

**American Hospital Association
1995 Annual Survey of Hospitals Data Base
Documentation Manual**

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SECTION I

INTRODUCTION

INTRODUCTION

The American Hospital Association's *Annual Survey of Hospitals Data Base* is a derivative of the AHA Annual Survey of Hospitals. This survey has been conducted annually since 1946 and is widely regarded as the most authoritative and comprehensive source of individual hospital data available.

Use this documentation manual as a quick reference guide to make the data base even more convenient and easy to use. The manual includes the following:

- File characteristics and layouts for both tape and diskette formats
- Data reference sheets
- Copy of the 1995 AHA Annual Survey of Hospitals
- Summary of registered hospitals 1994 vs 1995

Since the 1991 version, the *Annual Survey of Hospitals Data Base* has been available in an alternative format: 3½-inch diskettes in ASCII file format. Please refer to Technical User Information — Section 3 of this documentation manual for installation and file characteristics if you are a purchaser of the *Annual Survey on Diskette*.

For additional assistance, please call the Data and Information Business Group at 312/422-3537.

SECTION 2

NEW THIS YEAR *Summary of Changes* **1994 versus 1995 Version**

NEW THIS YEAR

Summary of Changes 1994 versus 1995 Version

There are no changes to note, since the file layouts for the 1994 and 1995 Annual Survey of Hospitals are the same.

SECTION 4

**SUMMARY OF
CHANGES IN
U.S. HOSPITALS
*1994 versus 1995 Version***

**SUMMARY OF REGISTERED HOSPITALS
1994 vs 1995 ANNUAL SURVEY DATA TAPES
(1995 HOSPITAL STATISTICS)**

CLASSIFICATION	TOTAL	UNITED STATES	ASSOCIATED AREAS
1994 TOTALS	6436	6374	62
DELETIONS:			
Changed status from registered to nonregistered	0	0	0
Changed to inpatient care other than a hospital	1	1	0
Changed to an outpatient facility	4	4	0
Closed	61	60	1
Demerged	0	0	0
Duplicate Record	0	0	0
Merged to form a new hospital	61	61	0
Merged into a hospital already on file	10	10	0
Temporarily inactive record	1	1	0
TOTAL DELETIONS:	138	137	1
ADDITIONS:			
Changed status from nonregistered to registered	10	10	0
Demerger result	0	0	0
Merger result	31	31	0
Newly added to the registered file	13	13	0
Previously closed/reopened	0	0	0
Duplicate record	0	0	0
TOTAL ADDITIONS	54	54	0
1995 TOTALS:	6352	6291	61

November, 1996

DELETIONS:

The following hospitals have been deleted from the 1995 Annual Survey file of **registered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR DELETION</u>
6040415	Hospital De Diego - San Juan, PR	Closed
6130092	Medical Center Hospital of Vermont - Burlington, VT	Merged to form 6130001
6130300	Fanny Allen Hospital - Colchester, VT	Merged to form 6130001
6141250	Ludlow Hospital - Ludlow, MA	Closed
6141309	Boston Specialty and Rehabilitation Hospital - Boston, MA	Closed
6160240	Mount Sinai Hospital - Hartford, CT	Merged to form 6160004
6160250	Saint Francis Hospital and Medical Center - Hartford, CT	Merged to form 6160004
6160295	Henry D. Altobello Child Center - Meriden, CT	Merged into 6160295
6160460	Veterans Affairs Medical Center - Newington, CT	Merged to form 6160007
6160515	Housatonic Adolescent Hospital - Newtown, CT	Merged into 6160331
6160765	Veterans Affairs Medical Center - West Haven, CT	Merged to form 6160007
6213995	U. S. Air Force Hospital - Plattsburgh, NY	Closed
6214020	High Point Hospital - Port Chester, NY	Closed
6214407	U. S. Air Force Hospital - Rome, NY	Closed
6220218	Welkind Rehabilitation Hospital - Chester, NJ	Merged into 6220253
6221240	Zurbrugg Memorial Hospital - Riverside, NJ	Merged into 6220515
6230910	Harrisburg Hospital - Harrisburg, PA	Merged to form 6230039
6230920	Polyclinic Medical Center - Harrisburg, PA	Merged to form 6230039
6231370	Seidle Memorial Hospital - Mechanicsburg, PA	Merged to form 6230039
6232328	Thomas Jefferson University Hospital - Philadelphia, PA	Outpatient facility
6232410	Allegheny General Hospital - Pittsburgh, PA	Merged to form 6230041
6232590	Mercy Psychiatric Institute - Pittsburgh, PA	Closed
6239250	Allegheny Neuropsychiatric Institute - Oakdale, PA	Merged to form 6230041

(See merger list for additional documentation on merged hospitals.)

DELETIONS:

The following hospitals have been deleted from the 1995 Annual Survey file of **registered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR DELETION</u>
6239385	Springfield Hospital - Springfield, PA	Merged into 6230400
6320223	Montebello Rehabilitation Hospital - Baltimore, MA	Closed
6340570	Norfolk Psychiatric Center - Norfolk, VA	Closed
6340835	Chippenham Medical Center - Richmond, VA	Merged to form 6340009
6340850	Johnston-Willis Hospital - Richmond, VA	Merged to form 6340009
6341020	Lewis-Gale Hospital - Salem, VA	Merged to form 6340008
6341025	Lewis-Gale Psychiatric Center - Salem, VA	Merged to form 6340008
6370247	Bruce Hospital System - Florence, SC	Merged to form 6370011
6370265	Florence General Hospital - Florence, SC	Merged to form 6370011
6370320	Greenville General Hospital - Greenville, SC	Temporarily Closed
6370400	Fenwick Hall Hospital - Johns Island, SC	Closed
6370650	North Greenville Hospital - Travelers Rest, SC	Closed
6380160	Joseph B. Whitehead Memorial Infirmiry- Atlanta, GA	Outpatient facility
6380173	CPC Parkwood Behavioral Health - Atlanta, GA	Closed
6380428	Bradley Center - Columbus, GA	Merged to form 6380006
6380445	St. Francis Hospital - Columbus, GA	Merged to form 6380006
6390020	Polk General Hospital - Bartow, FL	Closed
6390370	Riverside Hospital - Jacksonville, FL	Closed
6390435	Florida Hospital Kissimmee - Kissimmee, FL	Merged into 6390690
6390465	Palm Beach Regional Hospital - Lake Worth, FL	Merged to form 6390074
6390481	JFK Medical Center - Atlantis, FL	Merged to form 6390074
6390565	Grant Center of Deering Hospital - Miami, FL	Closed
6390805	CPC Palm Bay Hospital - Palm Bay, FL	Closed

(See merger list for additional documentation on merged hospitals.)

DELETIONS:

The following hospitals have been deleted from the 1995 Annual Survey file of **registered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR DELETION</u>
6390905	Physicians Community Hospital - Saint Petersburg, FL	Closed
6410210	Bluffton Community Hospital - Bluffton, OH	Merged to form 6410017
6410300	Molly Stark Hospital - Louisville, OH	Closed
6410895	Meridia South Pointe Hospital - Warrensville Heights, OH	Merged to form 6410018
6411060	St. Ann's Hospital of Columbus - Westerville, OH	Merged into 6411035
6411150	Fallsview Psychiatric Hospital - Cuyahoga Falls, OH	Closed
6411320	Blanchard Regional Health Center - Findlay, OH	Merged to form 6410017
6411610	Mansfield General Hospital - Mansfield, OH	Merged to form 6410016
6412010	Shelby Memorial Hospital - Shelby, OH	Merged to form 6410016
6412292	Warren General Hospital - Warren, OH	Closed
6418210	Potters Medical Center - East Liverpool, OH	Closed
6419260	Meridia South Pointe - Warrensville Heights, OH	Merged to form 6410018
6420385	Hawley U. S. Army Community Hospital - Indianapolis, OH	Closed
6432935	CPC Old Orchard Hospital - Skokie, IL	Closed
6440370	Crystal Falls Community Hospital - Crystal Falls, MI	Merged to form 6440015
6442370	Iron County General Hospital - Iron River, MI	Merged to form 6440015
6449070	Rehabilitation Institute at Tri-state Hospital - Buchanan, MI	Closed
6450540	Mercy Health System - Janesville, WI	Merged to form 6450015
6458096	Parkside Lodge of Wisconsin - Janesville, WI	Merged to form 6450015
6510785	Mercy Hospital - Owensboro, KY	Merged to form 6510003
6510790	Owensboro-Daviess County Hospital - Owensboro, KY	Merged to form 6510003
6520775	Le Bonheur Children's Medical Center - Memphis, TN	Merged into 6520785
6549105	Lumberton Citizens Hospital - Lumberton, MS	Closed

(See merger list for additional documentation on merged hospitals.)

DELETIONS:

The following hospitals have been deleted from the 1995 Annual Survey file of **registered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR DELETION</u>
6610665	Karlstad Health Facilities - Karlstad, MN	Closed
6611160	Moose Lake Regional Treatment Center - Moose Lake, MN	Closed
6621321	Story City Memorial Hospital - Story City, IA	Closed
6630320	Freeman Hospital - Joplin, MO	Merged to form 6630008
6630420	Menorah Medical Center - Kansas City, MO	Closed
6631060	Jewish Hospital of St. Louis - Saint Louis, MO	Merged into 6630930
6639085	Oak Hill Hospital - Joplin, MO	Merged to form 6630008
6640157	Dakota Hospital - Fargo, ND	Merged to form 6640002
6640170	Heartland Medical Center - Fargo, ND	Merged to form 6640002
6640245	Medical Center Rehabilitation Hospital - Grand Forks, ND	Merged into 6640001
6670880	Asbury-Salina Regional Medical Center - Salina, KS	Merged to form 6670016
6670900	St. John's Regional Health Center - Salina, KS	Merged to form 6670016
6671000	C. F. Menninger Memorial Hospital - Topeka, KS	Merged to form 6670019
6671083	Wellington Hospital and Clinic - Wellington, KS	Closed
6679070	Child and Adolescent Services - Topeka, KS	Merged to form 6670019
6719155	Nevada County Hospital - Prescott, AR	Closed
6720012	Shoreline Medical Center - Metairie, LA	Closed
6720337	Charter Behavioral Health System - Lafayette, LA	Closed
6720416	Merryville General Hospital - Merryville, LA	Closed
6720515	CPC Coliseum Medical Center - New Orleans, LA	Closed
6720774	CPC Brentwood Hospital - Shreveport, LA	Closed
6740037	Woods Psychiatric Institute - Abilene, TX	Closed
6740085	St. Michael Rehabilitation Hospital - Texarkana, TX	Merged to form 6740119

(See merger list for additional documentation on merged hospitals.)

