

American Hospital Association Annual Survey Database FY 2003 Edition

Survey Question	Field Description	Notes
	AHA Identification Number	AHA region code in position 2, AHA state code in position 2-3, hospital number in position 4-7
A: REPORTING PERIOD		
A.1.	Beginning of reporting period	MM\DD\YYYY
A.1.	End of reporting period	MM\DD\YYYY
A.2.a.	Was the hospital in operation 12 full months to the end of the reporting period	1=yes, 2=no
A.2.b.	Days open during reporting period	000 for non-reporters
A.3.	Beginning date of fiscal year	MM\DD\YYYY
B: ORGANIZATIONAL STRUCTURE		
B.1.	Control Code – type of organization responsible for establishing policy concerning overall operation of the hospitals	For code descriptions see Appendix A
B.2.	Service Code – category best describing the hospital of the type of service provided to the majority of admissions	For code descriptions see Appendix B
B.3.a.	Does the hospital restrict admissions primarily to children?	1=yes, 0=no
B.3.b.	Is the hospital primarily osteopathic?	1=yes, 0=no
B.3.c.	Does the hospital itself operate subsidiary corporations?	1=yes, 0=no
B.3.d.	Is the hospital contract-managed?	1=yes, 0=no
B.3.d.	Management organization name	
B.3.d.	Management organization city	
B.3.d.	Management organization state	
B.3.e.	Is the hospital a participant in a network?	1=yes, 0=no
B.3.e.	Network name	
B.3.e.	Network telephone number	
B.3.f.	Does the hospital participate in a group purchasing arrangement?	1=yes, 0=no

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Survey Question	Field Description	Notes
C: FACILITIES AND SERVICES		1=provides, 0=doesn't provide
Each type of facility and service is asked for the hospital , the health system , the network , and joint venture		
C.1.	General medical and surgical care (adult)	
C.1.	General medical and surgical (adult) beds	
C.2.	General medical and surgical care (pediatric)	
C.2.	General medical and surgical (pediatric) beds	
C.3.	Obstetric care	
C.3.	Obstetric care beds	
C.3.	Obstetric unit care level	1=provides services for uncomplicated maternity and newborn cases, 2=provides service for all uncomplicated and most complicated cases, 3=provides services for all serious illnesses and abnormalities
C.4.	Medical/surgical intensive care	
C.4.	Medical/surgical intensive care beds	
C.5.	Cardiac intensive care	
C.5.	Cardiac intensive care beds	
C.6.	Neonatal intensive care	
C.6.	Neonatal intensive care beds	
C.7.	Neonatal intermediate care	
C.7.	Neonatal intermediate care beds	
C.8.	Pediatric intensive care	
C.8.	Pediatric intensive care beds	
C.9.	Burn care	
C.9.	Burn care beds	
C.10.	Other special care	
C.10.	Other special care beds	
C.11.	Other intensive care	
C.11.	Other intensive care beds	

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Survey Question	Field Description	Notes
C: FACILITIES AND SERVICES (contd.)		1=provides, 0=doesn't provide
Each type of facility and service is asked for the hospital , the health system , the network , and joint venture		
C.12.	Physical rehabilitation care	
C.12.	Physical rehabilitation care beds	
C.13.	Alcohol/drug abuse or dependency inpatient care	
C.13.	Alcohol/drug abuse or dependency inpatient care beds	
C.14.	Psychiatric care	
C.14.	Psychiatric care beds	
C.15.	Skilled nursing care	
C.15.	Skilled nursing care beds	
C.16.	Intermediate nursing care	
C.16.	Intermediate nursing care beds	
C.17.	Acute long term care	
C.17.	Acute long term care beds	
C.18.	Other long term care	
C.18.	Other long term care beds	
C.19.	Other care	
C.19.	Other care beds	
Calculated	Total hospital beds	Sum of all hospital beds
C.20.	Adult day care program	
C.21.	Airborne infection isolation room	
C.21.	Airborne infection isolation room (# of rooms)	
C.22.	Alcoholism-drug abuse or dependency outpatient services	
C.23.	**Alzheimer Center**	**NEW FIELD**
C.24.	Ambulance services	
C.25.	Arthritis treatment center	
C.26.	Assisted living services	
C.27.	Auxiliary services	
C.28.	Bariatric/weight control service	
C.29.	Birth room/LDR room/LDRP room	

