EXHIBIT 6

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

Estimated Charges for Inpatient Admissions

DRG	Shore Medical Center at Dorchester - Medical/Surgical Cases	Charge Range Minimum	Charge Range Maximum	Estimated Average Charge
292	HEART FAILURE & SHOCK W CC	$ 3,280	$ 31,026	$ 9,146
392	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	$ 1,888	$ 30,841	$ 9,110
690	KIDNEY & URINARY TRACT INFECTIONS W/O MCC	$ 3,698	$ 25,736	$ 9,123
190	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W MCC	$ 4,013	$ 58,939	$ 12,993
194	SIMPLE PNEUMONIA & PLEURISY W CC	$ 3,496	$ 27,292	$ 10,240
641	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES W/O MCC	$ 2,830	$ 29,149	$ 8,910
291	HEART FAILURE & SHOCK W MCC	$ 3,436	$ 38,340	$ 13,160
638	DIABETES W CC	$ 2,615	$ 18,272	$ 8,089
192	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W/O CC/MCC	$ 2,478	$ 23,402	$ 8,991
897	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W/O MCC	$ 1,586	$ 16,090	$ 7,520
	Shore Medical Center at Dorchester - Psychiatric Cases			
885	PSYCHOSES	$ 1,363	$ 139,888	$ 11,566
881	DEPRESSIVE NEUROSES	$ 1,477	$ 27,186	$ 7,100
882	NEUROSES EXCEPT DEPRESSIVE	$ 1,387	$ 37,581	$ 6,328
880	ACUTE ADJUSTMENT REACTION & PSYCHOSOCIAL DYSFUNCTION	$ 1,477	$ 15,669	$ 7,127
883	DISORDERS OF PERSONALITY & IMPULSE CONTROL	$ 3,013	$ 14,109	$ 6,918
884	ORGANIC DISTURBANCES & MENTAL RETARDATION	$ 5,820	$ 14,693	$ 10,327
886	BEHAVIORAL & DEVELOPMENTAL DISORDERS	$ 2,337	$ 11,135	$ 6,222

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

Estimated Charges for Inpatient Admissions

		Charge Range		
		Minimum	Maximum	Estimated Average Charge
	Shore Medical Center at Easton - Medical/Surgical Cases			
470	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W/O MCC	$ 10,708	$ 52,126	$ 16,820
392	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	$ 2,117	$ 26,514	$ 6,664
194	SIMPLE PNEUMONIA & PLEURISY W CC	$ 3,242	$ 37,870	$ 9,870
690	KIDNEY & URINARY TRACT INFECTIONS W/O MCC	$ 2,649	$ 34,405	$ 8,301
292	HEART FAILURE & SHOCK W CC	$ 2,514	$ 124,978	$ 9,873
462	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY W/O MCC	$ 12,328	$ 50,956	$ 18,687
683	RENAL FAILURE W CC	$ 2,046	$ 61,539	$ 9,362
378	G.I. HEMORRHAGE W CC	$ 2,161	$ 37,547	$ 9,176
641	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES W/O MCC	$ 2,099	$ 21,632	$ 6,890
069	TRANSIENT ISCHEMIA	$ 1,771	$ 20,692	$ 7,480
	Shore Medical Center at Easton - Pediatric Cases			
203	BRONCHITIS & ASTHMA W/O CC/MCC	$ 2,343	$ 15,258	$ 6,503
202	BRONCHITIS & ASTHMA W CC/MCC	$ 3,173	$ 12,859	$ 7,038
194	SIMPLE PNEUMONIA & PLEURISY W CC	$ 3,065	$ 18,491	$ 8,245
195	SIMPLE PNEUMONIA & PLEURISY W/O CC/MCC	$ 2,798	$ 15,849	$ 7,753
392	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	$ 4,910	$ 14,179	$ 8,462
603	CELLULITIS W/O MCC	$ 2,985	$ 15,395	$ 9,331
197	INTERSTITIAL LUNG DISEASE W CC	$ 7,081	$ 15,214	$ 10,802
641	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES W/O MCC	$ 1,894	$ 5,978	$ 4,071
864	FEVER	$ 4,508	$ 11,302	$ 7,401
193	SIMPLE PNEUMONIA & PLEURISY W MCC	$ 3,909	$ 19,502	$ 9,147