DELETIONS:

The following hospitals have been deleted from the 1995 Annual Survey file of **registered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR DELETION</u>
6740720	Medical Center Hospital - Conroe, TX	Merged to form 6740117
6740730	Doctors Hospital - Conroe, TX	Merged to form 6740117
6741339	Brooks County Hospital - Falfurrias, TX	Closed
6741436	Careunit Hospital - Fort Worth, TX	Closed
6741465	Charter Behavioral Health System - Fort Worth, TX	Closed
6741480	Plaza Medical Center-East - Fort Worth, TX	Closed
6741600	St. Mary's Hospital - Galveston, TX	Closed
6741684	Goliad County Hospital - Goliad, TX	Closed
6741940	Medical Center Hospital - Houston, TX	Closed
6742142	Veterans Affairs Medical Center - Kerrville, TX	Merged to form 6740128
6742185	Mainland Medical Center - Texas City, TX	Merged to form 6740118
6742780	Pasadena General Hospital - Pasadena, TX	Closed
6742995	Audie L. Murphy Memorial Hospital - San Antonio, TX	Merged to form 6740128
6743530	Danforth Hospital - Texas City, TX	Merged to form 6740118
6743705	Charter Behavioral Health System - Webster, TX	Closed
6840001	West Pines at Lutheran Medical Center - Wheat Ridge, CO	Merged to form 6840012
6840960	Lutheran Medical Center - Wheat Ridge, CO	Merged to form 6840012
6850004	Sun Crest Hospital - Farmington, NM	Closed
6850150	Plains Regional Medical Center - Clovis, NM	Merged to form 6850012
6850347	Plains Regional Medical Center-Portales - Portales, NM	Merged to form 6850012
6860170	Desert Samaritan Medical Center - Mesa, AZ	Merged to form 6860016
6860195	Westbridge Treatment Center - North Campus - Phoenix, AZ	Merged to form 6860014
6860295	Westbridge Treatment Center - Phoenix, AZ	Merged to form 6860014

(See merger list for additional documentation on merged hospitals.)

DELETIONS:

The following hospitals have been deleted from the 1995 Annual Survey file of **registered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR DELETION</u>
6870002	Charter Canyon Treatment Center - Midvale, UT	Closed
6870340	Wasatch Canyons Hospital - Salt Lake City, UT	Closed
6880067	Women's Hospital - Las Vegas, NV	Closed
6910020	Veterans Affairs Medical Center - Tacoma, WA	Merged to form 6910007
6910550	Swedish Medical Center-Ballard - Seattle, WA	Merged to form 6910006
6910730	Swedish Medical Center-Seattle - Seattle, WA	Merged to form 6910730
6910775	Veterans Affairs Medical Center - Seattle, WA	Merged to form 6910007
6910893	Mountainview Hospital of Spokane - Spokane, WA	Closed
6930014	Charter Behavioral Health System - Thousand Oaks, CA	Closed
6930025	Laguna Hills Hospital - Laguna Beach, CA	Closed
6930410	Vista Hill Hospital - Chula Vista, CA	Closed
6930465	Doheny Eye Institute - Los Angeles, CA	Closed
6930811	Sierra Community Hospital - Fresno, CA	Outpatient facility
6931260	Veterans Affairs Medical Center - Livermore, CA	Merged to form 6930064
6931354	Charter Behavioral Health System - Long Beach, CA	Closed
6932340	Veterans Affairs Medical Center - Palo Alto, CA	Merged to form 6930064
6932420	Los Medanos Community Hospital - Pittsburg, CA	Closed
6932625	U. S. Air Force Regional Hospital - March AFB, CA	Closed
6932811	Mesa Vista Hospital - San Diego, CA	Not operating as a hospital
6933379	CPC Santa Ana Hospital - Santa Ana, CA	Closed
6933382	Alamar Hospital - Santa Barbara, CA	Closed
6933515	Veterans Affairs Medical Center- Sepulveda, CA	Outpatient facility
6933895	Ingleside Hospital - Rosemead, CA	Closed

(See merger list for additional documentation on merged hospitals.)

ADDITIONS:

The following hospitals have been added to the 1995 Annual Survey file of **registered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR ADDITION</u>
6130001	Fletcher Allen Health Care - Burlington, VT	Result of merger (6130092 and 6130300)
6160004	Saint Francis Hospital and Medical Center - Hartford, CT	Result of merger (6160240 and 6160250)
6160007	Veterans Affairs Connecticut Healthcare System - West Haven, CT	Result of merger (6160460 and 6160765)
6230014	Montefiore University Hospital - Pittsburgh, PA	Newly registered
6230039	Pinnacle Health Hospitals - Harrisburg, PA	Result of merger (6230920, 6230910 and 6231370)
6230041	Allegheny General Hospital - Pittsburgh, PA	Result of merger (6232410 and 6239250)
6320004	Chesapeake Rehabilitation Hospital - Salisbury, MD	Previously non-registered
6340008	Lewis-Gale Medical Center - Salem, VA	Result of merger (6341020 and 6341025)
6340009	Chippenham and Johnston-Willis - Richmond, VA	Result of merger (6340835 and 6340850)
6350005	Mountainview Regional Rehabilitation Hospital - Morgantown, WV	Previously non-registered
6370011	Carolinas Hospital System - Florence, SC	Result of merger (6370247 and 6370265)
6370012	Healthsouth Rehab Hospital - Florence, SC	Newly registered
6380002	Central Georgia Rehabilitation Hospital - Macon, GA	Previously non-registered
6380006	St. Francis Hospital - Columbus, GA	Result of merger (6380445, 6380428 and 6380445)
6390033	Veterans Affairs Medical Center - Palm	Previously non-registered
6390074	Columbia JFK Medical Center - Atlantis, FL	Result of merger (6390465 and 6390481)
6410016	MedCentral Health System - Mansfield, OH	Result of merger (6411610 and 6412010)
6410017	Blanchard Valley Regional Health Center - Findlay, OH	Result of merger (6410210 and 6411320)
6410018	Meridia South Pointe Hospital - Warrensville Heights, OH	Result of merger (6410895 and 6419260)
6420014	Koala Hospital and Counseling Center - Plymouth, IN	Newly registered

(See merger list for additional documentation on merged hospitals.)

ADDITIONS:

The following hospitals have been added to the 1995 Annual Survey file of **registered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR ADDITION</u>
6430811	Olympia Fields Hospital and Medical Center - Olympia Fields, IL	Previously non-registered
6440015	Iron County Community Hospital - Iron River, MI	Result of merger (6440370 and 6442370)
6450015	Mercy Health System - Janesville, WI	Result of merger (6450540 and 6458096)
6450016	THC-Milwaukee - Greenfield, WI	Newly registered
6510003	Owensboro Mercy Health System - Owensboro, KY	Result of merger (6510785 and 6510790)
6610003	Transitional Hospital Corporation of Minneapolis - Golden Valley, MN	Newly registered
6630008	Freeman Hospitals and Health System - Joplin, MO	Result of merger (6630320 and 6639085)
6640002	Dakota Heartland Health System - Fargo, ND	Result of merger (6640157 and 6640170)
6670008	Parkview Hospital of Topeka - Topeka, KS	Previously non-registered
6670016	Salina Regional Health Center - Salina, KS	Result of merger (6670880 and 6670900)
6670019	C. F. Menninger Memorial Hospital - Topeka, KS	Result of merger (6671000 and 6679070)
6740088	Horizon Specialty Hospital - Lubbock, TX	Newly registered
6740093	Austin Diagnostic Medical Center - Austin, TX	Newly registered
6740097	Columbia Specialty Hospital - Dallas, TX	Newly registered
6740506	Burleson Memorial Hospital - Caldwell, TX	Previously non-registered
6740113	South Texas Ambulatory Surgery Hospital - San Antonio, TX	Newly registered
6740117	Columbia Conroe Regional Medical Center - Conroe, TX	Result of merger (6740720 and 6740730)
6740118	Columbia Mainland Medical Center -Texas City, TX	Result of merger (6742185 and 6743530)
6740119	St. Michael Health Care Center - Texarkana, TX	Result of merger (6740085 and 6740094)
6740128	South Texas Veterans Health Care - San Antonio, TX	Result of merger (6742142 and 6742995)
6742105	Memorial City Rehabilitation Hospital - Houston, TX	Previously non-registered

(See merger list for additional documentation on merged hospitals.)

ADDITIONS:

The following hospitals have been added to the 1995 Annual Survey file of **registered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR ADDITION</u>
6840012	Lutheran Medical Center - Wheat Ridge, CO	Result of merger (6840001 and 6840960)
6850012	Plains Regional Medical Center - Clovis, NM	Result of merger (6850150 and 6850347)
6860011	Mohave Valley Hospital and Medical Center - Bullhead City, AZ	Newly registered
6860014	Westbridge Treatment Center - Phoenix, AZ	Result of merger (6860195 and 6860295)
6860016	Desert Samaritan Medical Center - Mesa, AZ	Result of merger (6860170 and 6860270)
6910006	Swedish Medical Center - Seattle, WA	Result of merger (6910550 and 6910730)
6910007	VA Puget Sound Health Care System - Seattle, WA	Result of merger (6910020 and 6910775)
6910223	Deer Park Health Center and Hospital - Deer Park, WA	Previously non-registered
6910635	Snoqualmie Valley Hospital - Snoqualmie, WA	Newly registered (reopened)
6930049	Desert Valley Hospital - Victorville, CA	Previously non-registered
6930052	Kaiser Foundation Hospital - Fresno, CA	Newly registered
6930064	VA Palo Alto Health Care System - Palo Alto, CA	Result of merger (6931260 and 6932340)
6932700	U. S. Air Force Hospital - Mather AFB, CA	Newly registered (reopened)

(See merger list for additional documentation on merged hospitals.)

