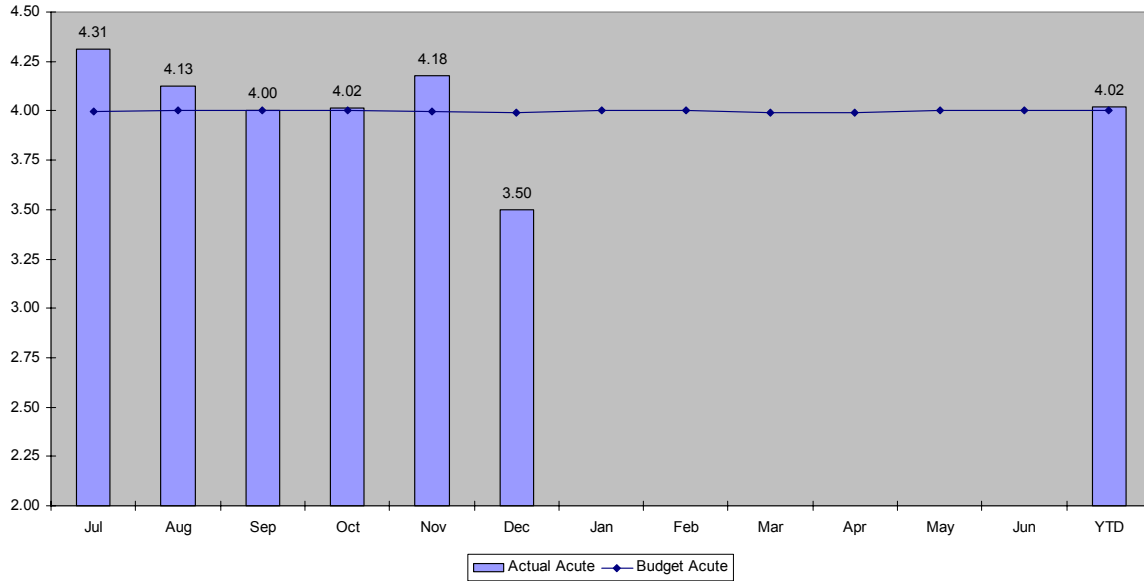
As we look at the various components of our volumes for the month of December we see that Acute care patient days were 20.2% (215 days) less than budgeted but only 6.7% (61 days) less than the prior year. While there is no definitive answer to the decline experienced in December some of the decline in volume may be attributable to the unseasonably warm weather that was experienced for month of the December.

Inpatient Acute Care Average Daily Census



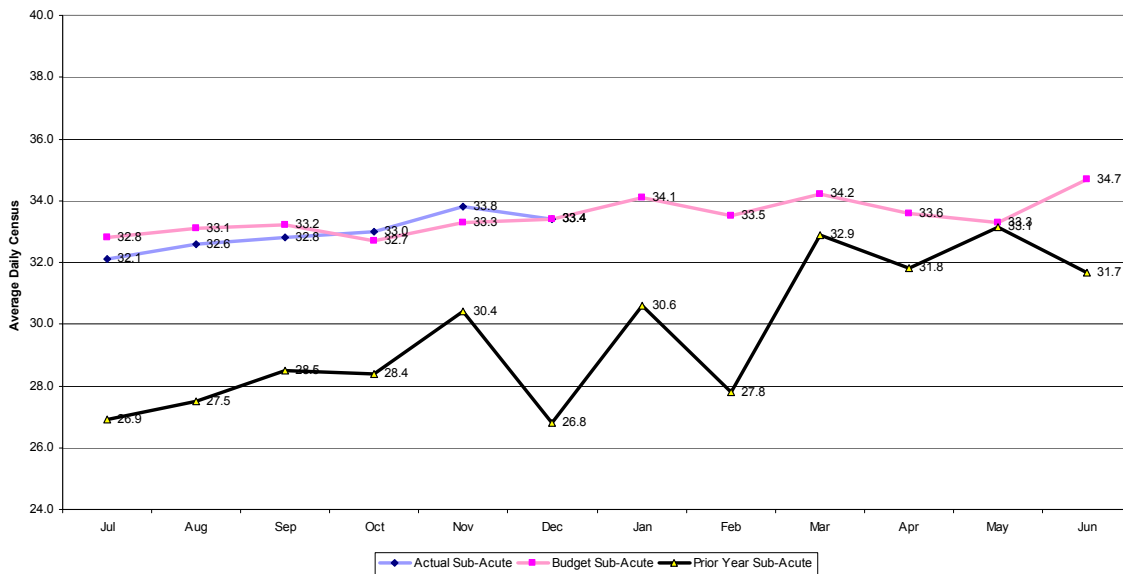
As a result of this decline in the number of acute care patients during the month and a lower case mix index (1.2081 versus the year to date average of 1.2889) the average length of stay for our acute care population declined to 3.50 in December.

Average Length of Stay



Sub-Acute patient days were almost equal to budget and 24.7% greater than the prior year. The following graph shows the Sub-Acute programs average daily census for the current fiscal year as compared to budget and the prior year.

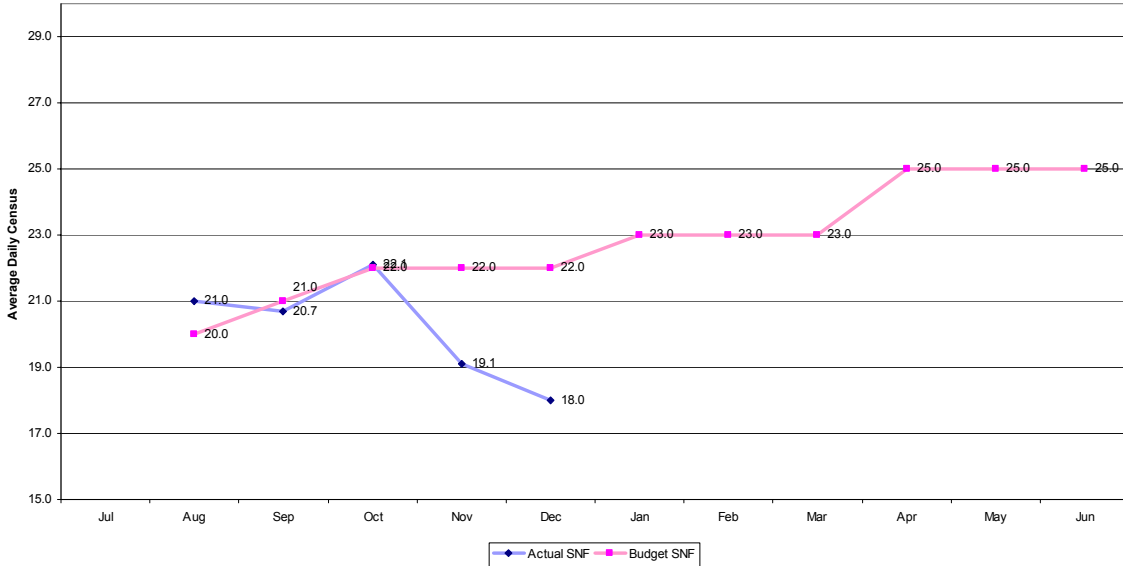
Sub-Acute Care Average Daily Census



The Skilled Nursing Unit (South Shore) patient days were 18.0% less than budgeted for the month of December and are 6.9% less than budgeted for the first five months (August 17th through December 31st) of operations. This unfavorable variance from our budgeted patient day expectations continues to be the result of shorter length of stay cases. While this has negatively impacted our volume measure (patient days) we have experienced a higher level of net reimbursement as we move from custodial care type patients to patients requiring a higher

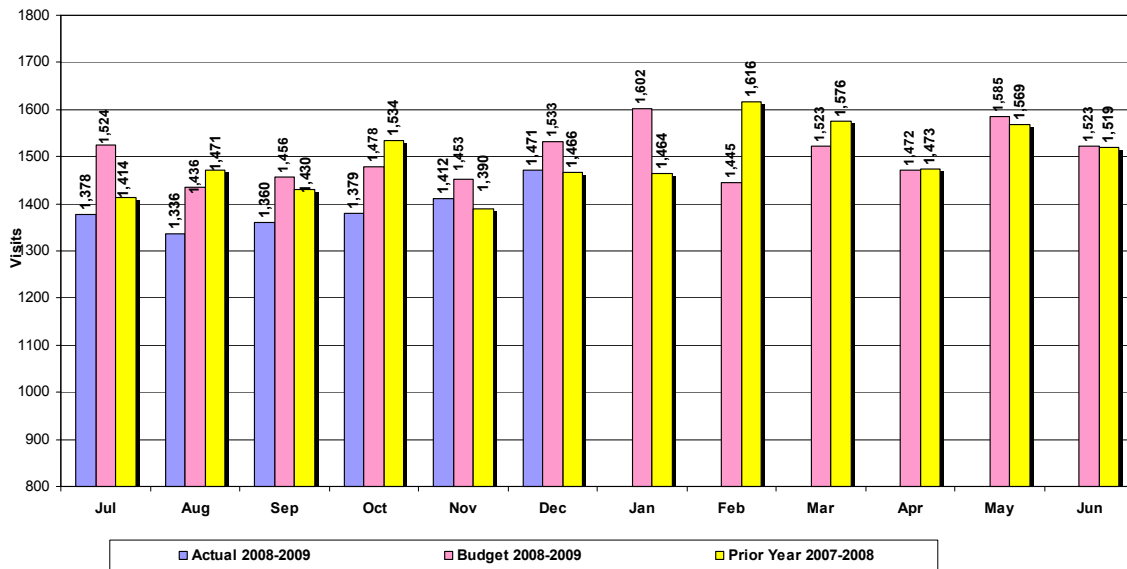
level of skilled nursing and ancillary care. The following graph shows the Skilled Nursing Unit average daily census as compared to budget by month.

Skilled Nursing Unit Average Daily Census



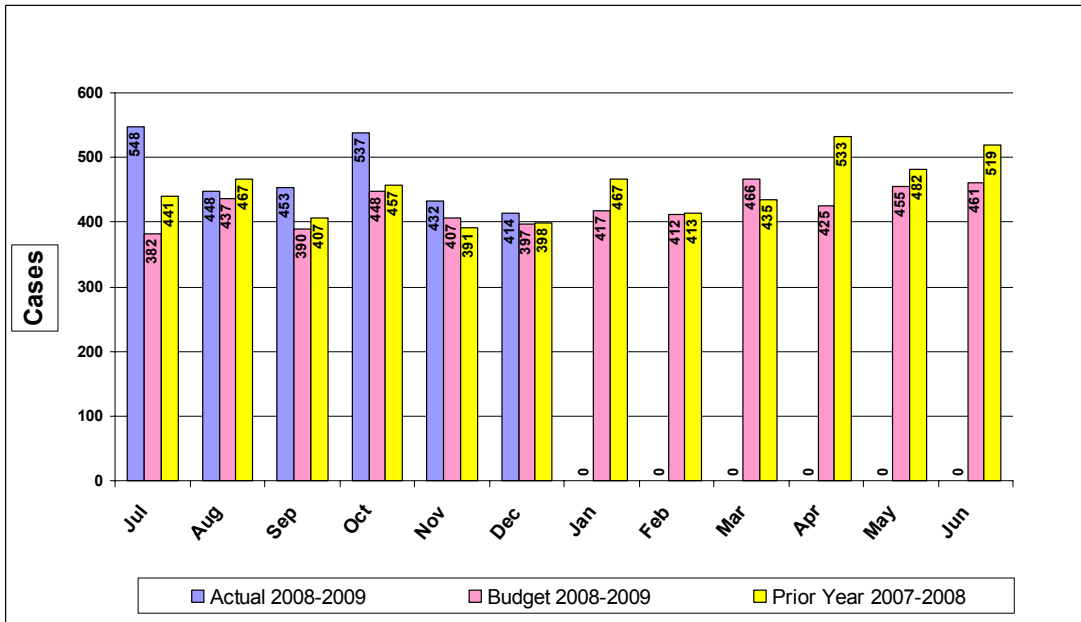
December ER visits were 4.0% less than budgeted but were almost equal to the prior year's activity of 1,466.

Emergency Care Center Visits



Surgery cases were 414 versus the 397 budgeted and 398 in the prior year. In December, Alameda physician cases declined to 142 cases versus 161 in the prior month. Kaiser related cases in December were almost identical to the month of November at 272 versus 271. Even though the number of cases were identical Kaiser same day surgery revenue decreased by \$203,449 over the prior month, our reimbursement for Kaiser Outpatient cases in December increased to 22.5% as compared to 21.3% of gross charges in November. The graph on the following page shows the total number of surgeries performed by month.