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C.30. Breast cancer screening/mammograms

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Survey Question	Field Description	Notes
C: FACILITIES AND SERVICES (contd.)		1=provides, 0=doesn't provide
Each type of facility and service is asked for the hospital , the health system , the network , and joint venture		
C.31.	**Cardiology services**	**NEW FIELD**
C.31.a.	Angioplasty	
C.31.b.	Cardiac catheterization therapy	
C.31.c.	Open heart surgery	
C.32.	Case Management	
C.33.	Chaplaincy/pastoral care services	
C.34.	**Chemotherapy**	**NEW FIELD**
C.35.	Children wellness program	
C.36.	Chiropractic services	
C.37.	Community outreach	
C.38.	Complementary medicine services	
C.39.	Crisis prevention	
C.40.	Dental services	
C.41.a.	Emergency Department	
C.41.b.	Certified trauma center	
C.41.c.	Level of trauma center	1=regional resource trauma center, 2=community trauma center, 3-rural trauma hospital, 4=other (specific to select states)
C.42.	Enabling services	
C.43.a.	Hospice program	
C.43.b.	Pain management program	
C.43.c.	Palliative care program	
C.44.	Enrollment assistance program	
C.45.	Extracorporeal shock-wave lithotripter (ESWL)	
C.46.	Fitness center	
C.47.	Freestanding outpatient center	
C.48.	Geriatric services	
C.49.	Gamma knife	

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Survey Question	Field Description	Notes
C: FACILITIES AND SERVICES (contd.)		1=provides, 0=doesn't provide
Each type of facility and service is asked for the hospital , the health system , the network , and joint venture		
C.50.	Health fair	
C.51.	Health information center	
C.52.	Health screenings	
C.53.	Hemodialysis	
C.54.	HIV-AIDS services	
C.55.	Home health services	
C.56.	Hospital-base outpatient care center/services	
C.57.	Linguistic/translation services	
C.58.	Meals on wheels	
C.59.	Neurological services	
C.60.	Nutrition programs	
C.61.	Occupational health services	
C.62.	Oncology services	
C.63.	Orthopedic services	
C.64.	Outpatient surgery	
C.65.	Patient education center	
C.66.	Patient representative services	
C.67.	Physical rehabilitation outpatient services	
C.68.	Primary care department	
C.69.a.	Psychiatric child/adolescent services	
C.69.b.	Psychiatric consultation/liaison services	
C.69.c.	Psychiatric education services	
C.69.d.	Psychiatric emergency services	
C.69.e.	Psychiatric geriatric services	
C.69.f.	Psychiatric outpatient services	
C.69.g.	Psychiatric partial hospitalization program	
C.70.	Radiology, therapy	
C.70.a.	**Intensity-Modulated Radiation Therapy (IMRT)	**NEW FIELD**

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Survey Question	Field Description	Notes
C: FACILITIES AND SERVICES (contd.)		1=provides, 0=doesn't provide
Each type of facility and service is asked for the hospital , the health system , the network , and joint venture		
C.71.a.	Radiology, diagnostic - Computed-tomography (CT) scanner	
C.71.b.	Radiology, diagnostic - Diagnostic radioisotope facility	
C.71.c.	**Radiology, diagnostic - Electron Beam Computed Tomography (EBCT)**	**NEW FIELD**
C.71.d.	Radiology, diagnostic- Magnetic resonance imaging (MRI)	
C.71.e.	**Radiology, diagnostic - Multislice spiral computed tomography (MSCT)**	**NEW FIELD**
C.71.f.	Radiology, diagnostic- Positron emission tomography (PET)	
C.71.g.	Radiology, diagnostic- Single photon emission computerized tomography (SPECT)	
C.71.h.	Radiology, diagnostic- Ultrasound	
C.72.	**Reproductive health - Fertility clinic**	**NEW FIELD**
C.72.	**Reproductive health - Genetic testing/counseling**	**NEW FIELD**
C.73.	Retirement housing	
C.74.	Sleep center	
C.75.	Social work services	
C.76.	Sports medicine	
C.77.	Support groups	
C.78.	Swing bed services	
C.79.	Teen outreach services	
C.80.	Tobacco Treatment/Cessation program	
C.81.	Transplant services	
C.82.	Transportation to health facilities	
C.83.	Urgent care center	
C.84.	Volunteer services department	
C.85.	Women's health center/services	
C.86.	Wound Management Services	
C.87a.	Independent practice association	
C.87b.	Group practice without walls	
C.87c.	Open physician-hospital organization	
C.87d.	Closed physician-hospital organization	