**SUMMARY OF NONREGISTERED HOSPITALS
1994 vs 1995 ANNUAL SURVEY DATA TAPES
(1995 HOSPITAL STATISTICS)**

CLASSIFICATION	TOTAL	UNITED STATES	ASSOCIATED AREAS
1994 TOTALS	155	152	3
DELETIONS:			
Changed status from nonregistered to registered	10	10	0
Changed to inpatient care other than a hospital	0	0	0
Changed to an outpatient facility	0	0	0
Closed	4	4	0
Duplicate record/ID changed	0	0	0
Demerged	0	0	0
Merged to form a new hospital	0	0	0
Merged into a hospital already on file	1	1	0
Temporarily inactive record	0	0	0
TOTAL DELETIONS:	15	15	0
ADDITIONS:			
Changed status from registered to nonregistered	0	0	0
Newly added to the nonregistered file	12	12	0
Previously closed/reopened	8	8	0
Duplicate record/ID changed	0	0	0
TOTAL ADDITIONS	20	20	0
1995 TOTALS:	160	157	3

November, 1996

DELETIONS:

The following hospitals have been deleted from the 1995 Annual Survey file of **nonregistered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR DELETION</u>
6320004	Chesapeake Rehabilitation Hospital - Salisbury, MD	Changed status to registered
6350005	Mountainview Regional Rehabilitation Hospital - Morgantown, WV	Changed status to registered
6380002	Central Georgia Rehabilitation Hospital - Macon, GA	Changed status to registered
6390033	Veterans Affairs Medical Center - Palm	Changed status to registered
6430811	Olympia Fields Hospital and Medical Center - Olympia Fields, IL	Changed status to registered
6520218	Plateau Mental Health Center - Cookeville, TN	Closed
6611140	Heartland Medical Center - Moorhead, MN	Closed
6670008	Parkview Hospital of Topeka - Topeka, KS	Changed status to registered
6740506	Burleson Memorial Hospital - Caldwell, TX	Changed status to registered
6742105	Memorial City Rehabilitation Hospital - Houston, TX	Changed status to registered
6850455	Colfax General Hospital - Springer, NM	Nursing home - Merged into 6850343
6859090	Fort Stanton Hospital - Fort Stanton, NM	Closed
6910223	Deer Park Health Center and Hospital - Deer Park, WA	Changed status to registered
6930049	Desert Valley Hospital - Victorville, CA	Changed status to registered
6939450	Manor West Hospital - Los Angeles, CA	Closed

(See merger list for additional documentation on merged hospitals.)

ADDITIONS:

The following hospitals have been added to the 1995 Annual Survey file of **nonregistered** hospitals.

<u>ID</u>	<u>NAME AND LOCATION</u>	<u>REASON FOR ADDITION</u>
6390290	THC - Hollywood - Hollywood, FL	Reopened
6520003	Methodist Hospital Germantown - Germantown, TN	Newly added
6540035	Batesville Hospital - Batesville, MS	Reopened
6549140	West Scott Baptist Hospital - Morton, MS	Reopened
6549174	Smith County General Hospital - Raleigh, MS	Reopened
6720023	Forrest Hills Psychiatric Hospital - Pineville, LA	Newly added
6720024	Spectrum Hospital of Breaux Bridge - Breaux Bridge, LA	Newly added
6720025	Central Louisiana Rehabilitation Hospital - Alexandria, LA	Newly added
6720150	G. W. Long Hansen's Disease Center	Now operating as a hospital
6740098	Compass Hospital of Dallas - De Sota, TX	Newly added
6674099	IHS Hospital at Houston - Houston, TX	Newly added
6740102	Tops Surgical Specialty Hospital- Houston, TX	Newly added
6740106	Compass Hospital of San Antonia - San Antonia, TX	Newly added
6740110	Quest Hospital - Amarillo, TX	Newly added
6740114	Mental Health Connections - Dallas, TX	Newly added
6740116	Houston Hospital for Specialty Surgery - Houston, TX	Newly added
6742925	Riceland Psychiatric Hospital - Rosenberg, TX	Reopened
6810150	Dahl Memorial MAF - Ekalaka, MT	Reopened
6840465	Vencor Hospital-Denver - Denver, CO	Reopened
6950002	St. Francis Medical Center-West - Ewa Beach, HI	Newly added

(See merger list for additional documentation on merged hospitals.)