Surgical Cases

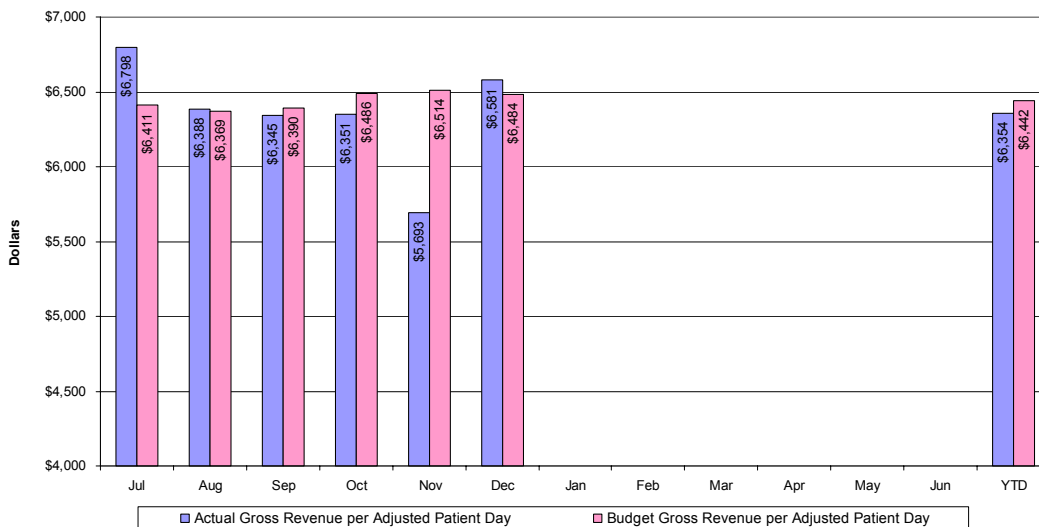


Income Statement – Hospital Only

Gross Patient Charges

Gross charges in December were less than budgeted by \$941,297 and was comprised of an unfavorable variance in inpatient services of \$1,203,205 while outpatient gross revenues again exceeded budget by \$261,908. On an adjusted patient day basis total patient revenue was \$6,581 versus the budgeted \$6,484 or a 1.5% favorable variance from budget. The unfavorable variance from budget in gross inpatient revenues was driven by a lower overall case mix index (1.2081 versus 1.2029) and Medicare case mix index (1.2239 versus 1.2459) in December versus November, respectively.

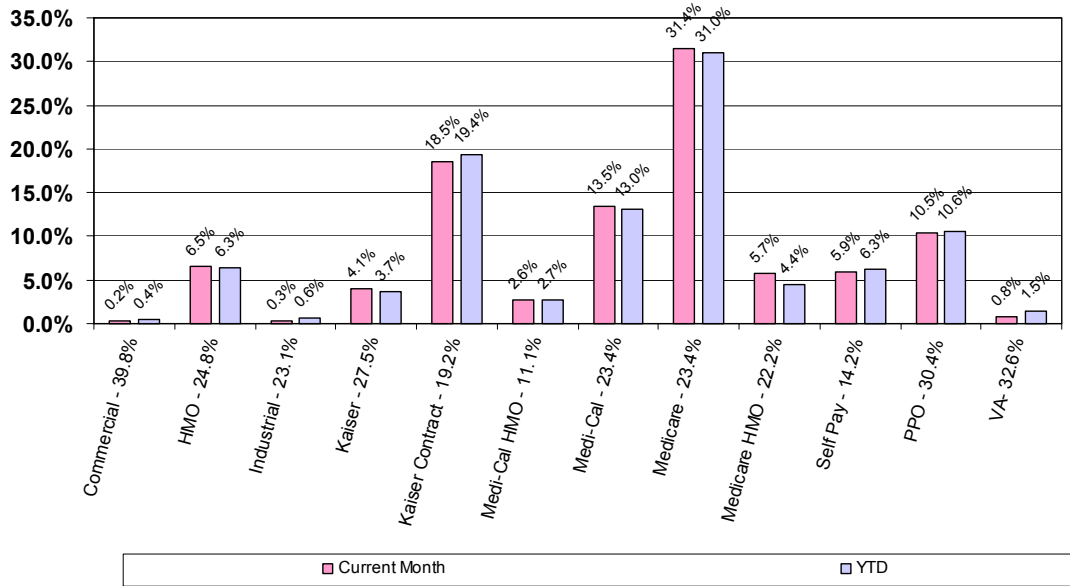
Gross Charges per Adjusted Patient Day



Payor Mix

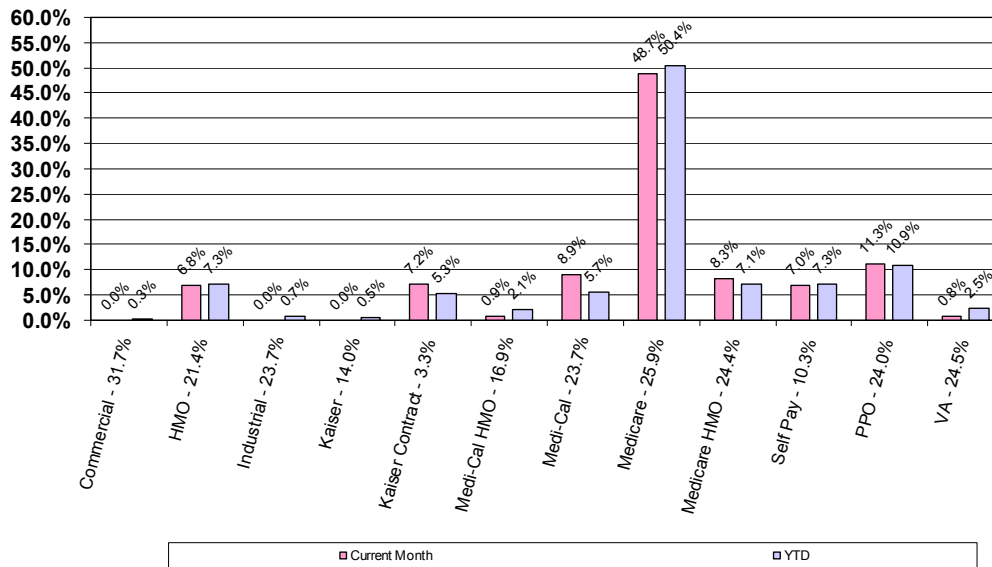
Medicare total gross revenue in December made up 31.4% our total gross patient charges with Kaiser again the second largest source of gross patient revenues at 22.6%. The graph below shows the percentage of revenues generated by each of the major payors for the current month and year-to-date as well as the current months expected reimbursement for each.

Combined Payor Mix



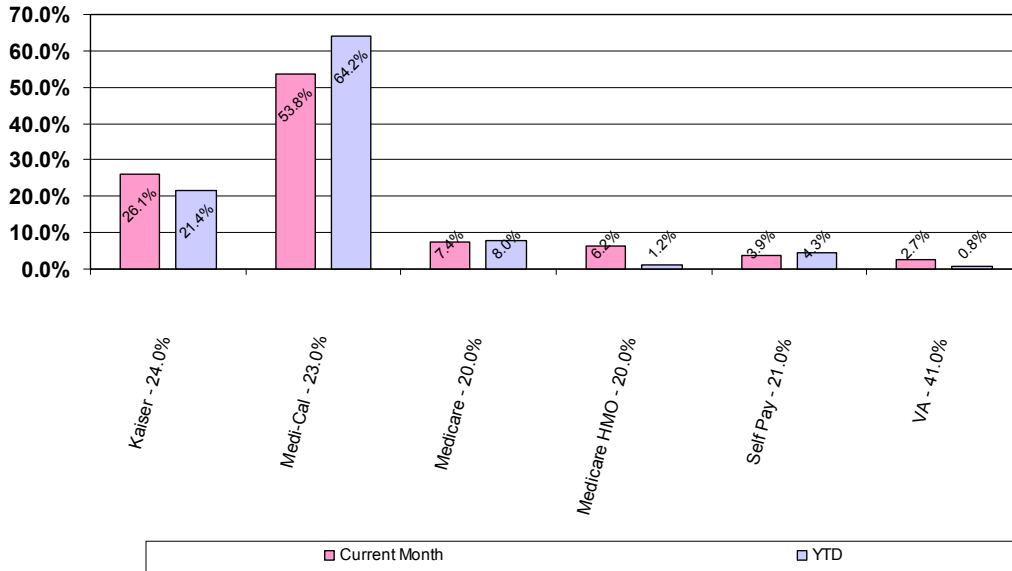
On the Hospital's inpatient acute side current month gross Medicare charges dropped below 50% of our total inpatient acute care gross revenues to 48.7% but remain above the 50% level for the fiscal year to date. In December there was one Medicare outlier case. As a result of the lower Medicare case mix index and the one outlier case our expected reimbursement for December inpatient Medicare cases was estimated to be 25.9%.

Inpatient Acute Care Payor Mix



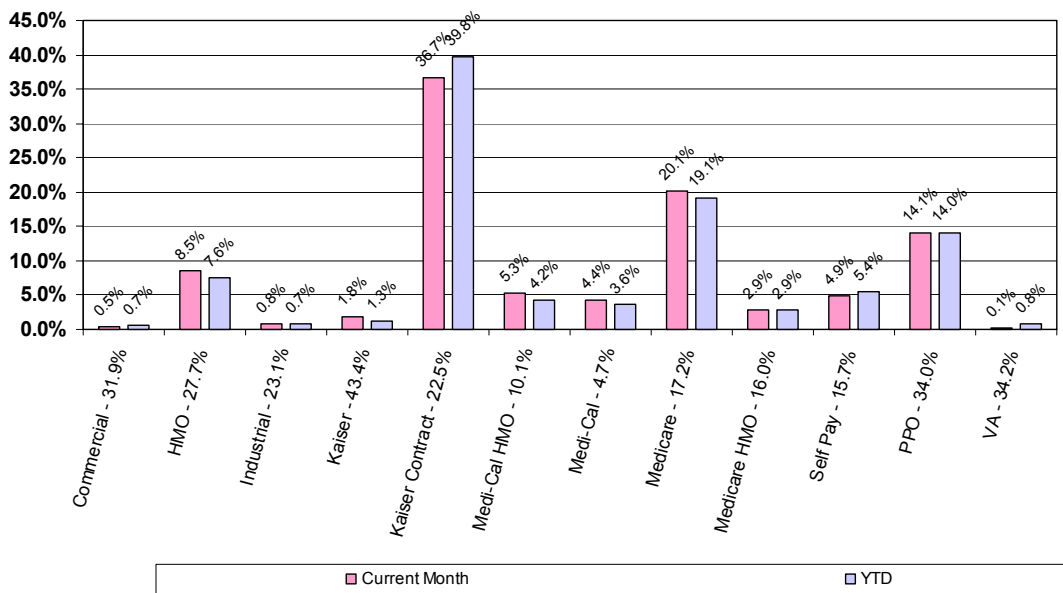
In December the Sub-Acute care program saw a slight shift in payor mix from Medi-Cal to Kaiser based on gross charges. Medi-Cal utilization for the current month was 53.8% of the Sub-Acute programs gross revenue while Kaiser utilization increased to 26.1% of the total Sub-Acute program revenues.

Inpatient Sub-Acute Care Payor Mix



The outpatient gross revenue payor mix for December was comprised of 38.5% Kaiser, 20.1% Medicare, 14.1% PPO and 8.5% HMO and is shown on the following graph.

Outpatient Services Payor Mix



Deductions From Revenue

Contractual allowances are computed as deductions from gross patient revenues based on the difference between gross patient charges and the contractually agreed upon rates of reimbursement with third party government-based programs such as Medicare, Medi-Cal and other third party payors such as Blue Cross.

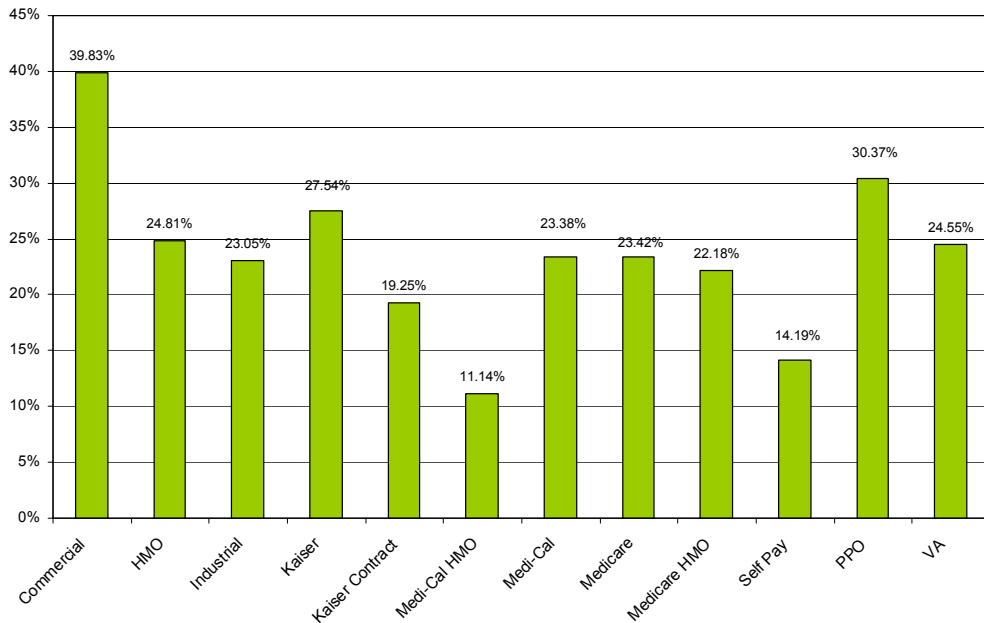
In the month of December contractual allowances, bad debt and charity adjustments (as a percentage of gross patient charges) were 76.7% versus the budgeted 77.0%. Contractual reserves in the month of December include additional reserves attributable to recently enacted legislation, AB 1183, the Health Budget Trailer Bill, which requires a reduction to the interim payment for inpatient services provided by hospitals that do not participate in the Selective Provider Contracting Program (commonly known as non-contract hospitals), unless the hospital meets exemption criteria contained in the bill. Effective October 1, 2008, AB 1183 requires the Department of Health Care Services (DHCS) to limit the amount paid to non-contract hospitals for inpatient services to the lesser of the interim per diem rate (28% of gross Medi-Cal patient charges) reduced by 10%, or the applicable regional average per diem contract rate for tertiary and non-tertiary hospitals (\$1,682 per Medi-Cal patient day) reduced by 5%. This resulted in additional contractual reserves of approximately \$49,000.