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

Estimated Charges for Inpatient Admissions

		Charge Range		
		Minimum	Maximum	Estimated Average Charge
	Shore Medical Center at Easton - Obstetric Cases			
795	NORMAL NEWBORN	$ 809	$ 7,104	$ 2,014
794	NEONATE W OTHER SIGNIFICANT PROBLEMS	$ 867	$ 12,090	$ 2,622
793	FULL TERM NEONATE W MAJOR PROBLEMS	$ 831	$ 35,183	$ 7,516
792	PREMATURITY W/O MAJOR PROBLEMS	$ 1,724	$ 12,446	$ 3,034
789	NEONATES, DIED OR TRANSFERRED TO ANOTHER ACUTE CARE FACILITY	$ 682	$ 10,318	$ 2,403
791	PREMATURITY W MAJOR PROBLEMS	$ 2,012	$ 7,362	$ 3,925
775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	$ 4,874	$ 9,277	$ 7,102
766	CESAREAN SECTION W/O CC/MCC	$ 9,968	$ 10,714	$ 10,341
767	VAGINAL DELIVERY W STERILIZATION &/OR D&C	$ 8,455	$ 8,455	$ 8,455
	Shore Medical Center at Easton - Rehabilitation Cases			
945	REHABILITATION W CC/MCC	$ 1,400	$ 83,646	$ 21,791
946	REHABILITATION W/O CC/MCC	$ 8,146	$ 30,557	$ 17,987

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

Estimated Charges for Inpatient Admissions

		Charge Range		
		Minimum	Maximum	Estimated Average Charge
	Shore Medical Center at Chestertown - Medical/Surgical Cases			
690	KIDNEY & URINARY TRACT INFECTIONS W/O MCC	$ 3,257	$ 33,453	$ 8,134
392	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	$ 2,440	$ 31,816	$ 7,552
194	SIMPLE PNEUMONIA & PLEURISY W CC	$ 2,023	$ 45,885	$ 11,328
871	SEPTICEMIA OR SEVERE SEPSIS W/O MV >96 HOURS W MCC	$ 4,840	$ 96,534	$ 16,444
603	CELLULITIS W/O MCC	$ 3,167	$ 18,929	$ 8,761
292	HEART FAILURE & SHOCK W CC	$ 4,243	$ 40,407	$ 11,544
641	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES W/O MCC	$ 2,248	$ 17,999	$ 8,075
191	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W CC	$ 3,688	$ 36,389	$ 11,391
470	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W/O MCC	$ 15,524	$ 61,202	$ 30,549
192	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W/O CC/MCC	$ 2,862	$ 19,007	$ 7,873

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

Estimated Charges for Common Inpatient Procedures

ICD-9 Code	Procedure	Charge Range Minimum	Charge Range Maximum	Estimated Average Charge
Shore Medical Center at Dorchester				
5123	Laparoscopic cholecystectomy	$ 3,235	$ 46,780	$ 18,273
4516	Esophagogastroduodenoscopy [EGD] with closed biopsy	$ 4,425	$ 23,401	$ 11,748
4513	Other endoscopy of small intestine	$ 5,287	$ 49,033	$ 16,588
4701	Laparoscopic appendectomy	$ 13,373	$ 21,834	$ 18,044
5491	Percutaneous abdominal drainage	$ 7,333	$ 24,752	$ 13,128
5361	Other open incisional hernia repair with graft or prosthesis	$ 21,561	$ 38,392	$ 26,599
4525	Closed [endoscopic] biopsy of large intestine	$ 5,858	$ 40,371	$ 16,622
4523	Colonoscopy	$ 9,708	$ 29,974	$ 17,298
4542	Endoscopic polypectomy of large intestine	$ 8,166	$ 24,909	$ 12,913
8659	Closure of skin and subcutaneous tissue of other sites	$ 3,832	$ 11,041	$ 7,375
Shore Medical Center at Easton				
7359	Other manually assisted delivery	$ 2,771	$ 13,782	$ 6,815
8154	Total knee replacement	$ 10,708	$ 44,008	$ 16,868
741	Incision of adrenal gland	$ 1,502	$ 23,407	$ 9,339
640	Circumcision	$ 956	$ 15,911	$ 2,733
8151	Total hip replacement	$ 11,087	$ 35,613	$ 17,376
3995	Hemodialysis	$ 2,852	$ 45,536	$ 14,301
4516	Esophagogastroduodenoscopy [EGD] with closed biopsy	$ 3,816	$ 90,310	$ 11,386
4513	Other endoscopy of small intestine	$ 2,999	$ 62,183	$ 14,263
3893	Venous catheterization, not elsewhere classified	$ 3,404	$ 56,421	$ 18,987
3722	Left heart cardiac catheterization	$ 3,332	$ 36,052	$ 9,093
Shore Medical Center at Chestertown				
8154	Total knee replacement	$ 4,735	$ 51,620	$ 28,809
4516	Esophagogastroduodenoscopy [EGD] with closed biopsy	$ 3,603	$ 35,746	$ 11,974
4513	Other endoscopy of small intestine	$ 4,508	$ 22,045	$ 9,456
5123	Laparoscopic cholecystectomy	$ 8,626	$ 44,816	$ 18,326
7935	Open reduction of fracture with internal fixation, femur	$ 14,798	$ 27,845	$ 20,729
8188	Reverse total shoulder replacement	$ 38,468	$ 49,942	$ 42,464
4523	Colonoscopy	$ 6,283	$ 48,166	$ 19,092
8411	Amputation of toe	$ 14,223	$ 26,791	$ 18,245
4701	Laparoscopic appendectomy	$ 9,809	$ 36,123	$ 17,363
4525	Closed [endoscopic] biopsy of large intestine	$ 6,515	$ 15,116	$ 11,452