MERGERS

1995 ANNUAL SURVEY OF HOSPITALS

MERGER RESULT

MERGED HOSPITALS

6130001
Fletcher Allen Health Care
Burlington, VT

6130092
Medical Center Hospital of Vermont
Burlington, VT

6130300
Fanny Allen Hospital
Colchester, VT

6160004
Saint Francis Hospital and Medical Center
Hartford, CT

6160240
Mount Sinai Hospital
Hartford, CT

6160250
Saint Francis Hospital and
Medical Center
Hartford, CT

6160007
VA Connecticut Healthcare System
Hartford, CT

6160460
Veterans Affairs Medical Center
Newington, CT

6160765
Veterans Affairs Medical Center
West Haven, CT

6160331
Riverview Hospital for Children
Middletown, CT

6160515
Housatonic Adolescent Hospital
Newtown, CT

6160295
Henry D. Altobello Child Center
Meriden, CT

6220515
Zurbrugg Memorial Hospital
Riverside, NJ

6220547
Graduate Health System-Rancocas
Willingboro, NJ

6221240
Zurbrugg Memorial Hospital
Riverside, NJ

MERGERS

1995 ANNUAL SURVEY OF HOSPITALS

MERGER RESULT

MERGED HOSPITALS

6220253
Institute for Rehabilitation
West Orange, NJ

6220218
Welkind Facility
Chester, NJ

6220255
Kessler Institute for Rehabilitation
East Orange, NJ

6221615
Kessler Institute for Rehabilitation
West Orange, NJ

6230039
Pinnacle Health Hospitals
Pittsburgh, PA

6230920
Polyclinic Medical Clinic
Harrisburg, PA

6230910
Harrisburg Hospital
Harrisburg, PA

6231370
Seidle Memorial Hospital
Mechanicsburg, PA

6230041
Allegheny General Hospital
Pittsburgh, PA

6232410
Allegheny General Hospital
Pittsburgh, PA

6239250
Allegheny Neuropsych Hospital
Oakdale, PA

6230400
Crozer-Chester Medical Center
Springfield, PA

6239385
Springfield Hospital
Springfield, PA

6230410
Community Hospital
Scranton, PA

6230390
Chester Hospital
West Chester, PA

MERGERS
1995 ANNUAL SURVEY OF HOSPITALS

MERGER RESULT

MERGED HOSPITALS

6340008
Chesapeake Rehabilitation Hospital
Salisbury, MD

6341020
Lewis-Gale Medical Center
Salem, MD

6341025
Lewis-Gale Psychiatric Center
Salem, MD

6340009
Choppenham and Johnston-Willis
Richmond, VA

6340835
Chippenham Medical Center
Richmond, VA

6340850
Johnston-Willis Hospital
Richmond, VA

6370011
Carolinas Hospital System
Florence, SC

6370247
Bruce Hospital System
Florence, SC

6370265
Florence General Hospital
Florence, SC

6380006
St. Francis Hospital
Columbus, GA

6380445
St. Francis Hospital
Columbus, GA

6380428
Bradley Center of St. Francis
Columbus, GA

6390074
Columbia JFK Medical Center
Atlantis, FL

6390465
Palm Beach Regional Hospital
Lake Worth, FL

6390481
Columbia JFK Medical Center
Atlantis, FL

MERGERS

1995 ANNUAL SURVEY OF HOSPITALS

MERGER RESULT

MERGED HOSPITALS

6390690
Florida Hospital
Orlando, FL

6390435
Florida Hospital-Kissimmee
Kissimmee, FL

6399180
Florida Hospital East Orlando
Orlando, FL

6398196
Florida Hospital-Apopka
Apopka, FL

6410016
Medical Center Health System
Mansfield, OH

6144610
Mansfield Hospital
Mansfield, OH

6412010
Shelby Hospital
Shelby, OH

6410017
Blanchard Valley Regional Center
Findlay, OH

6410210
Blanchard Valley Regional Health Center
Findlay, OH

6411320
Blanchard Valley Regional Health Center
Findlay, OH

6411035
Mount Carmel Health System
Columbus, OH

6411060
St. Ann's Hospital of Columbus
Columbus, OH

6411040
Mount Carmel Medical Center
Columbus, OH

6418083
Mount Carmel East Hospital
Columbus, OH

MERGERS
1995 ANNUAL SURVEY OF HOSPITALS

MERGER RESULT

MERGED HOSPITALS

6440015
Iron County Community Hospital
Iron River, MI

6440370
Crystal Falls Community Hospital
Crystal Fall, MI

6442370
Iron County Community Hospital
Iron River, MI

6450015
Mercy Health System
Janesville, WI

6450540
Mercy Health System
Janesville, WI

6458096
Parkside Lodge of Wisconsin
Janesville, WI

6510003
Owensboro Mercy Health System
Owensboro, KY

6510785
Mercy Hospital
Owensboro, KY

6510790
Owensboro-Daviess County Hospital
Owensboro, KY

6520785
Methodist Hospitals of Memphis
Memphis, TN

6520775
LeBonheur Children's Medical Center
Memphis, TN

6520796
Methodist North-J Harris Hospital
Memphis, TN

6520800
Methodist Hospitals of Memphis-Central
Memphis, TN

6520825
Methodist Hospitals of Memphis-South UT
Memphis, TN

MERGERS

1995 ANNUAL SURVEY OF HOSPITALS

MERGER RESULT

MERGED HOSPITALS

6630008
Freeman Hospitals and Health System
Joplin, MO

6630320
Freeman Hospital
Joplin, MO

Oak Hill Hospital
Joplin, MO

6630930
Barnes-Jewish Hospital
St. Louis, MO

6631060
Jewish Hospital
St. Louis, MO

6630920
Barnard Free Skin and Cancer Hospital
St. Louis, MO

6640001
United Health Services
Grand Forks, ND

6640245
Medical Center Rehabilitation. Hospitals
Grand Forks, ND

6640237
United Hospital
Grand Forks, ND

6640263
United Recovery Center
Grand Forks, ND

6640002
Dakota Heartland Health System
Fargo, ND

6640157
Dakota Heartland Health System
Fargo, ND

6640170
Dakota Heartland Health System
Fargo, ND

6670016
Salina Regional Health Center
Salina, KS

6670880
Salina Regional Health Center
Salina, KS

6670900
Salina Regional Health Center
(Formerly St. John's Regional Health Center)
Salina, KS

MERGERS
1995 ANNUAL SURVEY OF HOSPITALS

MERGER RESULT

MERGED HOSPITALS

6670019
C. F. Menninger Memorial Hospital
Topeka, KS

6671000
C. F. Menninger Memorial Hospital
Topeka, KS

6679070
Child and Adolescent Services
Topeka, KS

6740119
St. Michael Health Care Center
Texarkana, TX

6740085
St. Michael Rehabilitation Hospital
Texarkana, TX

6740094
St. Michael Health Care Center
Texarkana, TX

6740117
Columbia Conroe Regional Medical Center
Conroe, TX

6740720
Medical Center Hospital
TX

6740730
Doctors Hospital
TX

6740118
Columbia Mainland Medical Center
Texas City, TX

6742185
Mainland Medical Center
Texas City, TX

6743530
Danforth Hospital
Texas City, TX

6740128
South Texas Veterans Health Care
San Antonio, TX

6742142
Veterans Affairs Medical Center
Kerrville, TX

6742995
South Texas Veterans Health Care
(formerly Audie L. Murphy Memorial Hospital)
San Antonio, TX

MERGERS
1995 ANNUAL SURVEY OF HOSPITALS

MERGER RESULT

MERGED HOSPITALS

6840012
Lutheran Medical Center
Wheat Ridge, CO

6840001
West Pines at Lutheran Medical Center
Wheat Ridge, CO

6840960
Lutheran Medical Center
Wheat Ridge, CO

6850012
Plains Regional Medical Center
Clovis, NM

6850150
Plains Regional Medical Center-Clovis
Clovis, NM

6850347
Plains Regional Medical Center-Portales
Portales, NM

6850343
Miners' Colfax Medical Center
Raton, NM

6850350
Miners' Hospital of New Mexico
Raton, NM

6850345
Northern Colfax County Hospital
Raton, NM

6850455
Colfax General Hospital
Springer, NM

6860014
Westbridge Treatment Center
Phoenix, AZ

6860195
Westbridge Treatment Center-North Campus
Phoenix, AZ

6860295
Westbridge Treatment Center
Phoenix, AZ

6860016
Desert Samaritan Medical Center
Mesa, CA

6860170
Desert Samaritan Medical Center
Mesa, CA

6860270
Samaritan Behavioral Health Center
Mesa, AZ

MERGERS
1995 ANNUAL SURVEY OF HOSPITALS

MERGER RESULT

MERGED HOSPITALS

6910006
Swedish Medical Center
Seattle, WA

6910550
Swedish Medical Center-Ballard
Seattle, WA

Swedish Medical Center-Seattle
Seattle, WA

6910007
VA Puget Sound Health Care System
Seattle, WA

6910020
VA Puget Sound Health Care System
Tacoma, WA

6910775
Veterans Affairs Medical Center
Seattle, WA

6930064
VA Palo Alto Health Care System
Palo Alto, CA

6931260
Veterans Affairs Medical Center
Livermore, CA

6932340
Veterans Affairs Health Care
Palo Alto, CA

SECTION 5

**AHA ANNUAL
SURVEY OF
HOSPITALS
1995 Questionnaire**



Please return to:
 American Hospital Association
 One North Franklin
 Chicago, Illinois 60606

Please return by:

A. REPORTING PERIOD (please refer to the instructions and definitions on the reverse side of this page)

Report data for a full 12-month period, preferably your last completed fiscal year (365 days). (Be consistent in using the same reporting period for responses throughout various sections of this survey.)

1. Reporting Period used (beginning and ending date) / / to / /
 Month Day Year Month Day Year

2. a. Were you in operation 12 full months at the end of your reporting period YES NO b. Number of days open during reporting period

3. Indicate the beginning of your current fiscal year / /
 Month Day Year

B. ORGANIZATIONAL STRUCTURE

1. CONTROL

Indicate the type of organization that is responsible for establishing policy for overall operation of your hospital. CHECK ONLY ONE:

Government, nonfederal

- 12 State
- 13 County
- 14 City
- 15 City-County
- 16 Hospital district or authority

Nongovernment, not-for-profit (NFP)

- 21 Church-operated
- 23 Other not-for-profit (including NFP Corporation)

Investor-owned, for-profit

- 31 Individual
- 32 Partnership
- 33 Corporation

Government, federal

- 41 Air Force
- 42 Army
- 43 Navy
- 44 Public Health Service
- 45 Veterans' Affairs
- 46 Federal other than 41-45 or 47-48
- 47 PHS Indian Service
- 48 Department of Justice

2. SERVICE

Indicate the ONE category that BEST describes your hospital or the type of service it provides to the MAJORITY of admissions:

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> 10 General medical and surgical <input type="checkbox"/> 11 Hospital unit of an institution (prison hospital, college infirmary) <input type="checkbox"/> 12 Hospital unit within an institution for the mentally retarded <input type="checkbox"/> 22 Psychiatric <input type="checkbox"/> 33 Tuberculosis and other respiratory diseases <input type="checkbox"/> 44 Obstetrics and gynecology <input type="checkbox"/> 45 Eye, ear, nose, and throat | <ul style="list-style-type: none"> <input type="checkbox"/> 46 Rehabilitation <input type="checkbox"/> 47 Orthopedic <input type="checkbox"/> 48 Chronic disease <input type="checkbox"/> 62 Institution for mentally retarded <input type="checkbox"/> 82 Alcoholism and other chemical dependency <input type="checkbox"/> 49 Other-specify treatment area: _____ |
|--|---|

3. OTHER

- a. Does your hospital restrict admissions primarily to children? YES NO

- b. Is your hospital primarily osteopathic? YES NO

GENERAL INSTRUCTIONS

A copy of the Annual Survey questionnaire is enclosed. Please check and correct any label information as printed on the front of the survey. Return the original completed copy in the enclosed return envelope to the American Hospital Association and retain the photocopy in your files for reference. Also, please forward a photocopy of the completed questionnaire to your state hospital association.

Requested return date is listed on the cover page, but if additional time is necessary to complete the survey, please complete page 16, listing the expected return date and fax it to the Annual Survey staff at 312/422-4569. If you prefer, you may notify us by calling 312/422-3521.

Report utilization and financial information for a full 12-month period, preferably your fiscal year as the reporting period.

Make an entry for every item on the form. Enter "NA" only if data are not available. Enter "0" if zero is appropriate.

If assistance is needed, please contact the American Hospital Association Annual Survey staff at 312/422-3521. You may also contact your state hospital association or other state agency if so directed by survey return instructions.

INSTRUCTIONS AND DEFINITIONS FOR THE 1995 ANNUAL SURVEY

HOSPITAL. For purposes of this survey, a hospital is defined as the organization or corporate entity licensed or registered as a hospital by a state to provide diagnostic and therapeutic patient services for a variety of medical conditions, both surgical and nonsurgical.

SECTION A REPORTING PERIOD Instructions

Record the beginning and ending dates of the reporting period in a six-digit number: for example, January 1, 1995, should be shown as 01/01/95. Number of days should equal the time span between the two dates that the hospital was open. If you are reporting for less than 365 days, utilization and finances should be presented for days reported only.

SECTION B ORGANIZATIONAL STRUCTURE Instructions and Definitions

1. CONTROL

Check the box to the left of the type of organization that is responsible for establishing policy for overall operation of the hospital.

Government, nonfederal.

State. Controlled by an agency of state government.

County. Controlled by an agency of county government.

City. Controlled by an agency of municipal government.

City-County. Controlled jointly by agencies of municipal and county governments.

Hospital district or authority. Controlled by a political subdivision of a state, county, or city created solely for the purpose of establishing and maintaining medical care or health-related care institutions.

Nongovernment, not-for-profit. Hospitals controlled by not-for-profit organizations, including religious organizations (Catholic hospitals, for example), community hospitals, cooperative hospitals, hospitals operated by fraternal societies, and so forth.

Investor-owned, for-profit. Hospitals controlled on a for-profit basis by an individual, partnership, or a profit-making corporation.

Government, federal. Hospitals controlled by an agency or department of the federal government.

2. SERVICE

Indicate the ONE category that best describes the type of service that your hospital provides to the majority of admissions.

General medical and surgical. Provides diagnostic and therapeutic services to patients for a variety of medical conditions, both surgical and nonsurgical.

Hospital unit of an institution. Provides diagnostic and therapeutic services to patients in an institution.

Hospital unit within an institution for the mentally retarded. Provides diagnostic and therapeutic services to patients in an institution for the mentally retarded.

Psychiatric. Provides diagnostic and therapeutic services to patients with mental or emotional disorders.

Tuberculosis and other respiratory diseases. Provides medical care and rehabilitative services to patients for whom the primary diagnosis is tuberculosis or other respiratory diseases.

Obstetrics and gynecology. Provides medical and surgical treatment to pregnant women and to mothers following delivery. Also provides diagnostic and therapeutic services to women with diseases or disorders of the reproductive organs.

Eye, ear, nose, and throat. Provides diagnosis and treatment of diseases and injuries of the eyes, ears, nose, and throat.

Rehabilitation. Provides a comprehensive array of restoration services for the disabled and all support services necessary to help them attain their maximum functional capacity.

Orthopedic. Provides corrective treatment of deformities, diseases, and ailments of the locomotive apparatus, especially affecting the limbs, bones, muscles, and joints.

Chronic disease. Provides medical and skilled nursing services to patients with long-term illnesses who are not in an acute phase, but who require an intensity of services not available in nursing homes.

Institution for the mentally retarded. Provides health-related care on a regular basis to patients with psychiatric or developmental impairment who cannot be treated in a skilled nursing unit.

Alcoholism and other chemical dependency. Provides diagnostic and therapeutic services to patients with alcoholism or other drug dependencies.