In December there were again no DRG “take backs” associated with the Recovery Audit Contractor (RAC) project. The new National Recovery Audit program is to be phased in state-by-state starting in the fall of 2008. A new RAC contractor has been selected by CMS for California, HealthDataInsights, Inc., with California RAC audits slated to resume sometime in the Spring of 2009.

Net Patient Service Revenue

Net patient service revenues are the resulting difference between gross patient charges and the deductions from revenue. This difference reflects what the actual anticipated cash payments the Hospital is to receive for the services provided. The graph on the following page shows the level of estimated reimbursement that the Hospital has experienced during the current month of fiscal year 2009 by major payor category.

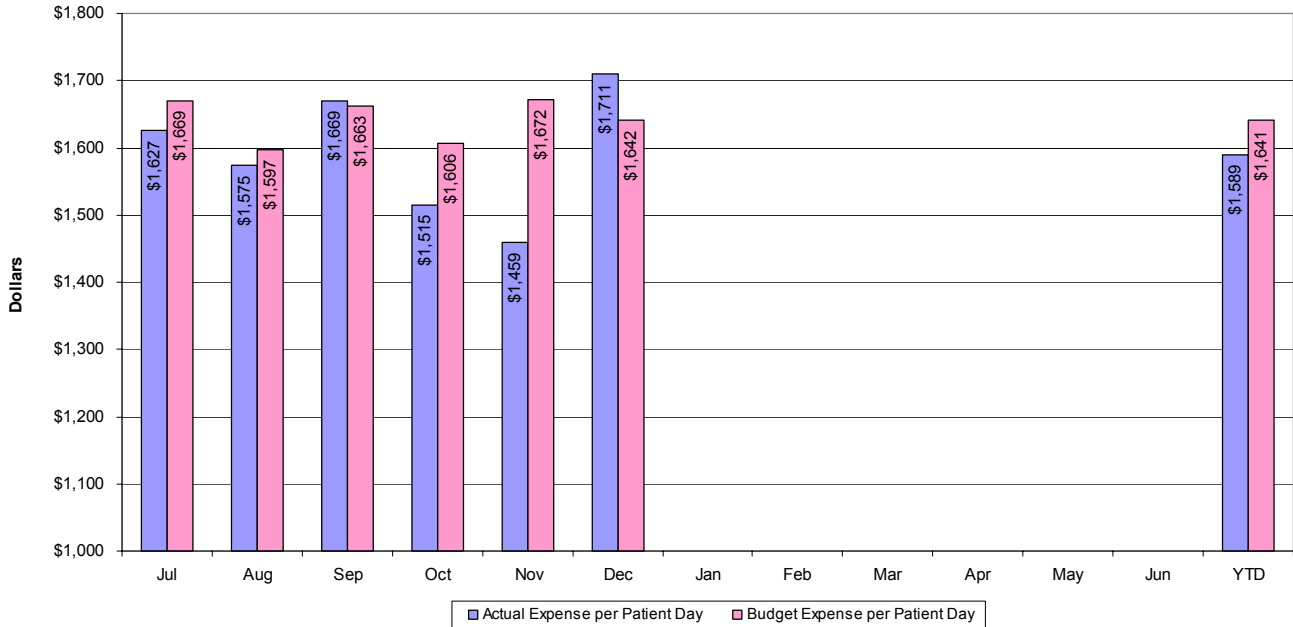
**Average Reimbursement % by Payor
 December 2008**



Total Operating Expenses

Total operating expenses were less than the fixed budget by \$92,900 or 1.6%. On an adjusted patient day basis, our cost per adjusted patient day increased to \$1,712 for the month and is primarily the result of the decrease in inpatient census experienced during the month. On a year to date basis our cost per adjusted patient day is 3.2% better than budgeted. The graph below shows the hospital operating expenses on an adjusted patient day basis for the 2009 fiscal year by month and is followed by explanations of the significant areas of variance.

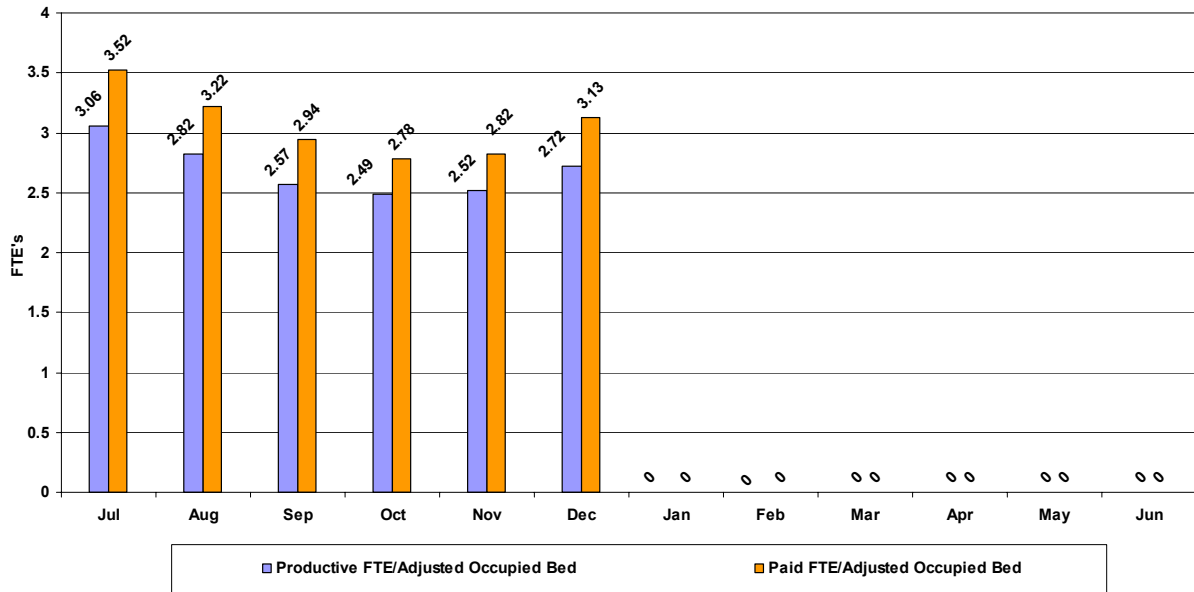
Expenses Per Adjusted Patient Day



Salary and Registry Expenses

Salary and registry costs combined were again favorable to the fixed budget by \$7,560. However, on an adjusted patient day basis we were \$51 per adjusted patient day unfavorable to budget in December. This unfavorable variance from budget on an adjusted patient day basis is primarily the result of the decrease in inpatient acute care days experienced in December. For the six months ending December 31, 2008, while the hospital is \$62,779 unfavorable to the fixed budget we are \$22 per adjusted patient day favorable to budgeted expectations through six months of operations. Combined productive FTE's per adjusted occupied bed was 2.72 in December versus the budgeted 2.51. As discussed previously, this unfavorable variance in December is being driven by the decline in inpatient acute care census and will be monitored closely in the upcoming months to ensure that staffing levels are adjusted to volume levels experienced at the hospital. The graph on the following page shows the combined (Hospital including South Shore) productive and paid FTE's per adjusted occupied bed for FY 2009.

FTE's per Adjusted Occupied Bed



Benefits

For the month of December benefit costs were favorable to budget by \$135,832 as a result of lower Social Security taxes (\$63,460) as more employees had reached the limit for this tax in December and the favorable adjustment of our health insurance IBNR (\$95,961) to the latest lag analysis which declined to \$770,648 from the most recent four month average of \$847,000.

Professional Fees

Professional fees were unfavorable to budget by \$27,022 as a result of legal bills from August and September totaling \$17,000 that had not been accrued and the payment of \$15,000 in unbudgeted recruitment bonus for an OB/GYN physician.

Insurance

Insurance costs continue to be under budget as result of the favorable experience in our professional liability insurance program. We expect that for FY 2009 a savings of approximately 25% will be achieved in professional liability insurance rates over that of the prior year due to improved loss experience.

Other Operating Expenses

This category was unfavorable to budget by \$32,129 as a result of recruitment fees for a new lab director (\$23,500) and consultant fees associated with the development of the Community Clinic (\$12,082).

ALAMEDA HOSPITAL
Balance Sheet
December 31, 2008

	<u>December 31,</u> <u>2008</u>	<u>November 30,</u> <u>2008</u>	<u>Audited</u> <u>June 30,</u> <u>2008</u>
Assets			
<i>Current assets:</i>			
Cash and cash equivalents	\$ 3,244,985	\$ 839,398	\$ 4,520,157
Net Accounts Receivable	8,550,582	8,329,846	7,944,522
Net Accounts Receivable %	23.26%	22.20%	20.17%
Inventories	1,011,128	1,022,550	1,048,503
Est.Third-party payer settlement receivable	497,872	303,420	245,115
Other assets	<u>3,931,531</u>	<u>6,924,905</u>	<u>7,270,116</u>
Total Current Assets	<u>17,236,099</u>	<u>17,420,119</u>	<u>21,028,413</u>
Restricted by contributors and grantors for capital acquisitions and research-Jaber Estate	534,921	522,927	602,817
Total fixed assets, net of accumulated depreciation	<u>7,152,710</u>	<u>7,233,802</u>	<u>7,450,244</u>
Total Assets	<u>\$ 24,923,731</u>	<u>\$ 25,176,848</u>	<u>\$ 29,081,474</u>
Liabilities and Net Assets			
<i>Current Liabilities:</i>			
Accounts payable and accrued expenses	4,591,643	4,842,379	5,423,290
Loans Payable	2,300,000	2,320,000	2,400,000
Payroll and benefit related accruals	4,566,506	4,160,623	4,099,642
Est.Third-party payer settlement payable	1,954,597	1,893,006	1,893,006
Other liabilities	<u>3,729,860</u>	<u>4,206,860</u>	<u>7,351,860</u>
Total Current Liabilities	<u>17,142,607</u>	<u>17,422,868</u>	<u>21,167,798</u>
<i>Long-Term Liabilities:</i>			
Long-term pension liabilities	(58,150)	(44,701)	(65,212)
Long-term IBNR reserves	120,000	120,000	120,000
Capitalized Lease payable	<u>124,632</u>	<u>136,162</u>	<u>425,862</u>
Total Long-Term Liabilities	<u>186,482</u>	<u>211,461</u>	<u>480,650</u>
Total Liabilities	<u>17,329,089</u>	<u>17,634,329</u>	<u>21,648,448</u>
<i>Net Assets</i>			
Unrestricted Funds	7,039,721	7,019,592	6,830,209
Restricted Funds	<u>554,921</u>	<u>522,927</u>	<u>602,817</u>
Net Assets	<u>7,594,642</u>	<u>7,542,519</u>	<u>7,433,026</u>
Total Liabilities and Net Assets	<u>\$ 24,923,731</u>	<u>\$ 25,176,848</u>	<u>\$ 29,081,474</u>

ALAMEDA HOSPITAL - COMBINED
Summary Statement of Revenues, Expenses
For the Six Months Ended December 31, 2008

