Appendix B.1, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Acute Facilities - Inpatient
CY 2009 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

Commercial Inpatient

Hospital_Name	Relative Price
ANNA JAQUES HOSPITAL	0.73
ATHOL MEMORIAL HOSPITAL	0.71
BAYSTATE MEDICAL CENTER INC	1.23
BERKSHIRE MEDICALCENTER	1.28
BETH ISRAEL DEACONESS MEDICAL CENTER	1.27
BETH ISREAL HOSPITAL - NEEDHAM	0.77
BOSTON MEDICAL CENTER	0.96
BRIGHAM AND WOMENS HOSPITAL INC	1.36
BROCKTON HOSPITAL	0.84
CAMBRIDGE HEALTH ALLIANCE	0.68
CAPE COD HOSPITAL	1.05
CARITAS NORWOOD HOSPITAL INC	0.91
CARNEY HOSPITAL	1.02
CHILDRENS HOSPITAL	1.83
CLINTON HOSPITAL	1.05
COOLEY DICKINSON HOSPITAL	1.16
DANA FARBER CANCER INSTITUTE	1.09
EMERSON HOSPITAL	0.84
FAIRVIEW HOSPITAL	1.39
FALMOUTH HOSPITAL	0.89
FAULKNER HOSPITAL INC	1.09
FRANKLIN MEDICAL CENTER	1.16
GOOD SAMARITAN MEDICAL CENTER	1.07
HALLMARK HOSPITALS	0.84
HARRINGTON MEMORIAL HOSPITAL	0.94
HEALTH ALLIANCE HOSPITAL	0.83
HENRY HEYWOOD MEMORIAL HOSPITAL	0.68
HOLY FAMILY HOSPITAL INC	0.87
HOLYOKE HOSPITAL	0.73
JORDAN HOSPITAL	1.02
LAHEY CLINIC HOSPITAL INC	1.23
LAWRENCE GENERAL HOSPITAL INC	0.78

Appendix B.1, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Acute Facilities - Inpatient
CY 2009 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

Commercial Inpatient

Hospital_Name	Relative Price
LOWELL GENERAL HOSPITAL	0.75
MARLBOROUGH HOSPITAL	0.95
MARTHAS VINEYARD HOSPITAL	1.27
MARY LANE HOSPITAL	0.99
MASS GENERAL HOSPITAL	1.36
MASSACHUSETTS EYEAND EAR INFIR	1.13
MERCY HOSPITAL	0.81
MERRIMACK VALLEY HOSPITAL	0.94
METROWEST MEDICAL CENTER	0.86
MILFORD REGIONAL MEDICAL CENTER	0.83
MILTON HOSPITAL INC	0.94
MORTON HOSPITAL AND MEDICAL CEN	0.90
MOUNT AUBURN HOSPITAL	0.93
NANTUCKET COTTAGE HOSPITAL	0.86
NASHOBA VALLEY MEDICAL CENTER	0.90
NEW ENGLAND BAPTIST HOSPITAL	1.30
NEWTON WELLESLEY HOSPITAL	1.07
NOBLE HOSPITAL	0.71
NORTH ADAMS REGIONAL HOSPITAL	0.89
NORTH SHORE MEDICAL CENTER	1.11
NORTHEAST (BEVERLY)	0.93

Appendix B.1, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Acute Facilities - Inpatient
CY 2009 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

Hospital_Name	Commercial Inpatient Relative Price
QUINCY MEDICAL CENTER INC	0.82
SAINT ANNES HOSPITAL CORP	1.36
SAINT VINCENT HOSPITAL LLC	0.84
SAINTS MEMORIAL MEDICAL CENTER	0.79
SOUTH SHORE HOSPITAL	1.04
SOUTHCOAST HOSPITAL GROUP	1.07
ST ELIZABETHS MEDICAL CENTER	1.31
STURDY MEMORIAL HOSPITAL	0.92
TUFTS MEDICAL CENTER (NEMC)	1.05
UMASS MEMORIAL MEDICAL CENTER	1.22
WINCHESTER HOSPITAL	0.95
WING MEMORIAL HOSPITAL CORPORAT	0.92

Submitted in accordance with DHCFP specificiations. Results could change based on the resolution of provider specific adjustments.

