REPORT
ON THE
COST BASED REIMBURSEMENT HOSPITAL CLINIC

LAC – MARTIN LUTHER KING JR. / DREW MEDICAL
CENTER HOSPITAL BASED CLINIC
LOS ANGELES, CALIFORNIA
PROVIDER NUMBER: FHC 40578F
NATIONAL PROVIDER IDENTIFIER: 1245343052

FISCAL PERIOD ENDED
JUNE 30, 2006

Audits Section—Gardena
Financial Audits Branch
Audits and Investigations
California Department of Health Care Services

Section Chief: Cheryl Phillips
Audit Supervisor: Cheryl Phillips
Auditor: Kristine Lim

DHCS
DAVID MAXWELL-JOLLY
Director

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

ARNOLD SCHWARZENEGGER
Governor

November 10, 2009

Judy Wong, Manager
State Reimbursement Section
Program Reimbursement Division
Department of Health Services
313 North Figueroa Street, Room 426
Los Angeles, California 90012

PROVIDER: LAC MARTIN LUTHER KING JR. / DREW MEDICAL CENTER – HOSPITAL BASED CLINIC
PROVIDER NUMBER: FHC 40578F
NATIONAL PROVIDER: IDENTIFIER: 1245343052
FISCAL PERIOD ENDED: JUNE 30, 2006

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

In our opinion, the audited settlement for the fiscal period due the Clinic in the amount of $13,757,780, represents a proper determination in accordance with Medi-Cal Program reimbursement principles. The audited amount represents the final settlement of Medi-Cal Program costs.

This Audit Report includes the:

1. Computation of Audited Cost Based Reimbursement Hospital Clinic Settlement (Schedule 1) and supporting schedules

2. Audit Adjustments

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

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

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

Chief
Office of Administrative Appeals and Hearings
1029 J Street, Suite 200
Sacramento, CA 95814-2825
(916) 322-5603

The written notice of disagreement must be received by the Department within 60 calendar days from the day you receive this letter. A copy of this notice should be sent to:

United States Postal Service (USPS)
Assistant Chief Counsel
Department of Health Care Services
Office of Legal Services
MS 0010
PO Box 997413
Sacramento, CA 95899-7413

Courier (UPS, FedEx, etc.)
Assistant Chief Counsel
Department of Health Care Services
Office of Legal Services
MS 0010
1501 Capitol Avenue, Suite 71.5001
Sacramento, CA 95814-5005
(916) 440-7700

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

If you have questions regarding this report you may call the Audits Section – Gardena at (310) 516-4757.

Cheryl Phillips

Cheryl Phillips, Chief
Audits Section – Gardena
Financial Audits Branch

Certified

FORM 1

County of Los Angeles - Department of Health Services
HOSPITAL CBRC COST REPORT
Determination of HOSPITAL Outpatient Reimbursement
Hospital: MLK/Drew Medical Center
Fiscal Year: 2005-06

1.	Medi-Cal CBRC Clinic and Ancillary Cost (Form 1a, Column 9, Line 101)	24,672,073
2	Medi-Cal CBRC Physician and Non- Physician Cost (Form 2, Column 7, Line 101)	3,477,891
3	Total Medi-Cal CBRC Cost	28,149,964
4	Less Payments:	
	a Medi-Cal (Billing Code 01 & 03)(Adj 7)	14,083,474
	b Medi-Cal/Care Crossover (Billing Code 02)(Adj 7)	0
	c Medicare Payments QMB Pluses (Adj 7)	263,012
	d Patient Share of Cost (Adj 7)	45,698
	e Total Payments (Adj 7)	14,392,184
5	Net of CBRC Cost Less: Payments (Line 3 - Line 4e)	13,757,780
6	Underpayment/Overpayment of Medicare/Medi-Cal QMB Visits	
	1) Medicare deductible /coinsurance	0
	2) Medi-Cal Allowable Payments less Medicare Payments	0
	3) Lower of 6 1 or 6 2	0
	4 Medi-Cal/Care Crossover Payments	0
	5) Variance Line 6.3 minus Line 6 4	0
7.	Balance Due Provider/(State) Before Protested Items (Line 5 minus or add Line 6.5)	13,757,780
8	Protested Items: (Adj 8)	0
9.	Balance Due Provider (State) After Protested Items	13,757,780
10.	Average Medi-Cal Cost Per Visit (Line 3 / Form 1, Column 6, Line 60)	$ 851.69