	Current Month - Fixed Budget			Year to Date - Fixed Budget						
	Actual	Budget	Variance	Var %	FY08	Actual	Budget	Variance	Var %	FY08
Operating revenues:										
IP Revenue	\$ 12,792,617	\$ 14,011,994	\$ (1,219,377)	-8.7%	\$ 10,085,383	\$ 76,158,212	\$ 77,099,387	\$ (941,175)	-1.2%	\$ 55,030,831
OP Revenue	9,120,071	8,858,163	261,908	3.0%	8,507,398	58,093,377	55,041,826	3,051,551	5.5%	41,951,074
Total revenue	\$ 21,912,688	\$ 22,870,157	\$ (957,469)	-4.2%	\$ 18,592,781	\$ 134,251,589	\$ 132,141,213	\$ 2,110,376	1.6%	\$ 96,981,906
Less: Deductions from Revenue	(16,131,841)	(17,007,340)	875,499	5.1%	(14,272,620)	(98,914,606)	(97,226,246)	(1,688,360)	-1.7%	(73,946,415)
Bad Debt	(550,383)	(495,345)	(55,038)	-11.1%	(105,323)	(4,072,032)	(3,578,764)	(493,267)	-13.8%	(667,269)
Charity	2,708	2,437	271	-11.1%	(109,236)	(477,953)	(489,871)	11,918	2.4%	(580,741)
Net patient service revenue	\$ 5,233,171	\$ 5,369,909	\$ (136,738)	-2.5%	\$ 4,105,602	\$ 30,786,998	\$ 30,846,331	\$ (59,333)	-0.2%	\$ 21,787,480
	23.88%	23.48%		22.08%		22.93%	23.34%		22.47%	
Other revenue	27,665	10,040	17,625	175.5%	9,110	94,047	60,240	33,807	56.1%	52,240
Total operating revenues	\$ 5,260,836	\$ 5,379,949	\$ (119,113)	-2.2%	\$ 4,114,712	\$ 30,881,046	\$ 30,906,571	\$ (25,526)	-0.1%	\$ 21,839,720
Operating expenses:										
Salaries	\$ 2,935,241	\$ 3,081,881	\$ 146,640	4.8%	\$ 2,711,326	\$ 17,041,263	\$ 17,660,221	\$ 618,958	3.5%	\$ 13,313,439
Registry	238,435	118,820	(119,615)	-100.7%	113,120	1,319,952	690,916	(629,036)	-91.0%	616,853
Benefits	739,869	895,982	156,113	17.4%	612,753	4,816,565	5,239,612	423,047	8.1%	2,951,883
Professional Fees	316,515	282,408	(34,107)	-12.1%	400,488	1,850,246	1,693,076	(157,170)	-9.3%	1,671,653
Supplies	780,407	761,405	(19,002)	-2.5%	727,612	4,490,977	4,422,839	(68,138)	-1.5%	3,614,776
Purchase Services	341,805	345,289	3,484	1.0%	309,971	2,018,562	2,069,521	50,959	2.5%	1,529,052
Rents and Leases	54,856	54,926	70	0.1%	44,788	349,242	317,778	(31,464)	-9.9%	233,729
Utilities and Telephone	74,247	75,633	1,386	1.8%	66,732	430,511	445,594	15,083	3.4%	317,756
Insurance	49,094	64,488	15,394	23.9%	59,873	239,965	362,193	122,228	33.7%	297,417
Interest Expense	11,833	12,131	298	2.5%	18,095	74,251	72,790	(1,461)	-2.0%	58,071
Depreciation and amortization	121,849	113,448	(8,401)	-7.4%	166,932	737,347	679,161	(58,186)	-8.6%	834,361
Other Operating Expenses	97,705	67,066	(30,639)	-45.7%	109,778	453,033	399,009	(54,024)	-13.5%	267,794
Total operating expenses	\$ 5,761,856	\$ 5,873,477	\$ 111,621	1.9%	\$ 5,341,468	\$ 33,821,914	\$ 34,052,710	\$ 230,796	0.7%	\$ 25,706,785
Operating gain (loss)	\$ (501,020)	\$ (493,528)	\$ (7,492)	-1.5%	\$ (1,226,756)	\$ (2,940,868)	\$ (3,146,139)	\$ 205,270	6.5%	\$ (3,867,065)
Non-operating revenues (expenses):	\$ 521,149	\$ 510,213	\$ 10,936	2.1%	\$ 509,308	\$ 3,031,402	\$ 3,061,278	\$ (29,876)	-1.0%	\$ 2,582,029
Excess of revenues over expenses	20,129	16,685	3,444	-20.6%	(717,448)	90,534	(84,861)	175,395	206.7%	(1,285,036)

ALAMEDA HOSPITAL - SOUTH SHORE ONLY
Summary Statement of Revenues, Expenses
For the Six Months Ended December 31, 2008

	Current Month - Fixed Budget				Year to Date - Fixed Budget					
	Actual	Budget	Variance	Var %	FY08	Actual	Budget	Variance	Var %	FY08
Operating revenues:										
IP Revenue	\$ 393,969	\$ 410,141	\$ (16,172)	-3.9%	\$ -	\$ 1,931,994	\$ 1,779,362	\$ 152,632	8.6%	\$ -
OP Revenue	-	-	-	0.0%	-	-	-	-	0.0%	-
Total revenue	\$ 393,969	\$ 410,141	\$ (16,172)	-3.9%	\$ -	\$ 1,931,994	\$ 1,779,362	\$ 152,632	8.6%	\$ -
Less: Deductions from Revenue	(182,819)	(208,044)	25,225	12.1%	-	(1,137,558)	(890,915)	(246,643)	-27.7%	-
Bad Debt	-	-	-	0.0%	-	-	(9,661)	9,661	100.0%	-
Charity	-	-	-	0.0%	-	-	(1,869)	1,869	100.0%	-
Net patient service revenue	\$ 211,150	\$ 202,097	\$ 9,053	4.5%	\$ -	\$ 794,436	\$ 876,918	\$ (82,483)	-9.4%	\$ -
	53.60%	49.28%		0.00%	0.00%	41.12%	49.28%		0.00%	0.00%
Other revenue	-	-	-	0.0%	-	-	-	-	0.0%	-
Total operating revenues	\$ 211,150	\$ 202,097	\$ 9,053	4.5%	\$ -	\$ 794,436	\$ 876,918	\$ (82,483)	-9.4%	\$ -
Operating expenses:										
Salaries	\$ 96,048	\$ 115,513	\$ 19,465	16.9%	\$ -	\$ 454,011	\$ 506,712	\$ 52,701	10.4%	\$ -
Registry	-	-	-	0.0%	-	-	-	-	0.0%	-
Benefits	13,092	33,373	20,281	60.8%	-	37,659	148,594	110,935	74.7%	-
Professional Fees	20,487	13,402	(7,085)	-52.9%	-	103,126	79,038	(24,088)	-30.5%	-
Supplies	15,301	9,995	(5,306)	-53.1%	-	52,537	44,740	(7,797)	-17.4%	-
Purchase Services	8,936	1,480	(7,456)	-503.8%	-	25,066	6,625	(18,441)	-278.4%	-
Rents and Leases	9,264	7,732	(1,532)	-19.8%	-	36,908	34,611	(2,297)	-6.6%	-
Utilities and Telephone	3,591	2,546	(1,045)	-41.0%	-	12,347	11,396	(951)	-8.3%	-
Insurance	1,072	854	(218)	-25.5%	-	4,514	3,823	(691)	-18.1%	-
Interest Expense	-	-	-	0.0%	-	-	-	-	0.0%	-
Depreciation and amortization	875	1,002	127	12.7%	-	3,930	4,486	556	12.4%	-
Other Operating Expenses	(364)	1,126	1,490	132.3%	-	7,387	5,041	(2,346)	-46.5%	-
Total operating expenses	\$ 168,302	\$ 187,023	\$ 18,721	10.0%	\$ -	\$ 737,485	\$ 845,066	\$ 107,581	12.7%	\$ -
Operating gain (loss)	\$ 42,848	\$ 15,074	\$ 27,774	184.2%	\$ -	\$ 56,951	\$ 31,852	\$ 25,098	-78.8%	\$ -
Non-operating revenues (expenses):	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Excess of revenues over expenses	\$ 42,848	\$ 15,074	\$ 27,774	184.2%	\$ -	\$ 56,951	\$ 31,852	\$ 25,098	-78.8%	\$ -

ALAMEDA HOSPITAL - COMBINED
Summary Statement of Revenues, Expenses
For the Six Months Ended December 31, 2008

	Current Month - Per Adjusted Patient Day				Year to Date - Per Adjusted Patient Day					
	Actual	Budget	Variance	Var %	FY08	Actual	Budget	Variance	Var %	FY08
Operating revenues:										
IP Revenue	\$ 3,057	\$ 3,088	\$ (31)	-1.0%	3,052	\$ 2,996	\$ 3,072	\$ (76)	-2.5%	2,866
OP Revenue	2,179	1,952	227	11.6%	2,574	2,285	2,193	92	4.2%	2,184
Total revenue	\$ 5,236	\$ 5,040	\$ 196	3.9%	\$ 5,626	\$ 5,281	\$ 5,265	\$ 16	0.3%	\$ 5,050
Less: Deductions from Revenue	(3,855)	(3,749)	(106)	-2.8%	(4,318)	(3,891)	(3,874)	(17)	-0.4%	(3,851)
Bad Debt	(132)	(109)	(23)	-21.1%	(32)	(160)	(143)	(17)	-11.9%	(35)
Charity	1	1	-	0.0%	(33)	(19)	(20)	1	5.0%	(30)
Net patient service revenue	\$ 1,250	\$ 1,183	\$ 67	5.7%	\$ 1,243	\$ 1,211	\$ 1,228	\$ (17)	-1.4%	\$ 1,134
	23.87%	23.47%			22.09%	22.93%	23.32%			22.46%
Other revenue	7	2	5	250.0%	3	4	2	2	100.0%	3
Total operating revenues	\$ 1,257	\$ 1,185	\$ 72	6.1%	\$ 1,246	\$ 1,215	\$ 1,230	\$ (15)	-1.2%	\$ 1,137
Operating expenses:										
Salaries	\$ 701	\$ 679	\$ (22)	-3.2%	\$ 820	\$ 670	\$ 704	\$ 34	4.8%	\$ 693
Registry	57	26	(31)	-119.2%	34	52	28	(24)	-85.7%	32
Benefits	177	197	20	10.2%	185	189	209	20	9.6%	154
Professional Fees	76	62	(14)	-22.6%	121	73	67	(6)	-9.0%	87
Supplies	186	168	(18)	-10.7%	220	177	176	(1)	-0.6%	188
Purchase Services	82	76	(6)	-7.9%	94	79	82	3	3.7%	80
Rents and Leases	13	12	(1)	-8.3%	14	14	13	(1)	-7.7%	12
Utilities and Telephone	18	17	(1)	-5.9%	20	17	18	1	5.6%	17
Insurance	12	14	2	14.3%	18	9	14	5	35.7%	15
Interest Expense	3	3	-	0.0%	5	3	3	-	0.0%	3
Depreciation and amortization	29	25	(4)	-16.0%	51	29	27	(2)	-7.4%	43
Other Operating Expenses	23	15	(8)	-53.3%	33	18	16	(2)	-12.5%	14
Total operating expenses	\$ 1,377	\$ 1,294	\$ (83)	-6.4%	\$ 1,615	\$ 1,330	\$ 1,357	\$ 27	2.0%	\$ 1,338
Operating gain (loss)	\$ (120)	\$ (109)	\$ (11)	-10.1%	\$ (369)	\$ (115)	\$ (127)	\$ 12	9.4%	\$ (201)
Non-operating revenues (expenses):	\$ 125	\$ 112	\$ 13	11.6%	\$ 154	\$ 119	\$ 122	\$ (3)	-2.5%	\$ 134
Excess of revenues over expenses	5	3	2	-66.7%	(215)	4	(5)	9	180.0%	(67)

ALAMEDA HOSPITAL - HOSPITAL ONLY
Summary Statement of Revenues, Expenses
For the Six Months Ended December 31, 2008

	Current Month - Per Adjusted Patient Day				Year to Date - Per Adjusted Patient Day			
	Actual	Budget	Variance	Var %	Actual	Budget	Variance	Var %
Operating revenues:								
IP Revenue	\$ 3,792	\$ 3,927	(135)	-3.4%	\$ 3,568	\$ 3,722	\$(154)	-4.1%
OP Revenue	2,789	2,557	232	9.1%	2,792	2,720	72	2.6%
Total revenue	\$ 6,581	\$ 6,484	\$ 97	1.5%	\$ 6,360	\$ 6,442	\$(82)	-1.3%
Less: Deductions from Revenue	(4,877)	(4,850)	(27)	-0.6%	(4,700)	(4,761)	61	1.3%
Bad Debt	(168)	(143)	(25)	-17.5%	(196)	(176)	(20)	-11.4%
Charity	1	1	-	0.0%	(23)	(24)	1	4.2%
Net patient service revenue	\$ 1,537	\$ 1,492	\$ 45	3.0%	\$ 1,441	\$ 1,481	\$(40)	-2.7%
	23.36%	23.01%		22.09%	22.66%	22.99%		22.41%
Other revenue	8	3	5	166.7%	5	3	2	66.7%
Total operating revenues	\$ 1,545	\$ 1,495	\$ 50	3.3%	\$ 1,446	\$ 1,484	\$(38)	-2.6%
Operating expenses:								
Salaries	\$ 868	\$ 856	\$(12)	-1.4%	\$ 797	\$ 848	\$(51)	-6.0%
Registry	73	34	(39)	-114.7%	63	34	(29)	-85.3%
Benefits	222	249	27	10.8%	230	252	22	8.7%
Professional Fees	91	78	(13)	-16.7%	84	80	(4)	-5.0%
Supplies	234	217	(17)	-7.8%	213	216	3	1.4%
Purchase Services	102	99	(3)	-3.0%	96	102	6	5.9%
Rents and Leases	14	14	-	0.0%	15	14	(1)	-7.1%
Utilities and Telephone	22	21	(1)	-4.8%	20	21	1	4.8%
Insurance	15	18	3	16.7%	11	18	7	38.9%
Interest Expense	4	4	-	0.0%	4	4	-	0.0%
Depreciation and amortization	37	32	(5)	-15.6%	35	33	(2)	-6.1%
Other Operating Expenses	30	19	(11)	-57.9%	21	19	(2)	-10.5%
Total operating expenses	\$ 1,712	\$ 1,641	\$ (71)	-4.3%	\$ 1,589	\$ 1,641	\$(52)	-3.2%
Operating gain (loss)	\$ (167)	\$ (146)	\$(21)	-14.4%	\$ (143)	\$ (157)	14	8.9%
Non-operating revenues (expenses):	\$ 159	\$ 147	\$ 12	8.2%	\$ 146	\$ 151	\$(5)	-3.3%
Excess of revenues over expenses	(8)	1	(9)	900.0%	3	(6)	9	150.0%

ALAMEDA HOSPITAL - SOUTH SHORE ONLY
Summary Statement of Revenues, Expenses
For the Six Months Ended December 31, 2008