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Survey Question	Field Description	Notes
C: FACILITIES AND SERVICES (contd.)		1=provides, 0=doesn't provide
Each type of facility and service is asked for the hospital , the health system , the network , and joint venture		
C.87e.	Management service organization	
C.87f.	Integrated salary model	
C.87g.	Equity model	
C.87h.	Foundation	
C.88a.	Health maintenance organization (HMO)	
C.88b.	Preferred provider organization (PPO)	
C.88c.	Indemnity fee for service plan	
C.89a.	Does the hospital have a formal written contract with an HMO?	
C.89b.	Number of HMO contracts	
C.89c.	Does the hospital have a formal written contract with a PPO?	
C.89d.	Number of PPO contacts	
C.90a.	Percentage of net patient revenue paid on a capitated basis	0=does not participate
C.90b.	Percentage of net patient revenue paid on a shared risk basis	0=does not participate
C.91	Does the hospital contract directly with employers or a coalition of employers to provide care on a capitated, predetermined or shared risk basis?	
C.92	Number of lives covered under a capitated basis	
D: COMMUNITY ORIENTATION		1=yes, 0=no
D.1.	Does the hospital's mission statement include a focus on community benefit?	
D.2.	Does the hospital have a long-term plan for improving the health of its community?	
D.3.	Does the hospital have resources for its community benefit activities?	
D.4.	Does the hospital work with other providers, public agencies or community representatives to conduct a health status assessment of the community?	
D.5.	Does your hospital use health status indicators to design new services or modify existing services?	
D.6.a.	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?	

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Survey Question	Field Description	Notes
D: COMMUNITY ORIENTATION (contd.)		1=yes, 0=no
D.6.b.	If yes, have the hospital used the assessment to identify unmet health needs, excess capacity, or duplicative services in the community?	
D.7.	Does the hospital work with other providers to collect, track and communicate clinical and health information across cooperating organizations?	
D.8.	Does the hospital, alone or with others, disseminate reports to the community on the quality and costs of health care services?	
D.9.	Does the hospital self-assess against Baldrige like criteria for sustained continuous improvement?	
D.10.	Does your hospital gather information on a patient's race/ethnicity at any point during their stay?	
D.11.	Does your hospital gather information on a patient's primary language at any point during their stay?	
D.12.	**Does your hospital participate in the Quality Initiative?*	**NEW FIELD**
D.13.	**If yes, have you submitted data on: One condition, Two conditions, Three conditions, No data submitted.**	**NEW FIELD**
E: TOTAL FACILITY BEDS, UTILIZATION, FINANCES, AND STAFFING		
Calculated	Does the hospital maintain a separate nursing home type of long-term care unit?	1=yes, 2=no, see Appendix H for more information
E.1.a	**Total licensed beds**	**NEW FIELD**
E.1.a.	**Total licensed beds Long Term Unit**	**NEW FIELD**
E.1.b.	Total facility beds set up and staffed at the end of reporting period	
E.1.b.	Nursing home beds set up and staffed	
Calculated	Hospital unit beds set up and staffed	Total beds – nursing home beds
E.1.c.	Bassinets set up and staffed	
E.1.d.	Total births (excluding fetal deaths)	
E.1.e	Total facility admissions	
E.1.e.	Nursing home admissions	
Calculated	Hospital unit admissions	Total admissions – nursing home admissions

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E.1.f.