Appendix B.2, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Acute Facilities - Intpatient
CY 2010 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

	Commercial Inpatient
Hospital_Name	Relative Price
ANNA JAQUES HOSPITAL	0.75
ATHOL MEMORIAL HOSPITAL	0.79
BAYSTATE MEDICAL CENTER INC	1.25
BERKSHIRE MEDICALCENTER	1.21
BETH ISRAEL DEACONESS MEDICAL CENTER	1.22
BETH ISREAL HOSPITAL - NEEDHAM	0.77
BOSTON MEDICAL CENTER	0.93
BRIGHAM AND WOMENS HOSPITAL INC	1.37
BROCKTON HOSPITAL	0.82
CAMBRIDGE HEALTH ALLIANCE	0.76
CAPE COD HOSPITAL	1.02
CARITAS NORWOOD HOSPITAL INC	0.88
CARNEY HOSPITAL	0.99
CHILDRENS HOSPITAL	1.80
CLINTON HOSPITAL	1.05
COOLEY DICKINSON HOSPITAL	1.16
DANA FARBER CANCER INSTITUTE	1.06
EMERSON HOSPITAL	0.90
FAIRVIEW HOSPITAL	1.31
FALMOUTH HOSPITAL	0.87
FAULKNER HOSPITAL INC	1.14
FRANKLIN MEDICAL CENTER	1.17
GOOD SAMARITAN MEDICAL CENTER	1.03
HALLMARK HOSPITALS	0.92
HARRINGTON MEMORIAL HOSPITAL	0.97
HEALTH ALLIANCE HOSPITAL	0.82
HENRY HEYWOOD MEMORIAL HOSPITAL	0.68
HOLY FAMILY HOSPITAL INC	0.84
HOLYOKE HOSPITAL	0.73
JORDAN HOSPITAL	1.01
LAHEY CLINIC HOSPITAL INC	1.19
LAWRENCE GENERAL HOSPITAL INC	0.79
LOWELL GENERAL HOSPITAL	0.81
MARLBOROUGH HOSPITAL	0.92

Appendix B.2, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Acute Facilities - Intpatient
CY 2010 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

	Commercial Inpatient
Hospital_Name	Relative Price
MARTHAS VINEYARD HOSPITAL	1.43
MARY LANE HOSPITAL	1.00
MASS GENERAL HOSPITAL	1.37
MASSACHUSETTS EYEAND EAR INFIR	1.14
MERCY HOSPITAL	0.79
MERRIMACK VALLEY HOSPITAL	0.91
METROWEST MEDICAL CENTER	0.89
MILFORD REGIONAL MEDICAL CENTER	0.82
MILTON HOSPITAL INC	0.93
MORTON HOSPITAL AND MEDICAL CEN	0.88
MOUNT AUBURN HOSPITAL	0.91
NANTUCKET COTTAGE HOSPITAL	0.86
NASHOBA VALLEY MEDICAL CENTER	0.86
NEW ENGLAND BAPTIST HOSPITAL	1.28
NEWTON WELLESLEY HOSPITAL	1.13
NOBLE HOSPITAL	0.72
NORTH ADAMS REGIONAL HOSPITAL	0.94
NORTH SHORE MEDICAL CENTER	1.19
NORTHEAST (BEVERLY)	0.93
QUINCY MEDICAL CENTER INC	0.81
SAINT ANNES HOSPITAL CORP	1.32
SAINT VINCENT HOSPITAL LLC	0.71
SAINTS MEMORIAL MEDICAL CENTER	0.79
SOUTH SHORE HOSPITAL	1.06
SOUTHCOASt Hospital Group	1.06
ST ELIZABETHS MEDICAL CENTER	1.28
STURDY MEMORIAL HOSPITAL	0.90
TUFTS MEDICAL CENTER (NEMC)	1.09
UMASS MEMORIAL MEDICAL CENTER	1.20
WINCHESTER HOSPITAL	0.96
WING MEMORIAL HOSPITAL CORPORAT	0.92

Submitted in accordance with DHCFP specificiations. Results could change based on the resolution of provider specific adjustments.