	Current Month - Per Adjusted Patient Day				Year to Date - Per Adjusted Patient Day					
	Actual	Budget	Variance	Var %	FY08	Actual	Budget	Variance	Var %	FY08
Operating revenues:										
IP Revenue	\$ 705	\$ 601	\$ 104	17.3%	\$ -	\$ 702	\$ 602	\$ 100	16.6%	\$ -
OP Revenue	-	-	-	0.0%	-	-	-	-	0.0%	-
Total revenue	\$ 705	\$ 601	\$ 104	17.3%	\$ -	\$ 702	\$ 602	\$ 100	16.6%	\$ -
Less: Deductions from Revenue	(327)	(305)	(22)	-7.2%	-	(414)	(302)	(112)	-37.1%	-
Bad Debt	-	-	-	0.0%	-	(3)	(3)	3	100.0%	-
Charity	-	-	-	0.0%	-	(1)	(1)	1	100.0%	-
Net patient service revenue	\$ 378	\$ 296	\$ 82	27.7%	\$ -	\$ 288	\$ 296	\$ (8)	-2.7%	\$ -
	53.62%	49.25%			0.00%	41.03%	49.17%			0.00%
Other revenue	-	-	-	0.0%	-	-	-	-	0.0%	-
Total operating revenues	\$ 378	\$ 296	\$ 82	27.7%	\$ -	\$ 288	\$ 296	\$ (8)	-2.7%	\$ -
Operating expenses:										
Salaries	\$ 172	\$ 169	\$ (3)	-1.8%	\$ -	\$ 165	\$ 172	\$ 7	4.1%	\$ -
Registry	-	-	-	0.0%	-	-	-	-	0.0%	-
Benefits	23	49	26	53.1%	-	14	50	36	72.0%	-
Professional Fees	37	20	(17)	-85.0%	-	37	27	(10)	-37.0%	-
Supplies	27	15	(12)	-80.0%	-	19	15	(4)	-26.7%	-
Purchase Services	16	2	(14)	-700.0%	-	9	2	(7)	-350.0%	-
Rents and Leases	17	11	(6)	-54.5%	-	13	12	(1)	-8.3%	-
Utilities and Telephone	6	4	(2)	-50.0%	-	4	4	-	0.0%	-
Insurance	2	1	(1)	-100.0%	-	2	1	(1)	-100.0%	-
Interest Expense	-	-	-	0.0%	-	-	-	-	0.0%	-
Depreciation and amortization	2	1	(1)	-100.0%	-	1	2	1	50.0%	-
Other Operating Expenses	(1)	2	3	150.0%	-	3	2	(1)	-50.0%	-
Total operating expenses	\$ 301	\$ 274	\$ (27)	-9.9%	\$ -	\$ 267	\$ 287	\$ 20	7.0%	\$ -
Operating gain (loss)	\$ 77	\$ 22	\$ 55	250.0%	\$ -	\$ 21	\$ 9	\$ 12	-133.3%	\$ -
Non-operating revenues (expenses):	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Excess of revenues over expenses	\$ 77	\$ 22	\$ 55	250.0%	\$ -	\$ 21	\$ 9	\$ 12	-133.3%	\$ -

ALAMEDA HOSPITAL
KEY STATISTICS
December, 2008

	ACTUAL DECEMBER 2008	CURRENT FIXED BUDGET	VARIANCE (UNDER)OVER	%	DECEMBER 2007	YTD DECEMBER 2008	YTD FIXED BUDGET	VARIANCE	%	YTD DECEMBER 2007
Discharges:										
Total Acute	242	266	(24)	-9.0%	226	1,395	1,401	(6)	-0.4%	1,370
Total Sub-Acute	4	2	2	100.0%	1	22	12	10	83.3%	8
Total Skilled Nursing	12	9	3	33.3%	6	58	39	19	48.7%	52
	258	277	(19)	-6.9%	233	1,475	1,452	23	1.6%	1,430
Patient Days:										
Total Acute	847	1,062	(215)	-20.2%	908	5,605	5,601	4	0.1%	5,278
Total Sub-Acute	1,035	1,036	(1)	-0.1%	830	6,064	6,090	(26)	-0.4%	5,099
Total Skilled Nursing	559	682	(123)	-18.0%	55	2,751	2,954	(203)	-6.9%	520
	2,441	2,780	(339)	-12.2%	1,793	14,420	14,645	(225)	-1.5%	10,897
Average Length of Stay										
Total Acute	3.50	3.99	(0.49)	-12.3%	4.02	4.02	4.00	0.02	0.5%	3.85
Average Daily Census										
Total Acute	27.32	34.26	(6.94)	-20.2%	29.29	30.46	30.44	0.02	0.1%	28.68
Total Sub-Acute	33.39	33.42	(0.03)	-0.1%	26.77	32.96	33.10	(0.14)	-0.4%	27.71
Total Skilled Nursing	18.03	22.00	(3.97)	-18.0%	1.77	20.08	21.56	(1.48)	-6.9%	2.83
	78.74	89.68	(10.94)	-12.2%	57.84	83.50	85.10	(0.12)	-0.1%	59.22
Emergency Room Visits	1,471	1,533	(62)	-4.0%	1,466	8,336	8,880	(544)	-6.1%	8,705
Outpatient Registrations	2,306	2,254	52	2.3%	2,975	14,737	14,913	(176)	-1.2%	15,739
Surgery Cases:										
Inpatient	53	65	(12)	-18.5%	56	341	344	(3)	-0.9%	332
Outpatient	361	332	29	8.7%	342	2,491	2,117	374	17.7%	2,229
	414	397	17	4.3%	398	2,832	2,461	371	15.1%	2,561
Kaiser Inpatient Cases	12	-	12	-	2	52	-	52	-	25
Kaiser Eye Cases	115	117	(2)	-1.7%	109	926	720	206	28.6%	787
Kaiser Outpatient Cases	145	111	34	30.6%	121	916	748	168	22.5%	724
Total Kaiser Cases	272	228	44	19.3%	232	1,894	1,468	426	29.0%	1,536
% Kaiser Cases	65.7%	57.4%			58.3%	66.9%	59.7%			60.0%
Adjusted Occupied Bed	136.30	146.58	10.28	7.0%	101.13	136.39	136.57	1.82	1.3%	103.88
Productive FTE	371.28	368.29	(2.99)	-0.8%	337.61	369.30	357.52	(11.78)	-3.3%	348.18
Total FTE	426.89	431.14	4.25	1.0%	399.27	419.66	417.84	(1.82)	-0.4%	405.94
Productive FTE/Adj. Occ. Bed	2.72	2.51	(0.21)	-8.4%	3.34	2.67	2.62	(0.05)	-1.9%	3.35
Total FTE/Adj. Occ. Bed	3.13	2.94	(0.19)	-6.5%	3.95	3.03	3.06	0.03	0.9%	3.91

ALAMEDA HOSPITAL
 12 MONTH CASH PROJECTION
 PERIOD COVERED: 1/1/09 THRU 12/31/08

MONTH	COLLECTIONS			PROPERTY TAX ¹	W/C REFUND	OTHER	FY 2008 AB 915	TRANSFERS	DISBURSEMENTS	EST. BALANCE ²
	NON-KAISER	KAISER-USE								
JAN 09	3,948,972	760,000	477,000	50,000	50,000	500,000	5,368,134	180,379		
FEB 09	3,895,000	760,000	477,000	200,000	50,000	5,427,280	135,099			
MAR 09	4,510,000	760,000	477,000	50,000	50,000	(300,000)	5,427,280	204,819		
APR 09	4,620,000	790,000	477,000	50,000	50,000	(500,000)	5,427,280	214,539		
MAY 09	4,200,000	790,000	477,000	50,000	50,000	1,200,000	6,829,946	101,593		
JUNE 09	4,730,000	790,000	477,000	50,000	50,000	(800,000)	5,435,637	92,955		
JULY 09	4,730,000	790,000	477,000	50,000	50,000	6,044,241	95,714			
AUG 09	4,620,000	790,000	477,000	50,000	50,000	5,989,088	43,625			
SEP 09	4,620,000	790,000	477,000	50,000	50,000	100,000	5,989,088	91,537		
OCT 09	4,950,000	790,000	477,000	50,000	50,000	(100,000)	6,099,854	158,683		
NOV 09	4,370,000	790,000	477,000	50,000	50,000	200,000	5,950,568	95,114		
DEC 09	5,060,000	790,000	477,000	50,000	50,000	(300,000)	5,950,568	221,546		
TOTALS	54,253,972	9,390,000	5,724,000	200,000	600,000	180,000	69,938,968			

Notes:

1. Property tax receipts will be held in an interest bearing investment account and transferred to the operating account as needed each month.
2. Reflects only cash held in concentration and disbursement accounts at month-end. Additional funds are held on deposit in money market accounts at the Bank of Alameda and Merrill Lynch, respectively.

12 Month Cash Projection - Disbursement Detail
 PERIOD COVERED:1/1/09 THRU 12/31/08

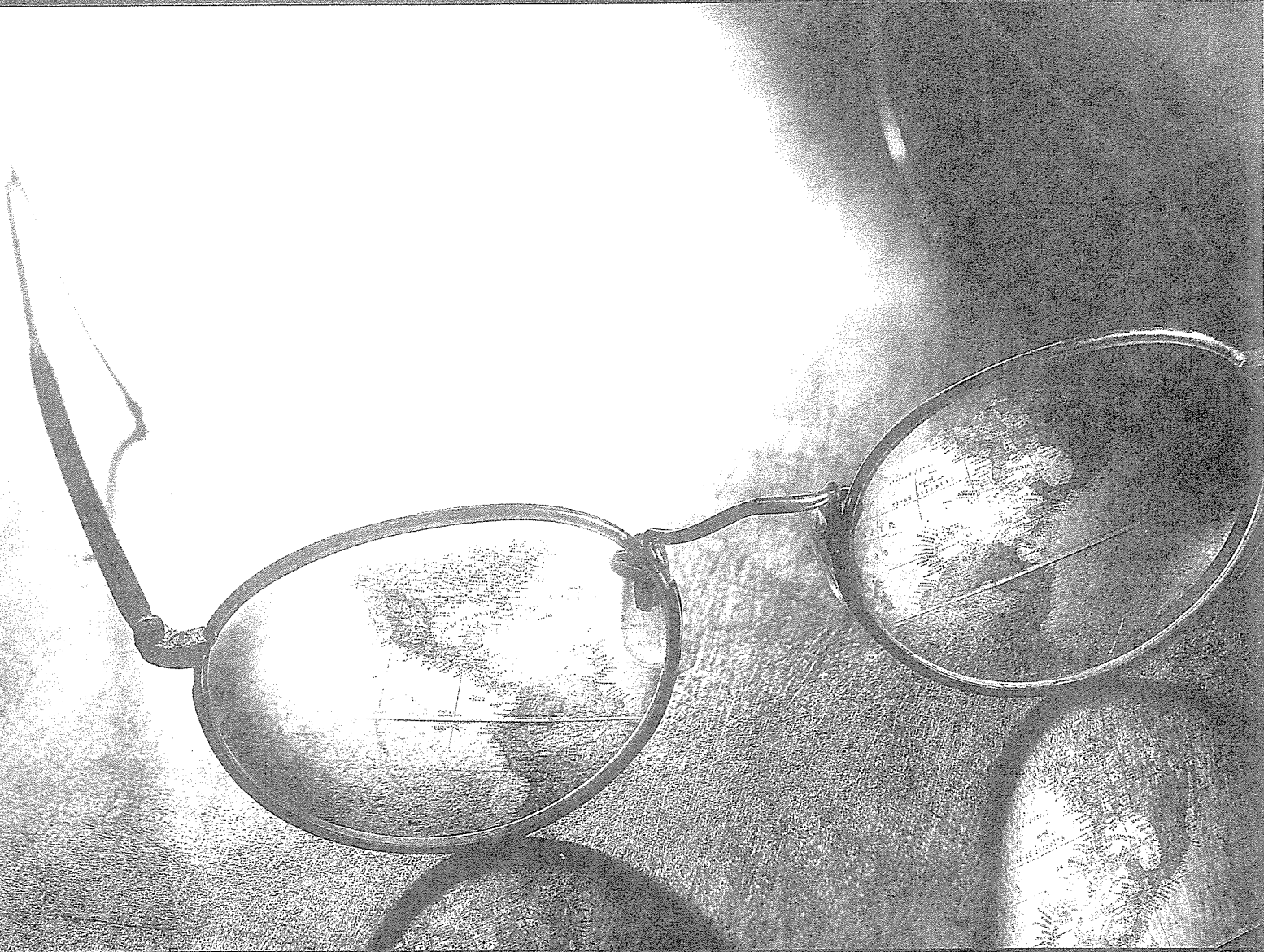
DISBURSEMENTS 13% TOTAL CASH

MONTH	PAYROLL	PENSION	PAYROLL RELATED	Total Payroll	Health expense	Refund	A/P	Debt Service	OUTLAYS
JAN 09	2,717,303	64,311	288,520	3,070,134	278,000	20,000	1,951,583	48,417	5,368,134
FEB 09	2,752,434	88,326	288,520	3,129,280	278,000	20,000	1,951,489	48,511	5,427,280
MAR 09	2,752,434	88,326	288,520	3,129,280	278,000	20,000	1,951,441	48,559	5,427,280
APR 09	2,752,434	88,326	288,520	3,129,280	278,000	20,000	1,985,707	14,293	5,427,280
MAY 09	4,182,926 a	60,500	288,520	4,531,946	278,000	20,000	1,989,987	10,013	6,829,946
JUNE 09	2,788,617	60,500	288,520	3,137,637	278,000	20,000	1,989,933	10,067	5,435,637
JULY 09	3,342,068	60,500	343,673	3,746,241	278,000	20,000	1,989,891	10,109	6,044,241
AUG 09	3,342,068	60,500	288,520	3,691,088	278,000	20,000	1,989,842	10,158	5,989,088
SEP 09	3,342,068	60,500	288,520	3,691,088	278,000	20,000	1,989,842	10,158	5,989,088
OCT 09	5,013,103	60,500	250,000	3,801,854	278,000	20,000	1,989,842	10,158	6,099,854
NOV 09	3,342,068	60,500	250,000	3,652,568	278,000	20,000	1,989,842	10,158	5,950,568
DEC 09	3,342,068	60,500	250,000	3,652,568	278,000	20,000	1,989,842	10,158	5,950,568
TOTALS	39,669,594	813,289	3,401,833	42,362,968	3,336,000	240,000	23,759,242	240,758	69,938,968

a) 3 pay periods in the month



THE BULLET PROOF® MANAGER



Helping managers see their business more clearly...worldwide



JANUARY

LISA FORD

HOW TO EXCEED CUSTOMER EXPECTATIONS

- Amaze, astound and astonish customers
- The "Four Circles" of Service
- Six steps of customer recovery