County of Los Angeles - Department of Health Services
HOSPITAL CBRC COST REPORT
Apportionment of HOSPITAL Ancillary and Clinic Costs
Hospital: MLK/Drew Medical Center
FISCAL YEAR : 2005-06

FORM 1a

CMS Line No.	Cost Center Descriptions	1 Total Ancillary and Clinic Cost	2 Total RVUs/Visits	3 Ancillary/Clinic Cost to RVU/Visits Ratio Col. 1/ Col.2	4 Medi-Cal RVUs/ Outpatient Clinic Visits	5 Med-Cal CHC/HC Referral RVUS	6 Total Med-Cal RVUs/Visits Col. 4 + Col. 5	7 Off-Site Medi-Cal RVUs	8 Net Medi-Cal RVUs/Visits Col. 6 - Col. 7	9 Medi-Cal Outpatient Ancillary and Clinic Costs (Column 3 X Column 8)
		(Adj. 1)	(Adj. 2)		(Adj. 4)	(Adj. 5)		(Adj. 6)		
	Ancillary Service Cost Centers (RVUs)									
37.00	Operating Room	$ 13,955,442	323,705	43.111605	44,901	0	44,901	0	44,901	1,935,754
39.00	Delivery Room & Labor Room	8,468,339	635	13,335.966929	0	0	0	0	0	0
40.00	Anesthesiology	5,825,108	478,968	12.161790	66,438	0	66,438	0	66,438	808,005
41.00	Radiology-Diagnostic	14,458,476	368,218	39.266076	24,412	823	25,235	0	25,235	990,879
43.00	Radioisotope	2,707,500	227,292	11.911990	35,629	4,133	39,762	0	39,762	473,646
43.01	C.T. Scan	2,240,083	471,145	4.754551	46,491	4,679	51,170	0	51,170	243,289
44.00	Laboratory	16,706,883	1,558,524	10.719683	132,639	25,334	157,973	18,947	139,026	1,490,315
44.01	Pulmonary Function	1,485,254	12,446	119.335851	2,497	436	2,933	0	2,933	349,952
46.00	Whole Blood & Packed Red Blood Cells	3,050,520	23,181	131.595703	2,128	253	2,381	0	2,381	313,382
49.00	Respiratory Therapy	5,441,173	1,673,901	3.250594	22,998	0	22,998	0	22,998	74,757
50.00	Physical Therapy	3,012,852	234,582	12.843492	38,829	280	39,109	0	39,109	502,290
51.00	Occupational Therapy	1,702,549	132,013	12.896828	10,023	0	10,023	0	10,023	129,258
51.01	Recreation Therapy	1,071,380	11,109	96.442524	0	0	0	0	0	0
52.00	Speech Pathology	141,060	11,109	12.697813	0	0	0	0	0	0
53.00	Electrocardiology	1,431,940	268,542	5.332276	44,456	114	44,570	0	44,570	237,657
53.01	Cardiac Catheterization Lab	304,597	11,438	26.630268	860	0	860	0	860	22,899
54.00	Electroencephalography	252,467	268,542	0.940140	44,456	0	44,456	0	44,456	41,795
55.00	Medical Supplies Charged to Patients	13,296,614	2,818,007	4.718446	87,037	0	87,037	0	87,037	410,679
56.00	Drugs Charged to Patients	22,869,611	8,759,101	2.610954	1,501,047	0	1,501,047	0	1,501,047	3,919,165
57.00	Renal Dialysis	1,346,887	1,312	1,026.590701	0	0	0	0	0	0
59.00	Cast Room	532,598	1,426	373.490884	270	0	270	0	270	100,843
59.01	Audiology	476,070	16,251	29.294813	3,295	0	3,295	0	3,295	96,526
59.07	Orthotic Devices	196,453	234,582	0.837460	0	0	0	0	0	0
	Outpatient Clinic Service Cost Centers (Visits)									
60.00	Clinic	49,286,048	129,998	379.129279	33,052		33,052		33,052	12,530,981
61.00	Emergency	31,585,657	42,102	750.217496	0					
61.01	Psych Emergency	11,393,746	4,459	2,555.224490	0					
101.00	Total	$ 213,239,307	18,082,588		2,141,456	36,052	2,177,508	18,947	2,158,561	24,672,073

