Exhibit 23 MWPH Financial Assumptions

MWPH

PG Volume Assumptions

Inpatient volume assumptions are based on use rate: the number of admissions per

- 1. projected Maryland population aged 0-4.
 - Use rate for FY 2014 is average of rate for FY 2012 (unusually low) and FY 2013
- 2. (unusually high).
 - Use rate for FY 2015 FY 2021 is average of FY 2013 and FY 2014. Growth from FY 2014 is expected due to new waiver with population health model, encouraging hospitals to move patients to lower-cost settings. Increased admissions also seen resulting from closer relationship between PG hospital and UMMS, of which MWPH is
- 3. a part.
- 4. Average length of stay for FY 2014 is average of past five years.

 Average length of stay for FY 2015 FY 2021 grows at .25 days per year. Increase is expected due to new waiver with population health model, encourating hospitals to
- move patients more quickly to lower-cost settings.
 Outpatient volumes assumptions are based on current demand. Rehabilitation and psychology are projected to double with the availability of new space; clinic volumes
- 6. are projected to remain stable.

Rogers Volume Assumptions

Inpatient volume assumptions are based on use rate: the number of admissions per

- 1. projected Maryland population aged 0-4.
 - Use rate for FY 2014 is 5% higher than FY 2013. Use rate was lower in FY 2012 and FY 2013 due to renovations to largest patient unit. FY 2014 is first year with completed
- 2. unit with greater capacity.
 - Use rate for FY 2015 FY 2021 reflects this same higher use rate as in FY 2014, due
- 3. to capacity and waiver model
- 4. Average length of stay for FY 2014 is average of past five years.

 Average length of stay for FY 2015 FY 2021 grows at .25 days per year. Increase is expected due to new waiver with population health model, encourating hospitals to
- 5. move patients more quickly to lower-cost settings.

 Outpatient volumes are projected to grow by 3% per year, consistent with current
- 6. trends.

All Financial assumptions include current rates, historical staffing and expense ratios.