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

SHORE MEDICAL CENTER AT EASTON
Estimated Charges for Common Ancillary Services

LABORATORY

Procedure	Estimated Charge
Complete cbc w/auto diff wbc	$ 20.22
Comprehen metabolic panel	$ 60.48
Urinalysis auto w/o scope	$ 8.00
Assay of troponin quant	$ 64.34
Urinalysis auto w/scope	$ 18.14
Assay of ck (cpk)	$ 14.43
Prothrombin time	$ 16.11
Creatine mb fraction	$ 36.27
Assay of magnesium	$ 12.14
Thromboplastin time partial	$ 16.12
Metabolic panel total ca	$ 22.26
Assay of lipase	$ 16.15
Reagent strip/blood glucose	$ 14.78
Urine pregnancy test	$ 20.23
Urine culture/colony count	$ 40.23
Assay of amylase	$ 12.12
Assay thyroid stim hormone	$ 30.52
Blood typing serologic rh(d)	$ 8.16
Blood typing serologic abo	$ 8.17
Assay of natriuretic peptide	$ 60.05
Rbc antibody screen	$ 24.60
Blood culture for bacteria	$ 126.14
Strep a ag eia	$ 49.68
Fibrin degradation quant	$ 30.35
Culture screen only	$ 39.91

RADIOLOGY

Procedure	Estimated Charge
Chest x-ray 2vw frontal&latl	$ 144.59
Ntsty modul rad tx dlvr smpl	$ 1,112.86
Ct abd & pelv w/contrast	$ 319.07
Ct abd & pelvis w/o contrast	$ 255.99
Ct angiography chest	$ 437.94
Ct neck spine w/o dye	$ 128.64
Mri brain stem w/o & w/dye	$ 913.07
Mri lumbar spine w/o dye	$ 494.85
Mri brain stem w/o dye	$ 529.85
Mri neck spine w/o dye	$ 503.39
Mri joint upr extrem w/o dye	$ 810.57
Ultrasound breast limited	$ 551.10
Us exam pelvic complete	$ 533.03
Transvaginal us non-ob	$ 528.74
Ob us < 14 wks single fetus	$ 532.46
Transvaginal us obstetric	$ 536.64
Chest x-ray 2vw frontal&latl	$ 144.59
Ntsty modul rad tx dlvr smpl	$ 1,112.86
Ntsty modul rad tx dlvr cplx	$ 1,191.88
X-ray exam of knee 3	$ 154.09
X-ray exam l-2 spine 4/>vws	$ 292.30
Radiation treatment delivery	$ 641.79
Guidance for radiaj tx dlvr	$ 216.86
Radiation physics consult	$ 207.78
Radiation treatment aid(s)	$ 611.62