County of Los Angeles County - Department of Health Services
HOSPITAL CBRC COST REPORT
Apportionment of Outpatient HOSPITAL Clinic Physician and Non-Physician Costs
Hospital : MLK/Drew Medical Center
Fiscal Year: 2005-06

FORM 2

CMS Line No.	Cost Center Descriptions	1 Physician Cost (Adj. 3)	2 Non Physician Practioner (NPP) Cost	3 Total Physician and Non-Physician Practioner Cost	4 Total RVUs/Visits	5 Phys and NPP Cost to RVU/Visits Ratio Col. 3 / Col. 4	6 Medi-Cal Outpatient RVUs/Visits From FORM 1 , Col 8	7 Medi-Cal Phys and NPP Outpatient Cost Col. 5 X Col. 6
	Ancillary Service Cost Centers (RVUs)							
37.00	Operating Room	$ 1,186,000	0	1,186,000	323,705	3.663830	44,901	164,510
39.00	Delivery Room & Labor Room	737,186	0	737,186	635	1,160.922835	0	0
40.00	Anesthesiology	4,091,600	333,252	4,424,852	478,968	9.238304	66,438	613,774
41.00	Radiology-Diagnostic	3,445,137	0	3,445,137	368,218	9.356243	25,235	236,105
43.00	Radioisotope	189,475	0	189,475	227,292	0.833619	39,762	33,146
43.01	C.T. Scan	146,532	0	146,532	471,145	0.311013	51,170	15,914
44.00	Laboratory	1,086,841	0	1,086,841	1,558,524	0.697353	139,026	96,950
44.01	Pulmonary Function	1,125	0	1,125	12,446	0.090390	2,933	265
46.00	Whole Blood & Packed Red Blood Cells	0	0	0	23,181	0.000000	2,381	0
49.00	Respiratory Therapy	0	0	0	1,673,901	0.000000	22,998	0
50.00	Physical Therapy	0	0	0	234,582	0.000000	39,109	0
51.00	Occupational Therapy	0	0	0	132,013	0.000000	10,023	0
51.01	Recreation Therapy	0	0	0	11,109	0.000000	0	0
52.00	Speech Pathology	0	0	0	11,109	0.000000	0	0
53.00	Electrocardiology	1,842	0	1,842	268,542	0.006859	44,570	306
53.01	Cardiac Catheterization Lab	0	0	0	11,438	0.000000	860	0
54.00	Electroencephalography	32,836	0	32,836	268,542	0.122275	44,456	5,436
55.00	Medical Supplies Charged to Patients	0	0	0	2,818,007	0.000000	87,037	0
56.00	Drugs Charged to Patients	0	0	0	8,759,101	0.000000	1,501,047	0
57.00	Renal Dialysis	15,835	0	15,835	1,312	12.069360	0	0
59.00	Cast Room	0	0	0	1,426	0.000000	270	0
59.01	Audiology	0	0	0	16,251	0.000000	3,295	0
59.07	Orthotic Devices	0	0	0	234,582	0.000000	0	
	Outpatient Clinic Service Cost Centers (Visits)							
60.00	Clinic	5,632,786	3,458,595	9,091,381	129,998	69.934776	33,052	2,311,484
61.00	Emergency	1,690,713	0	1,690,713	42,102	40.157546	0	0
61.01	Psych Emergency	278,419	0	278,419	4,459	62.439785	0	0
101.00	Total	$ 18,536,327	3,791,847	22,328,174	18,082,588		2,158,561	3,477,891

Provider Name	Fiscal Period	Provider Number	Adjustments
LAC - MARTIN LUTHER KING JR./DREW MED. CTR. HOSPITAL BASED CLINIC	JULY 1, 2005 THROUGH JUNE 30, 2006	FHC40578F	8