AMERICAN HOSPITAL ASSOCIATION 1995 Annual Survey

B. ORGANIZATIONAL STRUCTURE (continued)

3. c. Is the hospital part of a health care system? If yes, please provide the name, city, and state of the system headquarters: YES NO
 Name: _____ City: _____ State: _____
- d. Is the hospital a division or subsidiary of a holding company? YES NO
- e. Does the hospital itself operate subsidiary corporations? YES NO
- f. Is the hospital contract managed? If yes, please provide the name, city, and state of the organization that manages the hospital: YES NO
 Name: _____ City: _____ State: _____
- g. Is the hospital a member of an alliance? If yes, please provide the name(s), city, and state of the alliance headquarters: YES NO
 Name: _____ City: _____ State: _____
 Name: _____ City: _____ State: _____
- h. Is the hospital a participant in a network? If yes, please provide the name, address, city, state, and telephone number of the network. If the hospital participates in more than one network, please provide the name, address, city, state, and telephone number of the network(s) on page 15, under supplemental information. YES NO
 Name: _____ Telephone: _____
 Address: _____
 City: _____ State: _____ Zip: _____

C. FACILITIES AND SERVICES

For each service or facility listed below, please check all the categories that describe how each item is provided as of the last day of the reporting period. Check all categories that apply for an item. Leave all categories blank for a facility or service that is not provided. Column 2 refers to the systems that were identified in section B, question 3c. Column 3 refers to the networks that were identified in section B, question 3h.

(1)
Owned or provided
by my hospital or
a subsidiary

(2)
Provided by my
Health System
(in my local
community)

(3)
Provided by
my network
(in my local
community)

(4)
Provided through a
formal contractual
arrangement or
joint venture with
another provider
that is not in my
system or network
(in my local
community)

***Please report # Beds that were provided within your hospital and were set up and staffed for use at the end of the reporting period.**

		(# Beds: _____)			
1. General medical-surgical care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Pediatric medical-surgical care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Obstetrics [Level of unit (1-3): _____]	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Medical surgical intensive care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Cardiac intensive care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Neonatal intensive care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Neonatal intermediate care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Pediatric intensive care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Burn care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Other special care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Physical rehabilitation	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Alcoholism-drug abuse or dependency care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Psychiatric care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Skilled nursing care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Intermediate nursing care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Other long term care	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Other care (specify: _____)	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

AMERICAN HOSPITAL ASSOCIATION

B. ORGANIZATIONAL STRUCTURE

3. OTHER

- b. **Osteopathic.** Osteopathic medicine is a medical practice based on a theory that diseases are due chiefly to a loss of structural integrity which can be restored by manipulation of the neuro-muscular and skeletal system, supplemented by therapeutic measures (as use of medicine or surgery).
- c. **Health care system.** A corporate body that may own and/or manage health provider facilities or health-related subsidiaries as well as non-health-related facilities including freestanding facilities and/or subsidiary corporations.
- d. **Holding company.** Any company, incorporated or unincorporated, that is in a position to control or materially influence the management of one or more other companies by virtue of its ownership of securities and/or its right to appoint directors in the other company or companies.
- e. **Subsidiary.** A company that is wholly controlled by another or one that is more than 50% owned by another organization.
- f. **Contract managed.** General day-to-day management of an entire organization by another organization under a formal contract. Managing organization reports directly to the board of trustees or owners of the managed organization; managed organization retains total legal responsibility and ownership of the facility's assets and liabilities.
- g. **Alliance.** A formal organization, usually owned by shareholder/members, that works on behalf of its individual members in the provision of services and products and in the promotion of activities and ventures. Examples of alliances: Voluntary Hospitals of America, Consolidated Catholic Health Care, and American HealthCare System.
- h. **Network.** A group of hospitals, physicians, other providers, insurers and/or community agencies that work together to coordinate and deliver a broad spectrum of services to their community.

SECTION C FACILITIES AND SERVICES Definitions

- 1. **General medical-surgical care.** Provides acute care to patients in medical and surgical units on the basis of physicians' orders and approved nursing care plans.
- 2. **Pediatric medical-surgical care.** Provides acute care to pediatric patients on the basis of physicians' orders and approved nursing care plans.
- 3. **Obstetrics.** Levels should be designated: (1) unit provides services for uncomplicated maternity and newborn cases; (2) unit provides services for all serious illnesses and abnormalities and is supervised by a full-time maternal/fetal specialist.
- 4. **Medical surgical intensive care.** Provides patient care of a more intensive nature than the usual medical and surgical care, on the basis of physicians' orders and approved nursing care plans. These units are staffed with specially trained nursing personnel and contain monitoring and specialized support equipment for patients who, because of shock, trauma, or other life-threatening conditions, require intensified, comprehensive observation and care. Includes mixed intensive care units.
- 5. **Cardiac intensive care.** Provides patient care of a more specialized nature than the usual medical and surgical care, on the basis of physicians' orders and approved nursing care plans. The unit is staffed with specially trained nursing personnel and contains monitoring and specialized support or treatment equipment for patients who, because of heart seizure, open-heart surgery, or other life-threatening conditions, require intensified, comprehensive observation and care. May include myocardial infarction, pulmonary care, and heart transplant units.
- 6. **Neonatal intensive care.** A unit that must be separate from the newborn nursery providing intensive care to all sick infants including those with the very lowest birth weights (less than 1500 grams). NICU has potential for providing mechanical ventilation, neonatal surgery, and special care for the sickest infants born in the hospital or transferred from another institution. A full-time neonatologist serves as director of the NICU.
- 7. **Neonatal intermediate care.** A unit that must be separate from the normal newborn nursery and that provides intermediate and/or recovery care and some specialized services, including immediate resuscitation, intravenous therapy, and capacity for prolonged oxygen therapy and monitoring.
- 8. **Pediatric intensive care.** Provides care to pediatric patients that is of a more intensive nature than that usually provided to pediatric patients. The unit is staffed with specially trained personnel and contains monitoring and specialized support equipment for treatment of patients who, because of shock, trauma, or other life-threatening conditions, require intensified, comprehensive observation and care.
- 9. **Burn care.** Provides care to severely burned patients. Severely burned patients are those with any of the following: (1) second-degree burns of more than 25% total body surface area for adults or 20% total body surface area for children; (2) third-degree burns of more than 10% total body surface area; (3) any severe burns of the hands, face, eyes, ears, or feet; or (4) all inhalation injuries, electrical burns, complicated burn injuries involving fractures and other major traumas, and all other poor risk factors.
- 10. **Other special care.** Provides care to patients requiring care more intensive than that provided in the acute area, yet not sufficiently intensive to require admission to an intensive care unit. Patients admitted to this area are usually transferred here from an intensive care unit once their condition has improved. These units are sometimes referred to as definitive observation, step-down, or progressive care units.
- 11. **Physical rehabilitation.** Provides care encompassing a comprehensive array of restoration services for the disabled and all support services necessary to help patients attain their maximum functional capacity.
- 12. **Alcoholism-drug abuse or dependency care.** Provides diagnosis and therapeutic services to patients with alcoholism or other drug dependencies. Includes care for inpatient/residential treatment for patients whose course of treatment involves more intensive care than provided in an outpatient setting or where patient requires supervised withdrawal.
- 13. **Psychiatric care.** Provides acute or long-term care to emotionally disturbed patients, including patients admitted for diagnosis and those admitted for treatment of psychiatric problems, on the basis of physicians' orders and approved nursing care plans. Long-term care may include intensive supervision to the chronically mentally ill, mentally disordered, or other mentally incompetent persons.
- 14. **Skilled nursing care.** Provides non-acute medical and skilled nursing care services, therapy, and social services under the supervision of a licensed registered nurse on a 24-hour basis.
- 15. **Intermediate nursing care.** Provides health-related services (skilled nursing care and social services) to residents with a variety of physical conditions or functional disabilities. These residents do not require the care provided by a hospital or skilled nursing facility, but do need supervision and support services.
- 16. **Other long term care.** Provision of long term care other than skilled nursing care or intermediate care. This can include residential care-elderly housing services for those who do not require daily medical or nursing services, but may require some assistance in the activities of daily living, or sheltered care facilities for developmentally disabled.
- 17. **Other care.** (specify) Any type of care other than those listed above.

1995 Annual Survey

C. FACILITIES AND SERVICES (continued)

	(1) Owned or provided by my hospital or a subsidiary	(2) Provided by my Health System (in my local community)	(3) Provided by my network (in my local community)	(4) Provided through a formal contractual arrangement or joint venture with another provider that is not in my system or network (in my local com- munity)
18. Adult day care program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Alcoholism-drug abuse or dependency outpatient services .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Angioplasty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Arthritis treatment center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Assisted living	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Birthing room -LDR room -LDRP room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Breast cancer screening/mammograms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Cardiac catheterization laboratory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Children wellness program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Community outreach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Crisis prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Dental services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Emergency services:				
a. Emergency department [JCAHO level (1-4):_____] ..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Trauma center (certified) [Level of unit (1-3):_____] .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Extracorporeal shock wave lithotripter (ESWL)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Fitness center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Freestanding outpatient care center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Geriatric services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Health fair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Health information center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Health screenings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. HIV-AIDS services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Home health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Hospice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Hospital-based outpatient care center-services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Meals on wheels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Nutrition programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. Occupational health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Oncology services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Open heart surgery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. FACILITIES AND SERVICES (continued)