Appendix B.3, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Acute Facilities - Outpatient
CY 2009 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

	Commercial Outpatient
Hospital_Name	Relative Price
ANNA JAQUES HOSPITAL	0.77
ATHOL MEMORIAL HOSPITAL	0.72
BAYSTATE MEDICAL CENTER INC	1.17
BERKSHIRE MEDICALCENTER	1.29
BETH ISRAEL DEACONESS MEDICAL CENTER	1.01
BETH ISREAL HOSPITAL - NEEDHAM	0.87
BOSTON MEDICAL CENTER	0.82
BRIGHAM AND WOMENS HOSPITAL INC	1.47
BROCKTON HOSPITAL	0.82
CAMBRIDGE HEALTH ALLIANCE	0.71
CAPE COD HOSPITAL	1.58
CARITAS NORWOOD HOSPITAL INC	0.82
CARNEY HOSPITAL	0.80
CHILDRENS HOSPITAL	2.04
CLINTON HOSPITAL	0.86
COOLEY DICKINSON HOSPITAL	1.17
DANA FARBER CANCER INSTITUTE	1.46
EMERSON HOSPITAL	0.93
FAIRVIEW HOSPITAL	1.44
FALMOUTH HOSPITAL	1.67
FAULKNER HOSPITAL INC	1.05
FRANKLIN MEDICAL CENTER	1.02
GOOD SAMARITAN MEDICAL CENTER	0.80
HALLMARK HOSPITALS	0.96
HARRINGTON MEMORIAL HOSPITAL	1.17
HEALTH ALLIANCE HOSPITAL	0.80
HENRY HEYWOOD MEMORIAL HOSPITAL	0.76
HOLY FAMILY HOSPITAL INC	0.75
HOLYOKE HOSPITAL	0.78
JORDAN HOSPITAL	0.86
LAHEY CLINIC HOSPITAL INC	0.92
LAWRENCE GENERAL HOSPITAL INC	0.86
LOWELL GENERAL HOSPITAL	0.82
MARLBOROUGH HOSPITAL	0.82
MARTHAS VINEYARD HOSPITAL	1.85
MARY LANE HOSPITAL	0.98
MASS GENERAL HOSPITAL	1.49
MASSACHUSETTS EYEAND EAR INFIR	0.89

Appendix B.3, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Acute Facilities - Outpatient
CY 2009 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

	Commercial Outpatient
Hospital Name	Relative Price
MERCY HOSPITAL	0.68
MERRIMACK VALLEY HOSPITAL	0.79
METROWEST MEDICAL CENTER	0.76
MILFORD REGIONAL MEDICAL CENTER	0.98
MILTON HOSPITAL INC	0.71
MORTON HOSPITAL AND MEDICAL CEN	0.84
MOUNT AUBURN HOSPITAL	0.96
NANTUCKET COTTAGE HOSPITAL	1.91
NASHOBA VALLEY MEDICAL CENTER	0.84
NEW ENGLAND BAPTIST HOSPITAL	0.88
NEWTON WELLESLEY HOSPITAL	1.01
NOBLE HOSPITAL	0.73
NORTH ADAMS REGIONAL HOSPITAL	0.91
NORTH SHORE MEDICAL CENTER	1.02
NORTHEAST (BEVERLY)	0.95
QUINCY MEDICAL CENTER INC	0.70
SAINT ANNES HOSPITAL CORP	0.85
SAINT VINCENT HOSPITAL LLC	0.78
SAINTS MEMORIAL MEDICAL CENTER	0.75
SOUTH SHORE HOSPITAL	1.07
SOUTHCOAST HOSPITAL GROUP	0.87
ST ELIZABETHS MEDICAL CENTER	0.85
STURDY MEMORIAL HOSPITAL	1.45
TUFTS MEDICAL CENTER (NEMC)	0.89
UMASS MEMORIAL MEDICAL CENTER	1.06
WINCHESTER HOSPITAL	0.89
WING MEMORIAL HOSPITAL CORPORAT	0.86

Submitted in accordance with DHCFP specificiations. Results could change based on the resolution of provider specific adjustments.