Adj. No.	Audit Report	Report References: Work Sheet	Cost Report: Part	Cost Report: Title	Cost Report: Line	Cost Report: Col.	Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
							ADJUSTMENT TO REPORTED COSTS			
1	1a	1			37.00	1	Operating Room	$16,155,124	($2,199,682)	$13,955,442
	1a	1			39.00	1	Delivery Room and Labor Room	6,748,945	1,719,394	8,468,339
	1a	1			40.00	1	Anesthesiology	4,468,920	1,356,188	5,825,108
	1a	1			41.00	1	Radiology - Diagnostic	17,978,529	(3,520,053)	14,458,476
	1a	1			43.00	1	Radioisotope	2,748,547	(41,047)	2,707,500
	1a	1			43.01	1	C.T. Scanner	2,415,336	(175,253)	2,240,083
	1a	1			44.00	1	Laboratory	17,370,823	(663,940)	16,706,883
	1a	1			44.01	1	Pulmonary Function	1,612,247	(126,993)	1,485,254
	1a	1			46.00	1	Whole Blood and Packed Red Blood Cells	3,113,647	(63,127)	3,050,520
	1a	1			49.00	1	Respiratory Therapy	5,458,679	(17,506)	5,441,173
	1a	1			50.00	1	Physical Therapy	3,121,246	(108,394)	3,012,852
	1a	1			51.00	1	Occupational Therapy	1,762,283	(59,734)	1,702,549
	1a	1			51.01	1	Recreational Therapy	1,133,608	(62,228)	1,071,380
	1a	1			52.00	1	Speech Pathology	147,828	(6,768)	141,060
	1a	1			53.00	1	Electrocardiology	1,486,406	(54,466)	1,431,940
	1a	1			53.01	1	Cardiac Catheterization Laboratory	317,445	(12,848)	304,597
	1a	1			54.00	1	Electroencephalography	262,788	(10,321)	252,467
	1a	1			55.00	1	Medical Supplies Charged to Patients	10,982,592	2,314,022	13,296,614
	1a	1			56.00	1	Drugs Charged to Patients	13,216,371	9,653,240	22,869,611
	1a	1			57.00	1	Renal Dialysis	957,602	389,285	1,346,887
	1a	1			59.00	1	Cast Room	552,887	(20,289)	532,598
	1a	1			59.01	1	Audiology	495,957	(19,887)	476,070
	1a	1			59.07	1	Orthotic Devices	375,952	(179,499)	196,453
	1a	1			60.00	1	Clinic	57,299,100	(8,013,052)	49,286,048
	1a	1			61.00	1	Emergency	33,804,462	(2,218,805)	31,585,657
	1a	1			61.01	1	Psychiatric Emergency	11,668,550	(274,804)	11,393,746
	1a	1			101.00	1	Total - Ancillary and Clinic Costs	215,655,874	(2,416,567)	213,239,307

To adjust the reported ancillary and clinic costs to agree with the Hospital audited cost report for fiscal year ended June 30, 2006.
42 CFR 413.20 and 413.24
CMS Pub. 15-1, Sections 2300 and 2304

Provider Name	Fiscal Period	Provider Number	Adjustments
LAC - MARTIN LUTHER KING JR./DREW MED. CTR. HOSPITAL BASED CLINIC	JULY 1, 2005 THROUGH JUNE 30, 2006	FHC40578F	8

Adj. No.	Report References: Audit Report	Report References: Cost Report: Work Sheet	Report References: Cost Report: Part	Report References: Cost Report: Title	Report References: Cost Report: Line	Report References: Cost Report: Col.	Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
							ADJUSTMENT TO REPORTED RVUS			
2	1a	1			41.00	2	Radiology - Diagnostic	390,703	(22,485)	368,218
	1a	1			43.00	2	Radioisotope	242,754	(15,462)	227,292
	1a	1			43.01	2	C.T. Scanner	444,388	26,757	471,145
	1a	1			44.00	2	Laboratory	1,553,130	5,394	1,558,524
	1a	1			44.01	2	Pulmonary Function	8,814	3,632	12,446
	1a	1			46.00	2	Whole Blood and Packed Red Blood Cells	22,481	700	23,181
	1a	1			49.00	2	Respiratory Therapy	2,657,557	(983,656)	1,673,901
	1a	1			50.00	2	Physical Therapy	291,722	(57,140)	234,582
	1a	1			51.00	2	Occupational Therapy	141,380	(9,367)	132,013
	1a	1			53.00	2	Electrocardiology	263,953	4,589	268,542
	1a	1			53.01	2	Cardiac Catheterization Laboratory	12,509	(1,071)	11,438
	1a	1			54.00	2	Electroencephalography	263,953	4,589	268,542
	1a	1			55.00	2	Medical Supplies Charged to Patients	4,585,203	(1,767,196)	2,818,007
	1a	1			56.00	2	Drugs Charged to Patients	8,758,524	577	8,759,101
	1a	1			57.00	2	Renal Dialysis	1,415	(103)	1,312
	1a	1			59.00	2	Cast Room	1,646	(220)	1,426
	1a	1			59.01	2	Audiology	16,238	13	16,251
	1a	1			59.07	2	Orthotic Devices	291,722	(57,140)	234,582
	1a	1			60.00	2	Clinic	134,354	(4,356)	129,998
	1a	1			61.00	2	Emergency	39,104	2,998	42,102
	1a	1			61.01	2	Psychiatric Emergency	4,458	1	4,459
	1a	1			101.00	2	Total - RVUs/Visits	20,951,534	(2,868,946)	18,082,588