18. **Adult day care program.** Program providing supervision, medical and psychological care, and social activities for older adults who live at home or in another family setting, but cannot be alone or prefer to be with others during the day. May include intake assessment, health monitoring, occupational therapy, personal care, noon meal, and transportation services.
19. **Alcoholism-drug abuse or dependency outpatient services.** Organized hospital services that provide medical care and/or rehabilitative treatment services to outpatients for whom the primary diagnosis is alcoholism or other chemical dependency.
20. **Angioplasty.** The reconstruction or restructuring of a blood vessel by operative means or by nonsurgical techniques such as balloon dilation or laser.
21. **Arthritis treatment center.** Specifically equipped and staffed center for the diagnosis and treatment of arthritis and other joint disorders.
22. **Assisted living.** A special combination of housing, supportive services, personalized assistance and health care designed to respond to the individual needs of those who need help in activities of daily living and instrumental activities of daily living. Supportive services are available, 24 hours a day, to meet scheduled and unscheduled needs, in a way that promotes maximum independence and dignity for each resident and encourages the involvement of a resident's family, neighbor and friends.
23. **Birth room-LDR room-LDRP room.** A single-room-type of maternity care with a more homelike setting for families than the traditional three-room unit (labor/delivery/recovery) with a separate postpartum area. A birthing room combines labor and delivery in one room. An LDR room accommodates three stages in the birthing process--labor, delivery, and recovery. An LDRP room accommodates all four stages of the birth process--labor, delivery, recovery, and postpartum.
24. **Breast cancer screening/mammograms.** Mammography screening - The use of breast x-ray to detect unsuspected breast cancer in asymptomatic women. Diagnostic mammography - The x-ray imaging of breast tissue in symptomatic women who are considered to have a substantial likelihood of having breast cancer already.
25. **Cardiac catheterization laboratory.** Facilities offering special diagnostic procedures for cardiac patients. Available procedures must include, but need not be limited to, introduction of a catheter into the interior of the heart by way of a vein or artery or by direct needle puncture. Procedures must be performed in a laboratory or a special procedure room.
26. **Case management.** A system of assessment, treatment planning, referral and follow-up that ensures the provision of comprehensive and continuous services and the coordination of payment and reimbursement for care.
27. **Children wellness program.** A program that encourages improved health status and a healthful lifestyle of children through health education, exercise, nutrition and health promotion.
28. **Community outreach.** A program that systematically interacts with the community to identify those in need of services, alerting persons and their families to the availability of services, locating needed services, and enabling persons to enter the service delivery system.
29. **Crisis prevention.** Services provided in order to promote physical and mental well being and the early identification of disease and ill health prior to the onset and recognition of symptoms so as to permit early treatment.
30. **Dental services** An organized dental service or dentists on staff, not necessarily involving special facilities, providing dental or oral services to inpatients or outpatients.
- 31a. **Emergency department.** Hospital facilities for the provision of unscheduled outpatient services to patients whose conditions require immediate care. Emergency department levels as categorized by JCAHO are as follows:
Level 1: offers comprehensive emergency care 24 hours a day, with at least one physician experienced in emergency care on duty in the emergency care area. There is in-hospital physician coverage by members of the medical staff or by senior-level residents for at least medical, surgical, orthopedic, obstetric-gynecologic, pediatric, and anesthesia services. Other specialty consultation is available within approximately 30 minutes; initial consultation through two-way voice communication is acceptable.
Level 2: offers emergency care 24 hours a day, with at least one physician experienced in emergency care on duty in the emergency care area, and with specialty consultation available within approximately 30 minutes by members of the medical staff or by senior-level residents. The hospital's scope of services include in-house capabilities for managing physical and related emotional problems, with provision for patient transfer to another organization when needed.
Level 3: offers emergency care 24 hours a day, with at least one physician available to the emergency care area within approximately 30 minutes through a medical staff call roster. Specialty consultation is available by request of the attending medical staff member or by transfer to a designated hospital where definitive care can be provided.
Level 4: offers reasonable care in determining whether an emergency exists, renders lifesaving first aid, and makes appropriate referral to the nearest organization that is capable of providing needed services. The mechanism for providing physician coverage at all times is defined by the medical staff.
- 31b. **Trauma center (certified).** A facility certified to provide emergency and specialized intensive care to critically ill and injured patients. **Level 1:** A regional resource trauma center, which is capable of providing total care for every aspect of injury and plays a leadership role in trauma research and education. **Level 2:** A community trauma center, which is capable of providing trauma care to all but the most severely injured patients who require highly specialized care. **Level 3:** A rural trauma hospital, which is capable of providing care to a large number of injury victims and can resuscitate and stabilize more severely injured patients so that they can be transported to level 1 or 2 facilities. Please provide explanation on page 15 if necessary.
32. **Extracorporeal shock wave lithotripter (ESWL).** A medical device used for treating stones in the kidney or ureter. The device disintegrates kidney stones noninvasively through the transmission of acoustic shock waves directed at the stones.
33. **Fitness center.** Provides exercise, testing, or evaluation programs and fitness activities to the community and hospital employees.
34. **Freestanding outpatient care center.** A facility owned and operated by the hospital, but physically separate from the hospital, that provides various medical treatments on an outpatient basis only. In addition to treating minor illnesses or injuries, the center will stabilize seriously ill or injured patients before transporting them to a hospital. Laboratory and radiology services are usually available.
35. **Geriatric services.** The branch of medicine dealing with the physiology of aging and the diagnosis and treatment of disease affecting the aged. Services could include: Adult day care; Alzheimer's diagnostic-assessment services; Comprehensive geriatric assessment; Emergency response system; Geriatric acute care unit; and/or Geriatric clinics.
36. **Health fair.** Community health education events that focus on the prevention of disease and promotion of health through such activities as audiovisual exhibits and free diagnostic services.
37. **Health information center.** Education which is directed at increasing the information of individuals and populations. It is intended to increase the ability to make informed personal, family and community health decisions by providing consumers with informed choices about health matters with the objective of improving health status.
38. **Health screening.** A preliminary procedure, such as a test or examination to detect the most characteristic sign or signs of a disorder that may require further investigation.

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C. FACILITIES AND SERVICES (continued)

	(1) Owned or provided by my hospital or a subsidiary	(2) Provided by my Health System (in my local community)	(3) Provided by my network (in my local community)	(4) Provided through a formal contractual arrangement or joint venture with another provider that is not in my system or network (in my local com- munity)
48. Outpatient surgery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Patient education center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Patient representative services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Physical rehabilitation outpatient services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. Primary care department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Psychiatric services:				
a. Psychiatric child-adolescent services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Psychiatric consultation-liaison services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Psychiatric education services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Psychiatric emergency services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Psychiatric geriatric services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Psychiatric outpatient services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Psychiatric partial hospitalization program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. Radiation therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. Radiology, diagnostic:				
a. CT scanner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Diagnostic radioisotope facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Magnetic resonance imaging (MRI)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Positron emission tomography (PET)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Single photon emission computerized tomography (SPECT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Ultrasound	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56. Reproductive health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. Retirement housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Social work services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Sports medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Support groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61. Teen outreach services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Transplant services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Transportation to health facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. Urgent care center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
65. Volunteer services department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
66. Women's health center/services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. FACILITIES AND SERVICES (continued)

39. **HIV-AIDS services.** (could include) HIV-AIDS unit-Special unit or team designated and equipped specifically for diagnosis, treatment, continuing care planning, and counseling services for HIV-AIDS patients and their families. General inpatient care for HIV-AIDS-Inpatient diagnosis and treatment for human immunodeficiency virus and acquired immunodeficiency syndrome patients, but dedicated unit is not available. Specialized outpatient program for HIV-AIDS-Special outpatient program providing diagnostic, treatment, continuing care planning, and counseling for HIV-AIDS patients and their families.
40. **Home health services.** Service providing nursing, therapy, and health-related homemaker or social services in the patient's home.
41. **Hospice.** A program providing palliative care, chiefly medical relief of pain and supportive services, addressing the emotional, social, financial, and legal needs of terminally ill patients and their families. Care can be provided in a variety of settings, both inpatient and at home.
42. **Hospital-based outpatient care center-services.** Organized hospital health care services offered by appointment on an ambulatory basis. Services may include outpatient surgery, examination, diagnosis, and treatment of a variety of medical conditions on a nonemergency basis, and laboratory and other diagnostic testing as ordered by staff or outside physician referral.
43. **Meals on wheels.** A hospital sponsored program which delivers meals to people, usually the elderly, who are unable to prepare their own meals. Low cost nutritional meals are delivered to individuals' homes on a regular basis.
44. **Nutrition programs.** Those services within a health care facility which are designed to provide inexpensive, nutritionally sound meals to patients.
45. **Occupational health services.** Includes services designed to protect the safety of employees from hazards in the work environment.
46. **Oncology services.** An organized program for the treatment of cancer by the use of drugs or chemicals.
47. **Open heart surgery.** Heart surgery where the chest has been opened and the blood recirculated and oxygenated with the proper equipment and the necessary staff to perform the surgery.
48. **Outpatient surgery.** Scheduled surgical services provided to patients who do not remain in the hospital overnight. The surgery may be performed in operating suites also used for inpatient surgery, specially designated surgical suites for outpatient surgery, or procedure rooms within an outpatient care facility.
49. **Patient education center.** Written goals and objectives for the patient and/or family related to therapeutic regimens, medical procedures, and self care.
50. **Patient representative services.** Organized hospital services providing personnel through whom patients and staff can seek solutions to institutional problems affecting the delivery of high-quality care and services.
51. **Physical rehabilitation outpatient services.** Outpatient program providing medical, health-related, therapy, social, and/or vocational services to help disabled persons attain or retain their maximum functional capacity.
52. **Primary care department.** A unit or clinic within the hospital that provides primary care services (e.g. general pediatric care, general internal medicine, family practice, gynecology) through hospital-salaried medical and/or nursing staff, focusing on evaluating and diagnosing medical problems and providing medical treatment on an outpatient basis.
53. **Psychiatric services:**
 - a. **Psychiatric child-adolescent services.** Provides care to emotionally disturbed children and adolescents, including those admitted for diagnosis and those admitted for treatment.
 - b. **Psychiatric consultation-liaison services.** Provides organized psychiatric consultation/liaison services to nonpsychiatric hospital staff and/or departments on psychological aspects of medical care that may be generic or specific to individual patients.
 - c. **Psychiatric education services.** Provides psychiatric educational services to community agencies and workers such as schools, police, courts, public health nurses, welfare agencies, clergy, and so forth. The purpose is to expand the mental health knowledge and competence of personnel not working in the mental health field and to promote good mental health through improved understanding, attitudes, and behavioral patterns.
 - d. **Psychiatric emergency services.** Services or facilities available on a 24-hour basis to provide immediate unscheduled outpatient care, diagnosis, evaluation, crisis intervention, and assistance to persons suffering acute emotional or mental distress.
 - e. **Psychiatric geriatric services.** Provides care to emotionally disturbed elderly patients, including those admitted for diagnosis and those admitted for treatment.
 - f. **Psychiatric outpatient services.** Provides medical care, including diagnosis and treatment, of psychiatric outpatients.
 - g. **Psychiatric partial hospitalization program.** Organized hospital services of intensive day/evening outpatient services of three hours or more duration, distinguished from other outpatient visits of one hour.
54. **Radiation therapy.** The branch of medicine concerned with radioactive substances and using various techniques of visualization, with the diagnosis and treatment of disease using any of the various sources of radiant energy. Services could include: megavoltage radiation therapy; radioactive implants; stereotactic radiosurgery; therapeutic radioisotope facility; X-ray radiation therapy.
55. **Radiology, diagnostic:**
 - a. **CT scanner.** Computed tomographic scanner for head or whole body scans.
 - b. **Diagnostic radioisotope facility.** The use of radioactive isotopes (Radiopharmaceuticals) as tracers or indicators to detect an abnormal condition or disease.
 - c. **Magnetic resonance imaging (MRI).** The use of a uniform magnetic field and radio frequencies to study tissue and structure of the body. This procedure enables the visualization of biochemical activity of the cell in vivo without the use of ionizing radiation, radioisotopic substances, or high-frequency sound.
 - d. **PET.** Positron emission tomography scanner is a nuclear medicine imaging technology which uses radioactive (positron emitting) isotopes created in a cyclotron or generator and computers to produce composite pictures of the brain and heart at work. PET scanning produces sectional images depicting metabolic activity or blood flow rather than anatomy.
 - e. **SPECT.** Single photon emission computerized tomography is a nuclear medicine imaging technology that combines existing technology of gamma camera imaging with computed tomographic imaging technology to provide a more precise and clear image.
 - f. **Ultrasound.** The use of acoustic waves above the range of 20,000 cycles per second to visualize internal body structures.
56. **Reproductive health** (could include). Fertility counseling - A service that counsels and educates on infertility problems and includes laboratory and surgical workup and management for individuals having problems conceiving children. In vitro fertilization - Program providing for the induction of fertilization of a surgically removed ovum by donated sperm in a culture medium followed by a short incubation period. The embryo is then reimplanted in the womb.
57. **Retirement housing.** A facility which provides social activities to senior citizens, usually retired persons, who do not require health care but some short-term skilled nursing care may be provided. A retirement center may furnish housing and may also have acute hospital and long-term care facilities, or it may arrange for acute and long term care through affiliated institutions.
58. **Social work services.** (could include). Organized social work services - Services that are properly directed and sufficiently staffed by qualified individuals who provide assistance and counseling to patients and their families in dealing with social, emotional, and environmental problems associated with illness or disability, often in the context of financial or discharge planning coordination. Outpatient social work services - Social work services provided in ambulatory care areas. Emergency department social work services - Social work services provided to emergency department patients by social workers dedicated to the emergency department or on call.

