

of current costs for the hospital care of indigent and medically indigent persons. The minimum local appropriations for this purpose are:

(1) Baltimore City	[\$ 987,257	\$1,248,225
(2) Allegany	9,121	40,452
(3) Anne Arundel	80,432	97,086
(4) Baltimore County	98,796	126,797
(5) Calvert	16,566	17,234
(6) Caroline	10,036	10,635
(7) Carroll	2,335	10,470
(8) Cecil	2,110	10,796
(9) Charles	11,543	17,706
(10) Dorchester	23,101	19,832
(11) Frederick	19,607	20,860
(12) Garrett	3,601	7,768
(13) Harford	24,492	28,305
(14) Howard	3,651	9,723
(15) Kent	7,020	5,967
(16) Montgomery	40,572	56,529
(17) Prince George's	79,703	113,740
(18) Queen Anne's	9,721	12,671
(19) St. Mary's	4,887	20,784
(20) Somerset	20,220	23,799
(21) Talbot	8,562	12,705
(22) Washington	28,764	31,318
(23) Wicomico	30,587	38,373
(24) Worcester	15,815	16,946
Total: \$1,538,499]		\$1,998,721

Each county and Baltimore City shall place on deposit with the State Department of Health, funds equal to 20% of the costs for the hospital care of indigent and medically indigent persons in the respective political subdivisions, to permit the State Department of Health to pay 100% of current costs for the hospital care of those persons. The amount to be placed on deposit with the State Department of Health for each fiscal year will be that amount specified for the respective political subdivisions in estimates to be furnished to the political subdivisions by the State Department of Health on or before the December 1 immediately preceding the beginning of the fiscal year concerned. Those estimates will be based on the same considerations as those which are incorporated in the calculations in the Governor's recommended budget. Following the close of the fiscal year for which the deposit is made, the State Department of Health shall make a final calculation of the exact amount required for the county to satisfy the provisions of this subsection. If that amount exceeds the amount which the political subdivision had placed on deposit, the additional local requirement will be reported to the political subdivision concerned, and the political subdivision shall appropriate and forward that amount to the State Department of Health within eighteen (18) months after receipt of the report. If the final calculation shows that the amount placed on deposit was in excess of the required amount to satisfy this subsection, the State Department of Health will credit the difference to each subdivision concerned in the estimates it forwards to each political subdivision on or before December 1 of each year, as provided at the outset of this subsection.