To adjust total RVUs to agree with the provider's Aff 10B, 11B and 11C.
42 CFR 413.20, 413.24 and 413.50
CMS Pub. 15-1, Sections 2204, 2206, 2300 and 2304

Provider Name	Fiscal Period	Provider Number	Adjustments
LAC - MARTIN LUTHER KING JR./DREW MED. CTR. HOSPITAL BASED CLINIC	JULY 1, 2005 THROUGH JUNE 30, 2006	FHC40578F	8

Report References									
		Cost Report							
Adj. No.	Audit Report	Work Sheet	Part	Title	Line	Col.	Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
							ADJUSTMENT TO REPORTED PROVIDER-BASED PHYSICIANS			
3	2	2			37.00	1	Operating Room	$1,241,910	($55,910)	$1,186,000
	2	2			39.00	1	Delivery Room and Labor Room	2,342,141	(1,604,955)	737,186
	2	2			40.00	1	Anesthesiology	5,147,477	(1,055,877)	4,091,600
	2	2			41.00	1	Radiology - Diagnostic	1,108,200	2,336,937	3,445,137
	2	2			43.00	1	Radioisotope	190,214	(739)	189,475
	2	2			43.01	1	C.T. Scanner	147,127	(595)	146,532
	2	2			44.00	1	Laboratory	1,139,513	(52,672)	1,086,841
	2	2			44.01	1	Pulmonary Function	1,363	(238)	1,125
	2	2			53.00	1	Electrocardiology	24,910	(23,068)	1,842
	2	2			54.00	1	Electroencephalography	10,633	22,203	32,836
	2	2			57.00	1	Renal Dialysis	366,875	(351,040)	15,835
	2	2			60.00	1	Clinic	6,605,139	(972,353)	5,632,786
	2	2			61.00	1	Emergency	1,154,508	536,205	1,690,713
	2	2			61.01	1	Psychiatric Emergency	288,413	(9,994)	278,419
	2	2			101.00	1	Total - Physician Costs	19,768,423	(1,232,096)	18,536,327

To adjust total physician costs to agree with provider's Physicians Time Allocation Module.
42 CFR 413.20, 413.24 and 413.50
CMS Pub. 15-1, Sections 2204, 2206, 2300 and 2304

Provider Name	Fiscal Period	Provider Number	Adjustments
LAC - MARTIN LUTHER KING JR./DREW MED. CTR. HOSPITAL BASED CLINIC	JULY 1, 2005 THROUGH JUNE 30, 2006	FHC40578F	8