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

SHORE MEDICAL CENTER AT EASTON
Estimated Charges for Common Outpatient Procedures

OUTPATIENT SURGERY	Charge Range		
Procedure	**Minimum**	**Maximum**	**Average Estimated Charge**
Bx breast 1st lesion us imag	$ 1,005	$ 7,152	$ 3,521
Access av dial grft for eval	$ 974	$ 14,542	$ 4,201
Access av di graft for eval	$ 964	$ 9,982	$ 2,813
Abd paracentesis w/imaging	$ 1,020	$ 6,872	$ 2,085
Cysto/uretero w/lithotripsy	$ 3,849	$ 13,328	$ 6,458
Hysteroscopy biopsy	$ 1,574	$ 8,064	$ 2,574
Fetal non-stress test	$ 521	$ 4,527	$ 1,156
Diagnosticmammographydigital	$ 1,184	$ 8,413	$ 3,593
Therapeutic procd strg endur	$ 1,517	$ 23,865	$ 10,282
Image guided breast biopsy	$ 875	$ 10,991	$ 2,977

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

SHORE MEDICAL CENTER AT DORCHESTER
Estimated Charges for Common Ancillary Services

LABORATORY

Procedure	Estimated Charge
Complete cbc w/auto diff wbc	$ 27.18
Comprehen metabolic panel	$ 82.09
Urinalysis auto w/scope	$ 24.49
Assay of troponin quant	$ 86.96
Urinalysis auto w/o scope	$ 10.82
Assay of ck (cpk)	$ 18.60
Prothrombin time	$ 21.93
Assay of magnesium	$ 16.37
Assay thyroid stim hormone	$ 40.84
Metabolic panel total ca	$ 29.75
Creatine mb fraction	$ 47.27
Lipid panel	$ 51.78
Assay of lipase	$ 21.78
Thromboplastin time partial	$ 21.77
Urine pregnancy test	$ 27.18
Reagent strip/blood glucose	$ 20.88
Culture screen only	$ 54.83
Urine culture/colony count	$ 54.46
Glycosylated hemoglobin test	$ 54.09
Vitamin d 25 hydroxy	$ 41.02
Assay of amylase	$ 16.37
Assay of creatinine	$ 5.34
Assay of natriuretic peptide	$ 80.24
Strep a ag eia	$ 66.98
Fibrin degradation quant	$ 40.46

RADIOLOGY

Procedure	Estimated Charge
Ct head/brain w/o dye	$ 87.39
Ct abd & pelv w/contrast	$ 291.10
Ct abd & pelvis w/o contrast	$ 232.75
Ct thorax w/dye	$ 143.25
Ct thorax w/o dye	$ 115.16
Mri brain stem w/o & w/dye	$ 818.50
Mri lumbar spine w/o dye	$ 459.75
Mri jnt of lwr extre w/o dye	$ 711.54
Mri brain stem w/o dye	$ 464.10
Mri joint upr extrem w/o dye	$ 679.33
Us exam abdom complete	$ 474.61
Us exam pelvic complete	$ 433.22
Transvaginal us non-ob	$ 431.87
Ultrasound breast limited	$ 433.07
Ob us < 14 wks single fetus	$ 424.63
Chest x-ray 2vw frontal&latl	$ 117.04
X-ray exam of foot	$ 137.46
X-ray exam l-2 spine 4/>vws	$ 237.28
X-ray exam of knee 3	$ 133.19
Chest x-ray 1 view frontal	$ 79.79
X-ray exam of ankle	$ 123.30
X-ray exam of shoulder	$ 124.60
X-ray exam neck spine 4/5vws	$ 158.04
X-ray exam of hand	$ 132.82
X-ray exam series abdomen	$ 233.96

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

SHORE MEDICAL CENTER AT DORCHESTER
Estimated Charges for Common Outpatient Procedures

OUTPATIENT SURGERY	Charge Range		
Procedure	**Minimum**	**Maximum**	**Average Estimated Charge**
Egd biopsy single/multiple	$ 1,225	$ 12,320	$ 3,279
Colonoscopy and biopsy	$ 1,451	$ 5,050	$ 2,762
Colonoscopy w/lesion removal	$ 1,612	$ 10,167	$ 3,744
Laparoscopic cholecystectomy	$ 5,596	$ 15,616	$ 9,271
Abominal paracentesis	$ 924	$ 21,670	$ 4,201
Repair hernia initial inguina >5 yr	$ 3,183	$ 10,477	$ 5,591
Hernia repair w/mesh	$ 2,756	$ 13,870	$ 6,659
Egd place gastrostomy tube	$ 3,729	$ 4,328	$ 4,105
Pulmonary rehab w exer	$ 293	$ 2,674	$ 1,240