JOHN HERSEY

RECOGNITION: THE KEY TO HIGHER PERFORMANCE

- The three steps of Involved Recognition
- Contagious Leadership
- The key to motivation

FEBRUARY

NIDO QUBEIN

HOW TO BE A TRANSFORMATIONAL LEADER

- Three dynamic leadership questions
- Make wise Relational Capital investments
- Operate at the purpose level

AMANDA GORE

HOW TO BECOME A STRESS BUSTER

- Four stress strategies
- Mental rehearsal
- The mental intelligence stress quotient

MARCH

DR. JIM HENNIG

NEGOTIATING TO WIN

- Sixteen bottom-line negotiation strategies
- Getting and giving concessions
- The relative value advantage

DR. TERRY PAULSON

THE LISTENING ADVANTAGE

- Three keys of listening leadership
- Flapper Valve theory
- Listen louder to employees

APRIL

BOB JOHNSON

HOW TO TAP THE CREATIVITY OF YOUR MANAGEMENT TEAM

- The first action of change management
- Creativity that promotes commitment
- The creative difference between managers and leaders

GEORGE WALTHER

PROJECTING A MORE POSITIVE SELF-IMAGE

- Set positive expectations
- 100% integrity
- Speak the language of leadership

BLENDED LEARNING

MEASURED DEVELOPMENT.

Learning is a process, not a one-time event. During 12 consecutive months, participants complete 48 hours of classroom training in 24 skills sets and set Personal Action Plans to apply what they learn.

COMPREHENSIVE WRITTEN MATERIAL.

Participants build a comprehensive library of printed exercises and information.

Top educational psychologists claim that four elements must exist for training to have a sustained, positive impact on the way people behave. Here are the four elements and how they are blended into Bullet Proof Manager training.

SHARE WITH OTHERS.

Sharing learning with someone else builds leadership skills, enhances training value, and reinforces learning.

REVISIT, REFINE LEARNED SKILLS.

Participants have an opportunity to access the Bullet Proof Manager Video Library and accompanying exercises.

THE BULLET PROOF® MANAGER

MAY

JUNE

JULY

AUGUST

LISA FORD
**HOW TO HIRE,
 TRAIN AND
 REWARD
 EMPLOYEES**

- Five keys of effective hiring
- Realistic job previews
- Keep service-oriented employees

JOHN HERSEY
**CREATING
 LEADERS
 THROUGH
 MENTORING**

- Cultivate leadership talent
- Build a positive workplace culture
- Set direction, activities and conduct

DR. TERRY PAULSON
**DEVELOPING A
 TIME INVESTMENT
 STRATEGY**

- Mission centered measurement
- The Kiss of Yes
- Manage priority shifts

JIM CATHCART
**INCREASING
 PRODUCTIVITY
 THROUGH
 MOTIVATED
 PEOPLE**

- Discretionary effort investments
- Keep purpose alive
- Four modes of performance

MARCIA STEELE
**USING
 STRATEGIC
 THINKING
 TO IMPROVE
 STRATEGIC
 PLANNING**

- Three steps of strategic thinking
- The ROI of strategy alignment
- Strategic success factors

GEORGE WALTHER
**HOW TO DEVELOP
 AND MAINTAIN
 RAPPORT**

- Find common ground
- The core essence of communication
- Five rapport-building strategies

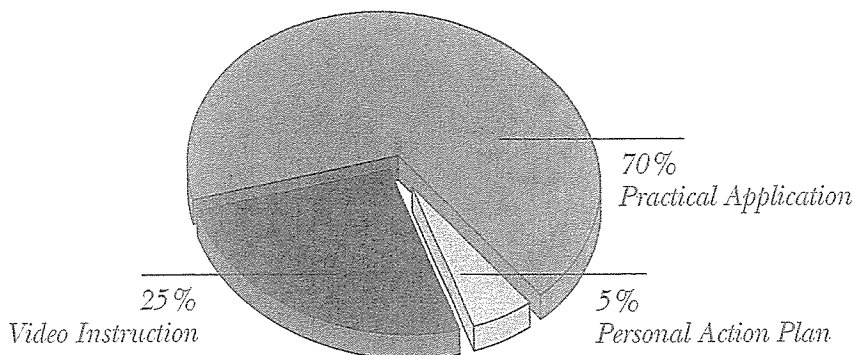
BOB JOHNSON
**SEVEN STEPS
 TO EFFECTIVE
 DELEGATION**

- Entrust responsibility
- Grant authority
- Create accountability

AMANDA GORE
**MOTIVATING
 THROUGH
 POSITIVE
 COMMUNICATION**

- Think – believe – behave
- The MMFS Mission
- Reframe negative comments

APPROXIMATE BREAKDOWN OF A TYPICAL
 BULLET PROOF MANAGER SESSION



INTERNET SUPPORT

When it comes to workplace learning, school is never out for the pro. That's why Bullet Proof Manager training includes a comprehensive Internet Support site, featuring streaming video, assessments, scripts, slides, articles and follow-up exercises designed to help participants reinforce and continue their learning in the different Bullet Proof Manager skill areas.

**SEPTEMBER**LISA FORD
HOW TO DEAL WITH DIFFICULT CUSTOMERS

- *Seven steps of dealing with difficult customers*
- *Listen around the edges of complaints*
- *The power tool of customer service*

DR. TERRY PAULSON
LEADERS MAKE CHANGE WORK

- *Five change strategies*
- *Unleash the "Power of Story"*
- *Support heroic efforts*

OCTOBERNIDO QUBEIN
HOW TO CONNECT: COMMUNICATE AT A HIGHER LEVEL

- *The Law of Identification*
- *Three responsibilities of connected leadership*
- *Answer the connection questions*

JOHN HERSEY
HOW TO HELP EMPLOYEES BE THEIR BEST

- *Look to greatness*
- *Build willing accountability*
- *Focus on what's possible*

NOVEMBERDR. JIM HENNIG
THE 70-MINUTE HOUR

- *Twelve productivity time locks*
- *The Paradox of Time*
- *Three-step delegation process*

GEORGE WALTHER
EFFECTIVE TELEPHONE COMMUNICATION

- *Voicemail: a strategic communications tool*
- *Win at telephone tag*
- *Elevate communications importance*

DECEMBERBOB JOHNSON
EFFECTIVE PLANNING: A SEVEN STEP FORMULA

- *Sharpen management's aim*
- *Follow up and follow through*
- *Strategic mapping*

DR. TERRY PAULSON
DEALING WITH DIFFICULT PEOPLE

- *Solving problems, not evading them*
- *Before you confront, prepare a script*
- *Build bridges to difficult people*

Topics, schedule and video personalities are subject to change as the **Bullet Proof Manager** library is expanded.

"Using an idea from customer service training, I led a discussion on how to improve the packaging of our shipments with my team. As a result, we have improved the packaging, improved the accuracy of what we ship, improved customer satisfaction and have improved the efficiency of our team. This action plan will save our company more than \$45,000 (US) this year."

– RUSS SUMPTER, TTX COMPANY

"I took an idea that I got at the training session and cross-trained all the employees in my department to cover any position at any time. As a result, order processing, dock receiving, and shipping functions are now always covered, and we provide customer service without interruption. This action plan will save our company more than \$50,000 (US) this year."

– DENA YANCEY, PILOT PEN CORPORATION

"Currently, about 20% into the program, I must say that I am extremely satisfied. We have already seen well over a 100% return on our total investment and yet we have 80% of the program to go."

– RICHARD D'ALBERTO, LAURENS COUNTY HEALTH CARE

THE CRESTCOM VIDEO FACULTY



JIM CATHCART

Jim Cathcart's cutting-edge work in the fields of human dynamics and business relationships has made him a leading platform speaker, with thousands of appearances to his credit. He has also written several noteworthy books, including *The Acorn Principle* and *Relationship Selling*.



BOB JOHNSON

Bob Johnson was born in the United States and he has spent the majority of his professional career in Australia. He has trained thousands of managers on five continents. When he shares management techniques and strategies, you know he is not speaking from theory...but from experience. He's been there.



LISA FORD

Lisa Ford has developed such highly acclaimed training courses as "How to Give Exceptional Customer Service" and "Developing A Customer Retention Program." Ford is a specialist in advising companies about how to best serve and retain customers. She is also a very popular guest speaker and in-house presenter with groups throughout the world.



DR. TERRY PAULSON

A Ph.D. psychologist, Dr. Terry Paulson's humor and down-to-earth style earned him a 2004 induction into the CPAE Speakers Hall of Fame. He is the author of six books, including *Paulson on Change* and *They Shoot Managers Don't They?*



AMANDA GORE

Amanda Gore combines 15 years of research in group dynamics with intriguing, entertaining insight about business communication, leadership and occupational health. She is also the author of several popular books and videos, including *You Can Be Happy*, *Stressbusters*, and *Lead Out Loud*.



NIDO QUBEIN

Toastmasters International named Nido Qubein the Top Business and Commerce Speaker. As an author, he has written numerous best-selling books, including *How to be a Great Communicator* and *Stairway to Success*. In business, he has applied his innovative ideas as the chairman of three companies, as a board member of a Fortune 500 financial corporation, and as president of a major U.S. university.



DR. JIM HENNIG

Renowned for his expertise in leadership, productivity and negotiation, Dr. Jim Hennig combines personal experience with master's and doctoral degrees from Purdue University. He is the author of the book *The Familiar Stranger* and the training course "Negotiating Your Success." Dr. Hennig has served as president of four corporations in widely diverse fields.



MARCIA STEELE

A specialist in helping some of the world's most-admired companies to improve their people and their profits, Marcia Steele's strategic thinking concepts enabled one client to generate an additional \$30 million in revenues in 12 months. An author as well, Marcia Steele's message and life convey that, "with dreams, beliefs and actions, anything is possible."



JOHN HERSEY

By age 28, John Hersey was the vice president of a \$1 billion bank. He was senior vice president of a top global advertising agency by age 34. He then led successful start-up ventures in consumer products, distribution, and telecommunications. Now he applies his vast business and management experience as a consultant, newspaper columnist and popular author.



GEORGE WALTHER

George Walther is an internationally known expert in improving sales, customer service and communication effectiveness. His popular books, *Power Talking*, *Phone Power* and *Upside-Down Marketing*, have all been published around the world. The recipient of the National Speakers Association's highest award for platform excellence, George Walther excels in helping people use communication to leverage new profit opportunities.



THE BULLET PROOF® MANAGER

HOW WAS THE BULLET PROOF MANAGER CURRICULUM DEVELOPED?

Crestcom® polled business leaders in more than 40 countries to identify the skills they would most like to see addressed in a management training course. The skill areas they selected were chosen as the primary topics for the Bullet Proof Manager curriculum. These core competencies are listed below.

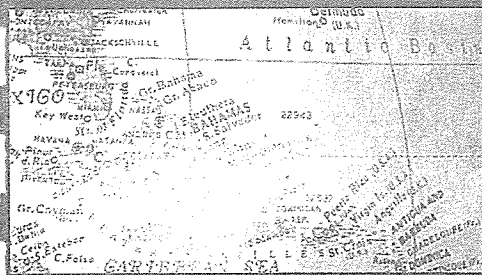
Assess your aptitude in each of these critical management and leadership areas. Rate yourself on a scale of 1–10 (1=Very Low, 10=Very High). Total your ratings and divide by 10 to obtain your average score.

1. Ability to motivate others	
2. Change management	
3. Coaching and mentoring	
4. Communication (listening and speaking)	
5. Customer service	
6. Negotiating	
7. Performance management	
8. Planning and goal setting	
9. Recruiting/hiring/retention	
10. Stress management	
TOTAL:	
AVERAGE:	

- Mark the competency you consider to be your strongest with “✓”
- Mark the two competencies you would most like to improve with “+”

“A manager develops people – Through the way we manage we make it easy or difficult for them to develop themselves. We direct people or misdirect them. We bring out what is in them or we stifle them. We strengthen their integrity or we corrupt them. We train them to stand upright and strong, or we deform them... whether we know it or not.”

Dr. Peter Drucker



A PARTIAL LIST OF TRAINING LOCATIONS

Locations are shown as of date of printing and are subject to change without notice.