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C. FACILITIES AND SERVICES (continued)

67. Which of the following physician arrangements does your hospital or system/network participate in? Column 2 refers to the systems that were identified in section B, question 3c. Column 3 refers to the networks that were identified in section b, question 3h.

	(1) My Hospital	(2) My Health System	(3) My Health Network
a. Independent Practice Association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Group practice without walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Open Physician-Hospital Organization (PHO)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Closed Physician-Hospital Organization (PHO)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Management Service Organization (MSO)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Integrated Salary Model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Equity Model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

68. Have any of the following insurance products been developed by your hospital, health system, health network or as a joint venture with an insurer? (Check all that apply) Column 2 refers to the systems that were identified in section B, question 3c. Column 3 refers to the networks that were identified in section B, question 3h.

	(1) My Hospital	(2) My Health System	(3) My Health Network	(4) Joint Venture With Insurer
a. Health Maintenance Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Preferred Provider Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Indemnity Fee For Service Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

69. Does your hospital have a formal written contract that specifies the obligations of each party with:

- a. Health maintenance organization (HMO) ... YES NO b. IF YES, how many contracts? ... _____
- c. Preferred provider organization (PPO) YES NO d. IF YES, how many contracts? ... _____

70. What percentage of the hospital's net patient revenue is paid on a capitated basis? If the hospital does not participate in capitated arrangements, please enter "0") _____ %

71. Does your hospital contract directly with employers or a coalition of employers to provide care on a capitated, predetermined, or shared risk basis? YES NO

72. If your hospital has arrangements to care for a specific group of enrollees in exchange for a capitated payment, how many lives are covered? _____

D. COMMUNITY ORIENTATION

1. Does your hospital's mission statement include a focus on community benefit? YES NO
2. Does your hospital have a long-term plan for improving the health of its community? YES NO
3. Does your hospital have resources for its community benefit activities? YES NO
4. Does your hospital work with other providers, public agencies, or community representatives to conduct a health status assessment of the community? YES NO
5. Does your hospital use health status indicators (such as rates of health problems or surveys of self-reported health) for defined populations to design new services or modify existing services? YES NO
- 6a. Does your hospital work with other local providers, public agencies, or community representatives to develop a written assessment of the appropriate capacity for health services in the community? YES NO
- 6b. If yes, have you used the assessment to identify unmet health needs, excess capacity, or duplicative services in the community? YES NO
7. Does your hospital work with other providers to collect, track, and communicate clinical and health information across cooperating organizations? YES NO
8. Does your hospital either by itself or in conjunction with others disseminate reports to the community on the quality and costs of health care services? YES NO

C. FACILITIES AND SERVICES (continued)

59. **Sports medicine.** Provision of diagnostic screening and assessment and clinical and rehabilitation services for the prevention and treatment of sports-related injuries.
60. **Support groups.** A hospital sponsored program which allows a group of individuals with the same or similar problems who meet periodically to share experiences, problems, and solutions in order to support each other.
61. **Teen outreach services.** A program focusing on the teenager which encourages an improved health status and a healthful lifestyle including physical, emotional, mental, social, spiritual and economic health through education, exercise, nutrition and health promotion.
62. **Transplant services.** The branch of medicine that transfers an organ or tissue from one person to another or from one body part to another to replace a diseased structure or to restore function or to change appearance. Services could include: Bone marrow transplant program; kidney transplant; organ transplant (other than kidney); tissue transplant.
63. **Transportation to health facilities.** A long-term care support service designed to assist the mobility of the elderly. Some programs offer improved financial access by offering reduced rates and barrier-free buses or vans with ramps and lifts to assist the elderly or handicapped; others offer subsidies for public transport systems or operate mini-bus services exclusively for use by senior citizens.
64. **Urgent care center.** A facility that provides care and treatment for problems that are not life-threatening but require attention over the short term. These units function like emergency rooms but are separate from hospitals with which they may have backup affiliation arrangements.
65. **Volunteer services department.** An organized hospital department responsible for coordinating the services of volunteers working within the institution
66. **Women's health center/services.** An area set aside for coordinated education and treatment services specifically for and promoted to women as provided by this special unit. Services may or may not include obstetrics but include a range of services other than OB.
- 67a. **Independent practice association (IPA).** An IPA is a legal entity that holds managed care contracts. The IPA then contracts with physicians, usually in solo practice, to provide care either on a fee-for-services or capitated basis. The purpose of an IPA is to assist solo physicians in obtaining managed care contracts.
- 67b. **Group practice without walls.** Hospital sponsors the formation of, or provides capital to physicians to establish, a "quasi" group to share administrative expenses while remaining independent practitioners.
- 67c. **Open physician-hospital organization (PHO).** A joint venture between the hospital and all members of the medical staff who wish to participate. The PHO can act as a unified agent in managed care contracting, own a managed care plan, own and operate ambulatory care centers or ancillary services projects, or provide administrative services to physician members.
- 67d. **Closed physician-hospital organization (PHO).** A PHO that restricts physician membership to those practitioners who meet criteria for cost effectiveness and/or high quality.
- 67e. **Management services organization (MSO).** A corporation, owned by the hospital or a physician/hospital joint venture, that provides management services to one or more medical group practices. The MSO purchases the tangible assets of the practices and leases them back as part of a full-service management agreement, under which the MSO employs all non-physician staff and provides all supplies/administrative systems for a fee.
- 67f. **Integrated salary model.** Physicians are salaried by the hospital or another entity of a health system to provide medical services for primary care and specialty care.
- 67g. **Equity model.** Allows established practitioners to become shareholders in a professional corporation in exchange for tangible and intangible assets of their existing practices.
- 67h. **Foundation.** A corporation, organized either as a hospital affiliate or subsidiary, which purchases both the tangible and intangible assets of one or more medical group practices. Physicians remain in a separate corporate entity but sign a professional services agreement with the foundation.
70. **Capitation.** An at-risk payment arrangement in which an organization receives a fixed prearranged payment and in turn guarantees to deliver or arrange all medically necessary care required by enrollers in the capitated plan. The fixed amount is specified within contractual agreements between the payor and the involved organization. The fixed payment amount is based on an actuarial assessment of the services required by enrollees and the costs of providing these services, recognizing enrollees adjustment factors such as age, sex, and family size.

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E. TOTAL FACILITY BEDS, UTILIZATION, FINANCES, AND STAFFING

Please report utilization and financial data for a 12 month period that is consistent with the period reported on page 1. Report financial data for reporting period only. If final figures are not available, please estimate. Round to the nearest dollar. Use September 30, 1995 to report personnel regardless of your reporting period as listed on page 1. Report full-time and part-time personnel who were on the payroll and whose payroll expenses are reported in E3f. (Please refer to specific definitions on page 12.)