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

SHORE MEDICAL CENTER AT CHESTERTOWN
Estimated Charges for Common Ancillary Services

LABORATORY

Procedure	Estimated Charge
Complete cbc w/auto diff wbc	$ 36.75
Comprehen metabolic panel	$ 110.02
Assay thyroid stim hormone	$ 55.18
Lipid panel	$ 69.53
Prothrombin time	$ 29.53
Metabolic panel total ca	$ 40.39
Urinalysis auto w/scope	$ 33.20
Urinalysis auto w/o scope	$ 14.59
Urine culture/colony count	$ 73.45
Assay of troponin quant	$ 130.36
Thromboplastin time partial	$ 29.70
Glycosylated hemoglobin test	$ 73.21
Assay of ck (cpk)	$ 27.79
Creatine mb fraction	$ 71.03
Assay of magnesium	$ 22.04
Vitamin d 25 hydroxy	$ 55.35
Strep a ag eia	$ 91.37
Urine pregnancy test	$ 36.87
Assay of lipase	$ 29.48
Reagent strip/blood glucose	$ 27.95
Culture screen only	$ 73.77
Assay of creatinine	$ 7.27
Assay of urea nitrogen	$ 7.27
Culture aerobic identify	$ 41.95
Influenza assay w/optic	$ 174.59

RADIOLOGY

Procedure	Estimated Charge
Ct head/brain w/o dye	$ 172.84
Ct abd & pelvis w/o contrast	$ 466.22
Ct abd & pelv w/contrast	$ 578.63
Ct thorax w/dye	$ 284.57
Ct thorax w/o dye	$ 223.54
Mri lumbar spine w/o dye	$ 665.62
Mri jnt of lwr extre w/o dye	$ 1,022.20
Mri brain stem w/o & w/dye	$ 1,233.49
Mri neck spine w/o dye	$ 668.32
Mri joint upr extrem w/o dye	$ 1,045.64
Us exam abdom complete	$ 543.98
Breast tomosynthesis bi	$ 47.49
Us exam pelvic complete	$ 504.82
Transvaginal us non-ob	$ 502.21
Us exam of head and neck	$ 270.80
Chest x-ray 2vw frontal&latl	$ 134.90
Chest x-ray 1 view frontal	$ 94.06
X-ray exam of foot	$ 147.58
X-ray exam l-2 spine 4/>vws	$ 271.22
X-ray exam of shoulder	$ 146.08
X-ray exam of ankle	$ 143.01
X-ray exam of knee 3	$ 158.98
X-ray exam knee 4 or more	$ 347.18
X-ray exam of hand	$ 157.91
X-ray exam neck spine 4/5vws	$ 182.69

UNIVERSITY of MARYLAND
SHORE REGIONAL HEALTH

SHORE MEDICAL CENTER AT CHESTERTOWN
Estimated Charges for Common Outpatient Procedures

OUTPATIENT SURGERY	Charge Range		
Procedure	**Minimum**	**Maximum**	**Average Estimated Charge**
Drain/inj joint/bursa w/o us	$ 377	$ 2,692	$ 1,850
Egd diagnostic brush wash	$ 790	$ 7,433	$ 1,820
Egd biopsy single/multiple	$ 524	$ 8,920	$ 2,196
Diagnostic colonoscopy	$ 968	$ 6,858	$ 1,746
Colonoscopy and biopsy	$ 1,280	$ 7,947	$ 2,098
Colonoscopy w/ablation	$ 1,081	$ 5,734	$ 2,005
Prp i/hern init reduc >5 yr	$ 2,292	$ 6,511	$ 4,200
Colorectal scrn; hi risk ind	$ 1,040	$ 3,100	$ 1,662
Colon ca scrn not hi rsk ind	$ 1,075	$ 2,706	$ 1,642
Therapeutic procd strg endur	$ 3,925	$ 21,970	$ 10,247