Report References									
		Cost Report							
Adj. No.	Audit Report	Work Sheet	Part	Title	Line	Col.	Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
							ADJUSTMENTS TO REPORTED MEDI-CAL SETTLEMENT DATA			
4	1a	1			37.00	4	Medi-Cal Ancillary RVUs - Operating Room	34,950	9,951	44,901
	1a	1			40.00	4	Medi-Cal Ancillary RVUs - Anesthesiology	51,714	14,724	66,438
	1a	1			41.00	4	Medi-Cal Ancillary RVUs - Radiology - Diagnostic	52,802	(28,390)	24,412
	1a	1			43.00	4	Medi-Cal Ancillary RVUs - Radioisotope	7,500	28,129	35,629
	1a	1			44.00	4	Medi-Cal Ancillary RVUs - Laboratory	151,667	(19,028)	132,639
	1a	1			50.00	4	Medi-Cal Ancillary RVUs - Physical Therapy	38,955	(126)	38,829
	1a	1			54.00	4	Medi-Cal Ancillary RVUs - Electroencephalogy	44,570	(114)	44,456
	1a	1			55.00	4	Medi-Cal Ancillary RVUs - Medical Supplies Charged to Patients	397,631	(310,594)	87,037
	1a	1			56.00	4	Medi-Cal Ancillary RVUs - Drugs Charged to Patients	1,655,431	(154,384)	1,501,047
	1a	1			59.00	4	Medi-Cal Ancillary RVUs - Cast Room	273	(3)	270
	1a	1			59.01	4	Medi-Cal Ancillary RVUs - Audiology	3,322	(27)	3,295
	1a	1			60.00	4	Medi-Cal Ancillary RVUs - Clinic	32,979	73	33,052
	1a	1			101.00	4	Medi-Cal Ancillary RVUs - Total	2,601,245	(459,789)	2,141,456
5	1a	1			41.00	5	Medi-Cal CHC/HC Referral RVUs - Radiology - Diagnostic	4,871	(4,048)	823
	1a	1			43.00	5	Medi-Cal CHC/HC Referral RVUs - Radioisotope	85	4,048	4,133
	1a	1			44.00	5	Medi-Cal CHC/HC Referral RVUs - Laboratory	25,350	(16)	25,334
	1a	1			49.00	5	Medi-Cal CHC/HC Referral RVUs - Respiratory Therapy	79	(79)	0
	1a	1			101.00	5	Medi-Cal CHC/HC Referral RVUs - Total	36,147	(95)	36,052
6	1a	1			44.00	7	Medi-Cal Off-Site RVUs - Laboratory	18,774	173	18,947
	1a	1			101.00	7	Medi-Cal Off-Site RVUs - Total	18,774	173	18,947

To adjust Medi-Cal RVUs to agree with Aff 11B, other document and the following EDS Paid Claims Summary:
Run Dates: April 3, 2009 and July 1, 2009
Payment Period: July 1, 2005 through March 31, 2009
Service Period: July 1, 2005 through June 30, 2006
42 CFR 413.20, 413.24, 413.50, 413.53, 413.60, 413.64, and 433.139
CMS Pub. 15-1, Sections 2304, 2404, and 2408
CCR, Title 22, Section 51541

Provider Name	Fiscal Period	Provider Number	Adjustments
LAC - MARTIN LUTHER KING JR./DREW MED. CTR. HOSPITAL BASED CLINIC	JULY 1, 2005 THROUGH JUNE 30, 2006	FHC40578F	8

Adj. No.	Report References: Audit Report	Cost Report: Work Sheet	Part	Title	Line	Col.	Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
							ADJUSTMENTS TO REPORTED MEDI-CAL SETTLEMENT DATA			
7	1	3			4a	1	Medi-Cal Payments	$13,262,785	$820,689	$14,083,474
	1	3			4b	1	Medi-Cal/Care Payments	386,518	(386,518)	0
	1	3			4c	1	Medicare Payments QMB Pluses	258,804	4,208	263,012
	1	3			4d	1	Patient Share of Costs	4,023	41,675	45,698
	1	3			4e	1	Total Payments	13,912,130	480,055	14,392,185

To adjust Medi-Cal Settlement Data to agree with the following EDS Paid Claims Summary:
Run Dates: April 3, 2009 and July 1, 2009
Payment Period: July 1, 2005 through March 31, 2009
Service Period: July 1, 2005 through June 30, 2006
42 CFR 413.20, 413.24, 413.50, 413.53, 413.60, 413.64, and 433.139
CMS Pub. 15-1, Sections 2304, 2404, and 2408
CCR, Title 22, Section 51541

Provider Name	Fiscal Period	Provider Number	Adjustments
LAC - MARTIN LUTHER KING JR./DREW MED. CTR. HOSPITAL BASED CLINIC	JULY 1, 2005 THROUGH JUNE 30, 2006	FHC40578F	8

Adj. No.	Audit Report	Report References: Work Sheet	Cost Report: Part	Cost Report: Title	Cost Report: Line	Cost Report: Col.	Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
							ADJUSTMENT TO OTHER MATTERS			
8	1	3			10.00	1	Protested Items To eliminate protested amounts. 42 CFR 413.20, 413.24, and 413.5 CMS Pub. 15-1 Sections 2300 and 2304 CMS Pub. 15-2, Section 115.2	($294,528)	$294,528	$0