	(1) Total Facility	(2) Nursing Home Unit/Facility
Fill out column (2) if hospital owns and operates a nursing home type unit/facility. Column (1) should be the combined total of hospital plus Nursing Home Unit/Facility.		
1. BEDS AND UTILIZATION		
a. Beds <u>set up and staffed</u> for use at the end of the reporting period (Do not report licensed beds)	_____	_____
b. Bassinets set up and staffed for use at the end of the reporting period	_____	_____
c. Births (exclude fetal deaths)	_____	_____
d. Admissions (exclude newborns, <u>include</u> neonatal & swing admissions)	_____	_____
e. Inpatient days (exclude newborns, <u>include</u> neonatal & swing days)	_____	_____
f. Emergency room visits	_____	_____
g. <u>Total</u> outpatient visits (include emergency room visits & outpatient surgeries)	_____	_____
h. Inpatient surgical operations	_____	_____
i. Outpatient surgical operations	_____	_____
2. MEDICARE/MEDICAID UTILIZATION (exclude newborns, <u>include</u> neonatal & swing days & deaths)		
a. Total Medicare (Title XVIII) inpatient discharges	_____	_____
b. Total Medicare (Title XVIII) inpatient days	_____	_____
c. Total Medicaid (Title XIX) inpatient discharges	_____	_____
d. Total Medicaid(Title XIX) inpatient days	_____	_____
3. FINANCIAL		
* a. Net patient revenue .....	.00	.00
* b. Tax appropriations .....	.00	
* c. Other operating revenue .....	.00	
* d. Nonoperating revenue .....	.00	
* e. Total revenue (add 3a thru 3d) .....	.00	.00
f. Payroll expenses (only) .....	.00	.00
g. Employee benefits .....	.00	.00
h. Total expenses (Payroll plus all nonpayroll expenses, including bad debt) .....	.00	.00
* 4. REVENUE BY TYPE		
a. Total gross inpatient revenue .....	.00	
b. Total gross outpatient revenue .....	.00	
c. Total gross patient revenue .....	.00	
* 5. UNCOMPENSATED CARE		
a. Bad debt expense .....	.00	
b. Charity (Revenue forgone at full established rates. Include in gross revenue) .....	.00	

*These data will be treated as confidential and not released without written permission. AHA will, however, share these data with your respective state hospital association and, if requested, with your appropriate metropolitan/regional association. The state/metropolitan/regional association may not release these data without written permission from the hospital.

SECTION E

TOTAL FACILITY BEDS, UTILIZATION, FINANCES, AND STAFFING

Instructions and Definitions

1. For the purposes of this survey, nursing home type unit/facility provides care for the elderly and chronic care in a non-acute setting in any of the following categories: "Skilled nursing care "Intermediate care "Residential care/elderly housing ("see page 4 definitions) **The nursing home type units/facilities are to be owned and operated by the hospital. Only one legal entity may be vested with title to the physical property or operate under the authority of a duly executed lease of the physical property.**
- 1a. Report the number of **beds** regularly available (those set up and staffed for use) at the end of the reporting period. Report only operating beds, not constructed bed capacity. Include all bed facilities that are set up and staffed for use by inpatients who have no other bed facilities, such as pediatric bassinets, isolation units, quiet rooms, and reception and observation units assigned to or reserved for them. Exclude newborn bassinets and bed facilities for patients receiving special procedures for a portion of their stay and who have other bed facilities assigned to or reserved for them. Exclude, for example, labor room, postanesthesia, or postoperative recovery room beds, psychiatric holding beds, and beds that are used only as holding facilities for patients prior to their transfer to another hospital.
- b. Report the number of normal newborn **bassinets**. Do not include neonatal intensive care or intermediate care bassinets. These should be reported on page 3, C6. and C7.
- c. **Total births** should exclude fetal deaths.
- d. Include the number of adult and pediatric **admissions** only (exclude births). This figure should include all patients admitted during the reporting period, including neonatal and swing admissions.
- e. Report the number of adult and pediatric days of care rendered during the entire reporting period. Do not include days of care rendered for normal infants born in the hospital, but do include those for their mothers. Include days of care for infants born in the hospital and transferred into a neonatal care unit. Also include swing bed inpatient days. **Inpatient day** of care (also commonly referred to as a **patient day** or a **census day**, or by some federal hospitals as an **occupied bed day**) is a period of service between the census-taking hours on two successive calendar days, the day of discharge being counted only when the patient was admitted the same day.
- f. **Emergency room visits** should reflect the number of visits to the emergency unit. Emergency outpatients can be admitted to the inpatient areas of the hospital, but they are still counted as emergency visits and subsequently as inpatient admissions.
- g. An **outpatient visit** is a visit by a patient who is not lodged in the hospital while receiving medical, dental, or other services. Each appearance of an outpatient in each unit constitutes one visit regardless of the number of diagnostic and/or therapeutic treatments that the patient receives. Total outpatient visits should include all clinic visits, referred visits, observation services, outpatient surgeries, and emergency room visits.

Clinic visits should reflect total number of visits to each specialized medical unit that is responsible for the diagnosis and treatment of patients on an outpatient, nonemergency basis (i.e., alcoholism, dental, gynecology, etc.). Visits to the satellite clinics and primary group practices should be included if revenue is received by the hospital.

Referred visits should reflect total number of outpatient ancillary visits to each specialty unit of the hospital established for providing technical aid used in the diagnosis and treatment of patients. Examples of such units are diagnostic radiology, EKG, pharmacy, etc.

Observation services are those services furnished on a hospital's premises, including use of a bed and periodic monitoring by a hospital's nursing or other staff, which are reasonable and necessary to evaluate an outpatient's condition or determine the need for a possible admission to the hospital as an inpatient. Observation services usually do not exceed 24 hours. However, there is no hourly limit on the extent to which they may be used.
- h-i. Also include the number of outpatient surgeries reported on line E1i. and the emergency room visits reported on line E1f.
- h-i. Count each patient undergoing surgery as one surgical operation regardless of the number of surgical procedures that were performed while the patient was in the operating or procedure room.
- i. For outpatient surgical operations, please record operations performed on patients who do not remain in the hospital overnight. Include all operations whether performed in the inpatient operating rooms or in procedure rooms located in an outpatient facility. Include an endoscopy only when used as an operative tool and not when used for diagnosis alone.
- 3a. **Net patient revenue.** Reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.
- c. **Other operating revenue.** Revenue from services other than health care provided to patients, as well as sales and services to nonpatients. Revenue that arises from the normal day-to-day operations from services other than health care provided to patients. Includes sales and services to nonpatients, and revenue from miscellaneous sources (rental of hospital space, sale of cafeteria meals, gift shop sales). Also include operating gains in this category.
- d. **Nonoperating revenue.** Includes investment income, extraordinary gains and other nonoperating gains.
- f. **Payroll expenses.** Include payroll for all personnel including medical and dental residents/interns and trainees.
- g. **Employee benefits.** Includes social security, group insurance, retirement benefits, workman's compensation, unemployment insurance, etc.
- h. **Total expenses.** Includes all payroll and nonpayroll expenses (including bad debt) as well as any nonoperating losses (including extraordinary losses).
- 5a. **Bad debt expense.** The provision for actual or expected uncollectibles resulting from the extension of credit. Because bad debts are reported as an expense and not a deduction from revenue, the gross charges that result in bad debts will remain in net revenue (E3a.).
- b. **Charity care.** Health services that were never expected to result in cash inflows. Charity care results from a provider's policy to provide health care services free of charge to individuals who meet certain financial criteria. **For purposes of this survey, charity care is measured on the basis of revenue forgone, at full established rates.**

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E. TOTAL FACILITY BEDS, UTILIZATION, FINANCES, AND STAFFING (continued)

6. REVENUE BY PAYOR (report total facility gross and net figures)

	(1) Gross	(2) Net
a. GOVERNMENT		
(1) Medicare .....	.00	.00
(2) Medicaid (include disproportionate share hospital payments) .....	.00	.00
(3) Other (Specify: _____) .....	.00	.00
b. NONGOVERNMENT		
(1) Self-pay .....	.00	.00
(2) Third-party payors (Blue Cross, HMO's & other commercial insurers) .....	.00	.00
(3) Other (Specify: _____) .....	.00	.00
c. TOTAL .....	.00	.00

(Total gross should equal 4c on page 13, total net should equal 3a on page 13.)

Are the financial data on pages 11 and 13 a from your audited financial statement? YES NO

7. STAFFING

Report full-time (35 hours or more) and part-time (less than 35 hours) personnel who were on the hospital/facility payroll as of September 30, 1995, even if your reporting period ended on a different date. Include members of religious orders for whom dollar equivalents were reported. Exclude private-duty nurses, volunteers, and all personnel whose salary is financed entirely by outside research grants. Exclude physicians and dentists who are paid on a fee basis.

	(1) Full-Time (35 hr/wk or more) On Payroll	(2) Part-Time (less than 35 hr/wk) On Payroll
a. Physicians and dentists	_____	_____
b. Medical and dental residents/interns	_____	_____
c. Other trainees	_____	_____
d. Registered nurses	_____	_____
e. Licensed practical (vocational) nurses	_____	_____
f. All other personnel	_____	_____
g. Total facility personnel (add 7a through 7f) (Should include hospital plus nursing home type unit/facility personnel)	_____	_____
h. Nursing home type unit/facility personnel (if applicable - please break out these personnel from the total facility number.)	_____	_____

*These data will be treated as confidential and not released without written permission. AHA will, however, share these data with your respective state hospital association and, if requested, with your appropriate metropolitan/regional association. The state/metropolitan/regional association may not release these data without written permission from the hospital.

E. TOTAL FACILITY BEDS, UTILIZATION, FINANCES, AND STAFFING (continued)

SECTION E
Instructions and Definitions

- 7a. **Physicians and dentists.** Include only those physicians and dentists engaged in clinical practice and on the payroll. Those who hold administrative positions should be reported in "All other personnel."
- c. **Other trainees.** A trainee is a person who has not completed the necessary requirements for certification or met the qualifications required for full salary under a related occupational category. Exclude medical and dental residents/interns who should be reported on line 7b.
- d. **Registered nurses.** Nurses who have graduated from approved schools of nursing and who are currently registered by the state. They are responsible for the nature and quality of all nursing care that patients receive. Do not include any registered nurses more appropriately reported in other occupational categories, such as facility administrators, and therefore listed under "All other personnel."
- e. **Licensed practical (vocational) nurses.** Nurses who have graduated from an approved school of practical (vocational) nursing who work under the supervision of registered nurses and/or physicians.
- g. **Total facility personnel.** This line is to include the total facility personnel - hospital plus nursing home type unit/facility personnel (for those hospitals that own and operate a nursing home type unit/facility).
- h. **Nursing home type unit/facility personnel.** This line should be filled out only by hospitals that own and operate a nursing home type unit/facility, where only one legal entity is vested with title to the physical property or operates under the authority of a duly executed lease of the physical property. If nursing home type unit/facility personnel are reported on the total facility personnel line, but cannot be broken out, please write "cannot break out" on this line.