Appendix B.4, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Acute Facilities - Outpatient
CY 2010 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

	Commercial Outpatient
Hospital_Name	Relative Price
ANNA JAQUES HOSPITAL	0.77
ATHOL MEMORIAL HOSPITAL	0.74
BAYSTATE MEDICAL CENTER INC	1.16
BERKSHIRE MEDICALCENTER	1.25
BETH ISRAEL DEACONESS MEDICAL CENTER	1.02
BETH ISREAL HOSPITAL - NEEDHAM	0.89
BOSTON MEDICAL CENTER	0.84
BRIGHAM AND WOMENS HOSPITAL INC	1.46
BROCKTON HOSPITAL	0.80
CAMBRIDGE HEALTH ALLIANCE	0.72
CAPE COD HOSPITAL	1.58
CARITAS NORWOOD HOSPITAL INC	0.80
CARNEY HOSPITAL	0.79
CHILDRENS HOSPITAL	2.07
CLINTON HOSPITAL	0.86
COOLEY DICKINSON HOSPITAL	1.15
DANA FARBER CANCER INSTITUTE	1.37
EMERSON HOSPITAL	0.91
FAIRVIEW HOSPITAL	1.39
FALMOUTH HOSPITAL	1.68
FAULKNER HOSPITAL INC	1.03
FRANKLIN MEDICAL CENTER	1.01
GOOD SAMARITAN MEDICAL CENTER	0.78
HALLMARK HOSPITALS	0.95
HARRINGTON MEMORIAL HOSPITAL	1.11
HEALTH ALLIANCE HOSPITAL	0.79
HENRY HEYWOOD MEMORIAL HOSPITAL	0.76
HOLY FAMILY HOSPITAL INC	0.73
HOLYOKE HOSPITAL	0.76
JORDAN HOSPITAL	0.86
LAHEY CLINIC HOSPITAL INC	1.00
LAWRENCE GENERAL HOSPITAL INC	0.81
LOWELL GENERAL HOSPITAL	0.80
MARLBOROUGH HOSPITAL	0.81

Appendix B.4, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Acute Facilities - Outpatient
CY 2010 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

	Commercial Outpatient
Hospital_Name	Relative Price
MARTHAS VINEYARD HOSPITAL	2.16
MARY LANE HOSPITAL	1.06
MASS GENERAL HOSPITAL	1.49
MASSACHUSETTS EYEAND EAR INFIR	0.89
MERCY HOSPITAL	0.67
MERRIMACK VALLEY HOSPITAL	0.77
METROWEST MEDICAL CENTER	0.81
MILFORD REGIONAL MEDICAL CENTER	0.98
MILTON HOSPITAL INC	0.70
MORTON HOSPITAL AND MEDICAL CEN	0.84
MOUNT AUBURN HOSPITAL	0.95
NANTUCKET COTTAGE HOSPITAL	1.97
NASHOBA VALLEY MEDICAL CENTER	0.82
NEW ENGLAND BAPTIST HOSPITAL	0.83
NEWTON WELLESLEY HOSPITAL	1.00
NOBLE HOSPITAL	0.69
NORTH ADAMS REGIONAL HOSPITAL	0.95
NORTH SHORE MEDICAL CENTER	1.00
NORTHEAST (BEVERLY)	0.92
QUINCY MEDICAL CENTER INC	0.69
SAINT ANNES HOSPITAL CORP	0.83
SAINT VINCENT HOSPITAL LLC	0.81
SAINTS MEMORIAL MEDICAL CENTER	0.74
SOUTH SHORE HOSPITAL	1.12
SOUTHCOASt Hospital Group	0.85
ST ELIZABETHS MEDICAL CENTER	0.85
STURDY MEMORIAL HOSPITAL	1.45
TUFTS MEDICAL CENTER (NEMC)	0.95
UMASS MEMORIAL MEDICAL CENTER	1.06
WINCHESTER HOSPITAL	0.86
WING MEMORIAL HOSPITAL CORPORAT	0.86

Submitted in accordance with DHCFP specificiations. Results could change based on the resolution of provider specific adjustments.

Appendix B.5, AG Question 1

DHCFP Relative Price Reporting (114.5 CMR 23.00)
Physician
CY 2009 - Excludes COB and Other Liability Claims
Submission Date 6/1/2011

Parent Group	Relative Price
Atrius Health Inc.	2.24
Baycare Health Partners Inc.	1.04
Beth Israel Deaconess PHO	1.24
Other Blended Multiplier*	1.23
Other Single Multiplier*	1.09
Partners Community Health Care (PCHI)	1.43
Steward Network Services, Inc.	1.07
The Children's Hospital Corporation	2.56
UMass Memorial Health Care	1.29

Submitted in accordance with DHCFP specificiations. Results could change based on the resolution of provider specific adjustments.
**Other Blended Multiplier and Other Single Multiplier as defined by DHCFP.*