- Algeria:** Algiers
- Australia:** Melbourne, Sydney
- Bahrain**
- Belgium:** Antwerp, Brussels
- Bosnia & Herzegovina:** Banja Luka, Sarajevo
- Brazil:** Sao Paulo
- Burundi:** Bujumbura
- Canada:** Calgary, Edmonton, Hamilton, Humboldt/Saskatoon, Kitchener/Waterloo, Kelowna, London, Montreal, Nanaimo, Ottawa, Toronto, Vancouver, Winnipeg
- Chile:** Antofagasta, Santiago
- Costa Rica:** San Jose
- Croatia:** Zagreb
- Denmark:** Copenhagen, Hillerød, Jutland Peninsula
- Ecuador:** Quito
- Egypt:** Cairo
- England:** Barnsley, Birmingham, Bristol, Harlow, Heathrow, Liverpool, London, Milton Keynes,
- Northampton, Solihull, Stevenage, Welwyn Garden City**
- France:** Paris
- Germany:** Berlin, Cologne, Frankfurt, Hamburg, Hannover, Heidelberg, Karlsruhe, Mannheim, Munich, Stuttgart, Ulm
- Ghana:** Accra
- Greece:** Athens
- Honduras:** San Pedro Sula, Tegucigalpa
- India:** Bangalore, Chennai, Hyderabad, Mumbai
- Indonesia:** Jakarta
- Ireland:** Belfast, Cork, Dublin
- Kazakhstan:** Almaty
- Kenya:** Nairobi
- Kuwait:** Kuwait City
- Luxembourg:** Luxembourg
- Malaysia:** Kuala Lumpur, Penang
- Mexico:** Chihuahua, Cd. Juarez, Mexico City, Monterrey, Tampico
- Montenegro:** Podgorica
- Netherlands:** Amsterdam, Arnhem,
- Dordrecht, Hertogenbosch, Lelystad, Purmerend, Urecht, Venray, Zwolle**
- New Zealand:** Auckland
- Nigeria:** Lagos, Port Harcourt
- Norway:** Bergen, Oslo
- Oman:** Muscat
- Pakistan:** Karachi
- Panama:** Panama City
- People's Republic of China:** Beijing, Shanghai, Shenzhen, Suzhou, Taicang
- Peru:** Lima
- Philippines:** Manila
- Portugal:** Faro, Lisbon, Porto
- Romania:** Bucharest
- Russia:** Moscow, Nizhni Novgorod, Sochi, St. Petersburg
- Rwanda:** Kigali
- Saudi Arabia:** Eastern Provinces, Jeddah, Riyadh
- Serbia:** Belgrade
- Singapore**
- Slovenia:** Ljubljana
- South Africa:** Johannesburg
- South Korea:** Seoul
- Spain:** Barcelona, Madrid
- Sweden:** Göteborg, Sandviken, Stockholm
- Taiwan:** Taipei
- Tanzania:** Dar Es Salaam
- Thailand:** Bangkok
- Tunisia:** Tunis
- Turkey:** Istanbul
- Uganda:** Kampala
- United Arab Emirates:** Abu Dhabi, Dubai
- United States:** Arlington, Arlington Heights, Atlanta, Auburn (ME), Baltimore, Baton Rouge, Birmingham, Boca Raton, Boise, Boston, Bowling Green, Burbank, Charlotte, Chattanooga, Chicago, Cincinnati, Columbia (SC), Columbus, Dallas, Danbury, Daytona Beach, Dayton, Denver, Falls Church, Fremont, Greensboro, Greenville,
- Hartford, Holyoke, Houston, Huntsville, Indianapolis, Irvine, Irving, Jacksonville, Kansas City, Knoxville, Lafayette, Lakeland, Las Vegas, Louisville, Los Angeles, Madison, Manchester, Mercer Island, Miami, Milwaukee, Montgomery, Nashville, New Haven, New Orleans, New York, North Jersey, Oakland, Omaha, Orange County, Orlando, Phoenix, Pittsburgh, Portland (ME), Portland (OR), Raleigh, Renton, Reston, Richmond, Rockford, Rogersville, Roseville, Sacramento, San Diego, San Francisco, San Jose, San Ramon, Santa Rosa, Seattle, Shreveport, Springfield (MO), St. Louis, Tampa, Thibodaux, Tulsa, Virginia Beach, Wallingford, Washington DC, Woodland Hills**
- Vietnam:** Hanoi, Ho Chi Minh City
- Yemen:** Sanaa

CRESTCOM CLIENTS

In addition to the partial client list below, Crestcom provides training for thousands of companies, worldwide, with fewer than 50 employees. Training is provided by Crestcom International licensees.

- ABB Ltd.
- Abbott Laboratories
- Ace World Wide
- Allied Van Lines
- AMP Inc.
- American Airlines
- American Express Company
- Anheuser-Busch, Inc.
- APL Ltd./NOL Group
- Apple Computer, Inc.
- AT&T
- Avery Dennison
- Avon
- Bacardi & Co.
- Baan Company
- Bank of America
- Bank of Tanzania
- BASF
- BBDO Advertising
- BellSouth
- Best Western Hotels
- Black & Decker
- Blockbuster Video
- Boise Cascade
- Borg-Warner Automotive
- Boy Scouts of America
- Boys & Girls Clubs of America
- BP Amoco
- Bristol-Myers Squibb
- British American Tobacco
- Browning Ferris Industries
- Budget Rent a Car
- Cadbury
- Cardinal Health
- Case Equipment
- Castrol International
- Caterpillar Inc.
- Cellular One
- Cemex
- Chase Manhattan Bank
- Chemical Bank
- Chicago Department of Public Health
- CIGNA Corp.
- Cingular Wireless
- Cisco Systems, Inc.
- City of Calgary
- City of Stuttgart
- Clarklift
- Coca-Cola Bottling Company
- Coors Brewing Company
- Cummins Engines
- DaimlerChrysler
- Dana Corp.
- Detroit Diesel
- DHL Worldwide Express
- Digital Equipment Corp.
- Domino's Pizza
- Dun & Bradstreet
- Dunlop
- DuPont
- Electrobox
- Erickson SA
- Exxon
- FedEx
- Fiat
- Ford Motor Company
- General Dynamics
- General Mills
- General Tire
- Giant Food
- Gillette
- Girl Scouts of the USA
- GlaxoSmithKline
- Glenayre Technologies
- Grey Advertising
- Grundig International Ltd.
- Guinness, Ltd.
- Habitat for Humanity
- Hasbro Toys
- Hilton Hotels
- Hitachi
- Hochland
- Hoechst
- Holiday Inn Hotels
- Honeywell
- Hong Kong Bank
- Hyatt Hotels
- Hyster Co.
- IBM
- IKEA Furniture
- Industrial Towel & Uniform
- Interbank
- International Truck
- Intuit
- John Deere
- Johnson Controls
- Junior Achievement
- Kenworth Trucks
- Kenya Airways
- Kodak
- Konica
- KPMG
- Kraft Foods
- Kuwait Petroleum Corp.
- Lear Corp.
- Legg Mason Wood Walker, Inc.
- Leo Burnett Advertising
- Levi-Strauss & Co.
- Lexmark International
- Lockheed Martin Corp.
- Lloyds Bank
- Lucent Technologies
- Mars, Inc.
- Mack Trucks, Inc.
- Mail Boxes, Etc.
- Management Recruiters
- Marriott Hotels
- Marsh & McLennan Ltd.
- Maryland Department of Transportation
- Mastercard
- Mattel
- McDonald's
- McGraw-Hill
- Merck Sharp & Dohme
- MICROS Systems, Inc.
- Microsoft
- Mitsubishi
- Mobil Oil
- Motorola, Inc.
- Mount Sinai Hospital
- Mutual of New York
- Nabisco Foods
- Nike
- Nestle Foods
- Nortel Networks
- Northrop Grumman
- Occidental Petroleum
- Olin Chemical
- Oracle Software
- Oster
- Pacific Bell
- Pemex Oil
- Pennysaver Newspaper
- Pennzoil
- Pfizer
- Philadelphia Inquirer
- Philip Morris
- Phillips Petroleum
- Pinkerton Security
- Pitney Bowes
- Playtex Corp.
- Polaroid Corp.
- Pratt & Whitney
- Provident Life
- Prudential Insurance
- Pulte Homes
- Quality Inn Hotels
- Quimica Suiza S.A.
- Radisson Hotels
- Ramada Hotels
- Rayovac Corp.
- Reynolds Metals Co.
- Ricoh
- Ritz-Carlton Hotels & Resorts
- Rolls-Royce Motor Cars
- Royal Crown Cola
- Royal & SunAlliance Insurance
- Sapiens International
- Sara Lee Corp.
- SAS
- Schering-Plough
- Shell Oil
- Sheraton Hotels
- Sherwin-Williams Paints
- Shriners Hospitals
- Siemens
- Smith & Nephew, Inc.
- Sony
- Spalding Sports Worldwide
- State Farm Insurance
- Subway Restaurants
- Sumitomo Electric
- Swisher International
- Swissotel
- Sylvan Learning Systems, Inc.
- Taco Bell
- Tanzania Communications Commission
- Tektronix
- Texas Instruments
- Toledo Scales
- Toyota Motor Corp.
- Trane Company
- TRW
- Unilab Corp.
- Unilever
- Unilock
- United Distillers
- United Technologies
- United Way
- Unocal
- Upper Deck Co.
- Varig Airlines
- Verizon Wireless
- Wackenhut Security
- Westin Hotels
- Westvaco Paper
- Wrangler Jeans
- Xerox
- Yahoo
- Yellow Freight Line
- YMCA
- York International

In some instances, employees of a separate division or subsidiary of a company listed above received the training. In other cases, the client may be a regional branch, or independent operating unit(s). Corporate names appear as typically used. Clients listed may have registered trade names, which may be different from how those clients are named above.



WEBCOR Development
 P.O. Box 1809
 Danville, CA. 94526
 925-736-0200

CRESTCOM® MANAGEMENT SKILLS WORKSHOP

ENROLLMENT DETAILS:

TIME: _____ LOCATION: _____
 DATE: _____ TUITION: _____

USE OF MATERIALS:

COURSE OBJECTIVES:

- To allow participating managers to attain the mastery of two management-related skills each month
- To prepare managers to share the skills with others

COURSE BENEFITS:

- Quality Faculty
- Quality Training
- Quality Materials
- Spaced Repetition
- Skill Reinforcement
- Team Building
- Training Resource
- Networking Opportunity
- Personal Action Plan
- Certificate of Completion

MANAGEMENT SKILLS WORKSHOP:

A Crestcom® Trainer will conduct a Management Skills Workshop at your location. This training seminar features exercises taken directly from the acclaimed Bullet Proof® Manager course. Following are benefits of scheduling a Management Skills Workshop:

- Enables management to evaluate the content and quality of the training.
- Allows management to assess its managers' response to the course.
- Participants set Personal Action Plans for achieving personal, revenue-producing and cost-saving goals.
- Provides approximately two hours of instruction in critical management skills *at no cost to you.*

"After the Management Skills Workshop, I knew the training was good because it taught me how to turn around an employee I was ready to let go. He has become one of our most productive employees."

Crestcom client in California

Crestcom licensees provide free Management Skills Workshops subject to the following:

1. All decision makers are in attendance for the entire session.
2. There are no interruptions during the training seminar.
3. Immediately following the training seminar a decision will be made as to whether the company will participate in the training.

NOTICE: COPY GUARDED VIDEO MATERIALS — THEY CANNOT BE DUPLICATED
 Crestcom video materials are electronically protected by a new process which prevents unapproved use.

Crestcom International, LLC, International Headquarters, Greenwood Village (Suburban Denver), Colorado USA www.crestcomtraining.com



Authorized Licensee

Alameda Hospital

ADMINISTRATION

JAN 21 2009

Monday, January 19, 2009

Deborah Stebbins
CEO
Alameda Hospital
2070 Clinton Avenue
Alameda, CA. 94501

Dear Deborah

Thanks for your interest in Crestcom and our Bullet Proof® Manager Training Program. Per your request, here is pricing to conduct 12 months of Crestcom "Leadership & Management Training" for Alameda Hospital.

Scope of Training: One training session per month (4 hours) for 12 consecutive months. Training curriculum outlined in our brochure. The program will be conducted at a site selected by Alameda Hospital and the cost for the training room and any food or beverages will be borne by Alameda Hospital. WEBCOR Development will provide the A/V equipment.

Pricing:

- 1. \$4,200 Per Participant for first 20 = \$ 84,000.
2. With 20 paid enrollments you receive 4 scholarships. N/C
3. Enrollments 25 - 35 at \$2,100 each. (Example: 30 participants or 6 more enrollments = 6 x \$2,100 = \$12,600 \$ 12,600.
Total Cost for 30 enrollments = \$ 96,600.

Included in pricing:

- 1. 48 hours of facilitated training. Conducted in a series of 12 monthly sessions. (4 hours per session.) commencing March 2009.
2. One complete Bullet Proof Manager DVD Library.
3. 30 (estimated) Participant Workbooks and written materials.
4. 30 (estimated) Participant Plaques (presented at graduation)
5. On line web support that includes, facilitation material, power point slides, additional training exercises.



Payment Terms:

25% with Contract = \$24,600.
12 Monthly payments of \$6,000.

Sales Tax is applicable to materials only. Estimated Sales tax based on above mentioned materials is: \$472.50.

Payments to:

WEBCOR Development
P.O. Box 1809
Danville, CA. 94526
Tax ID# 94-3264172

I look forward to working with you and the Alameda Hospital Management team in the months ahead.

Sincerely,

Robert J. Weber
Crestcom
925-736-0200



Crestcom Authorized Licensee's Training Agreement

LICENSEE
ACCOUNT REPRESENTATIVE
ACCOUNT NUMBER

I/We (User) agree to enroll 27 members of our organization in Crestcom BULLET PROOF MANAGER Training. The Session(s) will be held on the PER SCHEDULE day of each month for 12 consecutive MONTHS commencing MARCH, 20 09. The Session(s) will be held at ALAMEDA HOSPITAL ALAMEDA, CA. If this should change, we will be notified at least ten (10) days prior to the Session. In addition to the training, our organization shall have the use of Crestcom training/materials as follows:

27 participant(s) Use of 24 video(s) per session for EVER, * subject to the terms of Crestcom's licensing agreement**.

*Videos kept for a longer period are subject to an additional charge of \$10 per day.

** This license may be renewed for N/A per year.

We are enrolling 27 individuals at 3,344.44 per individual, or: Plus *** tax of: 90,300.00 455.00

ADDITIONAL INFORMATION: 27 WORKBOOKS Additional Items: -
1 DVD LIBRARY Additional Tax: -
27 PLAQUES @ GRADUATION TOTAL: 90,755.00
27 AUDIO SETS @ GRADUATION *** \$200. of the total price is for merchandise and is subject to tax.

PAYMENT TO BE MADE AS FOLLOWS: (1) DEPOSIT W/ CONTRACT \$23,030.00
SPECIAL INSTRUCTIONS: (12) MONTHLY PAYMENTS OF \$ 5,643.75 COMMENCING MARCH 1st 2009 ENDING FEB 1st 2010.

I/We understand that we are obligated to pay the amounts indicated on this agreement irrespective of whether members of our organization attend the training.

USER: AUTHORIZED SIGNATURE DATE
ALAMEDA HOSPITAL
COMPANY
2070 CLINTON AVENUE
ADDRESS
ALAMEDA CA. 94501
CITY STATE POSTAL CODE
PHONE 510-814-4000 WEB SITE

AUTHORIZED LICENSEE SIGNATURE DATE
WEBCOR DEVELOPMENT
COMPANY
P.O. BOX 1809
ADDRESS
DANVILLE CA. 94526
CITY STATE POSTAL CODE
PHONE 925-736-0200 WEB SITE

EMAIL ADDRESS

EMAIL ADDRESS

The use of the Crestcom Materials is subject to the Terms and Conditions outlined on the reverse side of this Agreement. No refunds will be made for missed training. However, unused training may be exchanged for other Crestcom products. Crestcom®, The BULLET PROOF® Manager and Trainers to the World® are registered trademarks of Crestcom International, LLC. All rights reserved. This is a standard form used by Authorized Licensees of Crestcom International, LLC. User's Agreement is with the Authorized Licensee, not Crestcom International, LLC. Furnishing Training/Materials is the responsibility of the Authorized Licensee. Authorized Licensee is an independent operator licensed by Crestcom International, LLC to conduct Crestcom training and market use of Crestcom Materials. Video topics/Video personalities are subject to change as the Bullet Proof® Manager library is expanded.

FOR OFFICE USE ONLY

Form with fields: TOTAL NO. OF EMPLOYEES, SIC CODE, INDUSTRY CLASSIFICATION

WHITE - DISTRIBUTOR

CANARY - CRESTCOM

PINK - CLIENT

GOLDENROD - M.D.

TERMS OF CRESTCOM® LICENSING AGREEMENT

User is licensed to use the video, audio and written materials furnished hereunder, all collectively referred to as the "Materials," for a term of one year from the date of this Agreement, subject to the following provisions. After the conclusion of one year, unless this Agreement is extended as provided below, User shall return all Materials to Crestcom International, LLC at the address shown at the bottom of this page, or to a third party designated in writing by Crestcom International, LLC, notwithstanding the fact that this Agreement is between User and the Authorized Licensee of Crestcom International, LLC named on the front of this Agreement.

This Agreement may be extended in one-year increments for the amount shown on the reverse side of this sheet, which amount is payable to Crestcom International LLC, or its designee, in full, within ten (10) days of receiving notification that you must return the Materials, or pay the annual license renewal fee ("official notification"). In the event that you do not choose to pay the annual license renewal fee, all Materials furnished hereunder, except Leader's Manuals and audio CDs, must be returned to Crestcom International LLC, or its designee, within ten (10) days of "formal notification." Any Materials kept for a longer period are subject to a late charge of \$10 per day. Materials shall be returned in good condition, subject to ordinary wear and tear. Lost video materials are subject to a replacement charge of \$425 per unit. Individual Leader's Manuals are not subject to return.

USE OF CRESTCOM TRAINING MATERIALS IS SUBJECT TO THE FOLLOWING ADDITIONAL TERMS:

The User further acknowledges that the use of Materials is subject to all of the following terms:

1. User acknowledges that the Materials furnished hereunder are copyrighted. User agrees that neither User nor User's agents, representatives, nor others will record or duplicate or reproduce any of the Materials, and written matter, or any other thing furnished hereunder, in any manner whatsoever.
2. User agrees that User shall not charge anyone, either directly or indirectly, to view or hear the Materials without specific written permission from a duly elected officer of Crestcom International, LLC.
3. User agrees that only employees or agents of User's organization shall be allowed or permitted to utilize the Materials provided hereunder.
4. If User's organization is a franchise organization or part of a chain or group of organizations - whether independently owned or not - other franchisees or members of the chain or group shall not be allowed to utilize the Materials provided hereunder, either directly or indirectly, without specific written permission from a duly elected officer of Crestcom International, LLC.
5. User agrees that User shall not sell, rent, lease, lend, give, or otherwise transfer any of the Materials provided hereunder to any other individual, organization, or entity without specific written authorization from a duly elected officer of Crestcom International, LLC.
6. User shall not do any act or thing indirectly that User is prohibited from doing directly.
7. User authorizes Crestcom International, LLC or any of its Authorized Licensees to use User's and/or User's agent(s) name(s) as a reference.

VIDEO/LIVE TRAINING ATTENDEES

1. Admissions to training Sessions are interchangeable within User's organization. If User is a franchise or a part of a chain or group of organizations (whether independently owned or not), or if User is a division or department of a company, admissions are not interchangeable with other franchisees, chain or group members, divisions or departments.
2. User is responsible for paying for each month's training activities/Materials irrespective whether participants attend monthly training Session or other workshop activities.

ADDITIONAL CONDITIONS

Notwithstanding the fact that this Agreement is between User and the Authorized Licensee, Crestcom International, LLC shall have the right to take legal action to enforce this Agreement if User does not renew its license to use the Materials or return the Materials as set forth herein.

All costs and expenses, including reasonable attorney fees, incurred by Authorized Licensee or Crestcom International, LLC in order to collect any amounts due under this Agreement, or to remedy any other breach of this Agreement by User, shall be borne by User.

**Authorized Licensee shall maintain a copy of the contract, invoice or other form indicating the clients', users' or agents' agreement to the above conditions.*



Crestcom International, LLC

6900 E. Bellevue Avenue, Suite 300, Greenwood Village, Colorado 80111 USA
Telephone 303-267-8200 • Facsimile 303-267-8207 • www.crestcomtraining.com

C.A.R.E.

Compassion

- *Listen to the people we serve and co-workers then respond promptly and reliably
- *Work to effectively communicate with patients, families, and each other

Attentiveness

- *Anticipate the wants and needs of the people we serve
- *Practice good phone etiquette; answer with a 'smile', identify yourself and department, ask how you can help; eliminate transfers as much as possible
- *Keep the people we serve informed about their care and treatment

Respect

- *Treat the people we serve as guests, rudeness is never acceptable
- *Respect the privacy and confidentiality of the people we serve, our physicians and your fellow employees
- *Present a professional image
- *Maintain a safe and clean environment

Excellence

- *Strive to master the skills needed to do your best for the people we serve
- *Act to reverse negative service situations using the "anticipate, acknowledge, apologize, amend" process
- *Positively represent Alameda Hospital in the workplace and the community



www.alamedahospital.org

Our History:

- 1894—Alameda Sanatorium, a 6-bed hospital at 2116 San Jose Avenue, is founded by Nurse Kate Creedon.
- 1925—The 110-bed hospital at 2070 Clinton Avenue opened as “Alameda Sanatorium on South Shore”.
- 1939—The “Alameda Sanatorium on South Shore” becomes “Alameda Hospital”, a new non-profit corporation.
- 2002—On April 9th, over 2/3 of voters passed \$298 parcel tax measure to form the City of Alameda Health Care District.
- 2008—Alameda Hospital acquires South Shore Convalescent Hospital.

Alameda Hospital Today:

2070 Clinton Avenue

100 Acute Care Beds, 35 Skilled Nursing Beds

South Shore Skilled Nursing Unit at 625 Willow Street

26 Skilled Nursing Beds

2008 Patient Activity:

2,969 Inpatient Discharges

51,068 Outpatient Visits (Includes 17,922 Emergency Care Center visits)



Alameda Hospital offers a full range of health care services:

- | | |
|---|--|
| Asian Health Outreach | Pulmonary & Respiratory Care |
| Cardiac Rehabilitation | Rehabilitation Services |
| Cardiology | <ul style="list-style-type: none"> • Physical therapy and sports injury services • Occupational therapy • Speech therapy |
| Clinical Laboratory | Surgical Services |
| Diagnostic Imaging: | Specialty Inpatient care |
| <ul style="list-style-type: none"> • C.T. Scan • MRI • Mammography • Ultrasound • Nuclear Medicine • Bone Densitometry • Radiology | <ul style="list-style-type: none"> • Critical Care • Medical Surgical Care • Telemetry • Subacute Care • Skilled Nursing Facility |
| Emergency Care Center | Wellness Programs |
| Mulvany Infusion Center and Cancer Services | |
| Nutritional Counseling | |

City of Alameda Health Care District

2009-2013

Strategic Pillars

Providing compassionate, personalized and quality health care . . . close to home.

Financial Strength

People

Quality/Service

Facilities/Technology

Physicians

Growth

City of Alameda Health Care District Board of Directors:

Jordan Battani

jbattani@alamedahospital.org

Rob Bonta

rbonta@alamedahospital.org

Robert Deutsch, M.D.

rdeutsch@alamedahospital.org

J. Michael McCormick

jmmccormick@alamedahospital.org

Steve Wasson

swasson@alamedahospital.org

Deborah E. Stebbins, Chief Executive Officer

dstebbins@alamedahospital.org

510.814.4000

Board meetings are held the first Monday of each month and are open to the public.

Visit www.alamedahospital.org for meeting schedules and agendas.

Our Medical Staff

Our highly skilled and trained physicians provide a full array of primary and specialty care.

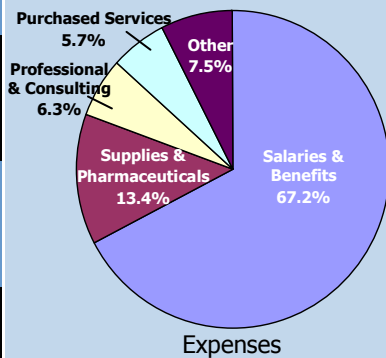
Our Physicians

Alameda Hospital's Medical Staff is composed of nearly 200 physicians trained by some of the best medical schools in the country. Approximately 90% are board certified in their area of expertise.

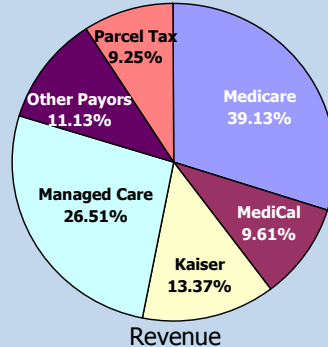
Allergy & Immunology	Infectious Disease	Pathology
Anesthesiology	Internal Medicine	Pediatrics
Cardiology	Nephrology	Plastic and Reconstructive Surgery
Critical Care Medicine	Neurology	Podiatry
Dermatology	Nuclear Medicine	Pulmonary Medicine
Emergency Medicine	Obstetrics and Gynecology	Radiology
Family Practice	Occupational Medicine	Sports Medicine
Gastroenterology	Oncology and Hematology	Thoracic Surgery
General Medicine	Ophthalmology	Urology
General Surgery	Orthopaedic Surgery	Vascular Surgery
Hand Surgery	Otolaryngology (ENT)	
Hospitalist Medicine	Pain Management	

Our Financial Picture

Fiscal Year 2008



The Parcel Tax represents 9.25% of Alameda Hospital's overall revenue.



Net Gain/Loss 2004—2009



Our Goal: To reduce our reliance on the parcel tax and shift its application from operations to capital improvement.

Recent Milestones:

- Financial Stabilization
- Acquisition of South Shore Convalescent
- VA contract to provide inpatient and emergency care
- Kaiser Contract
- Physician Recruitment
 - Orthopaedic surgeons (3)
 - OB/GYN
 - General surgeons
 - Primary care (family practice and internal medicine)
- HealthGrades Recognition for Stroke, Cardiac, Pulmonary and Critical Care
- American Heart Association Recognition
- Child Friendly ER
- Asian Health Outreach
- Information Technology Initiatives

Our Challenges:

- Kaiser penetration and contract reliance
- Seismic requirements (SB1953)
- Decreases in reimbursement
- Increases in operating expenses and capital needs
- Keeping pace with advances in medical and information technology
- Physician Recruitment
- Increasing market share, particularly in 94502 and surrounding communities

Contact Us:

General Information: 510.522.3700
 Emergency Care Center: 510.523.4357
 Physician Referral Service: 510.522.7058
 E-mail: communityrelations@alamedahospital.org