Total facility inpatient days

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Survey Question	Field Description	Notes
E: TOTAL FACILITY BEDS, UTILIZATION, FINANCES, AND STAFFING		
E.1.f.	Nursing home inpatient days	
Calculated	Hospital unit inpatient days	Total inpatient days – nursing home inpatient days
E.1.g.	Emergency room visits	
E.1.h.	Total outpatient visits	
Calculated	Other outpatient visits	Total outpatient visits – emergency room visits
E.1.i.	Inpatient surgical operations	
E.1.i.	Number of operating rooms	
E.1.j	Outpatient surgical operations	
	Total surgical operations	Inpatient surgical operations + outpatient surgical operations
E.2.a1.	Total facility Medicare inpatient discharges	
E.2.a1.	Nursing home Medicare inpatient discharges	
Calculated	Hospital unit Medicare inpatient discharges	Total Medicare discharges – nursing home Medicare discharges
E.2.a2.	Medicare Managed care discharges	
E.2.a2.	Nursing home Medicare managed care discharges	
Calculated	Hospital unit Medicare managed care discharges	
E.2.b1.	Total facility Medicare inpatient days	
E.2.b1.	Nursing home Medicare inpatient days	
Calculated	Hospital unit Medicare inpatient days	Total Medicare days – nursing home Medicare days
E.2.b2.	Total facility Medicare managed care inpatient days	
E.2.b2.	Nursing home Medicare managed care inpatient days	
Calculated	Hospital unit Medicare managed care inpatient days	
E.2.c1.	Total facility Medicaid inpatient discharges	

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Survey Question	Field Description	Notes
E.3: Financial		
Revenue data is considered confidential and is not released publicly at the hospital level		
E.2.c1.	Nursing home Medicaid inpatient discharges	
Calculated	Hospital unit Medicaid inpatient discharges	Total Medicaid discharges – nursing home Medicaid discharges
E.2.c2.	Total facility Medicaid managed care inpatient discharges	
E.2.c2.	Nursing home Medicaid managed care inpatient discharges	
Calculated	Hospital unit Medicaid managed care inpatient discharges	
E.2.d1.	Total facility Medicaid inpatient days	
E.2.d1.	Nursing home Medicaid inpatient days	
Calculated	Hospital unit Medicaid inpatient days	Total Medicaid days – nursing home Medicaid days
E.2.d2.	Total facility Medicaid managed care inpatient days	
E.2.d2.	Nursing home Medicaid managed care inpatient days	
Calculated	Hospital unit Medicaid managed care inpatient days	
E.3.a.	Total facility Revenue, Net Patient Total, including bad debt	
E.3.a.	Nursing Home Revenue, Net Patient Total, including bad debt	
Calculated	Hospital Revenue, Net Patient Total, including bad debt	Total facility net patient revenue – nursing home net patient revenue
E.3.b.	Other operating revenue, Tax appropriations	
E.3.c.	Other operating revenue, other than tax appropriations	
E.3.d.	Other total non-operating revenue	
E.3.e.	Total revenue, including bad debt	
E.3.e.	Nursing home total revenue, including bad debt	
Calculated	Hospital total revenue, including bad debt	Total facility revenue – nursing home revenue
E.3.f.	Total facility payroll expenses	
E.3.f.	Nursing home payroll expenses	
Calculated	Hospital unit payroll expenses	Total payroll expenses – nursing home payroll expenses

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Survey Question	Field Description	Notes
E.3: Financial (contd.)		
Revenue data is considered confidential and is not released publicly at the hospital level		
E.3.g.	Total facility employee benefits	
E.3.g.	Nursing home employee benefits	
Calculated	Hospital unit employee benefits	Total employee benefits expenses – nursing home employee benefits expenses
E.3.h.	Depreciated expense (for reporting period only)	
E.3.i.	Interest Expense	
E.3.j.	Total facility total expenses	
E.3.j.	Nursing home total expenses	
Calculated	Hospital unit total expenses	
E.4.a.	Gross inpatient revenue	
E.4.b.	Gross outpatient revenue	
E.4.c.	Total gross patient revenue	
E.5.a.	Bad debt expenses	
E.5.b.	Charity care revenue forgone at full established rates. Included in gross revenue	
E.6.a.1.a	Gross patient revenue from Medicare – Routine care revenue	
E.6.a.1.a	Net patient revenue from Medicare – Routine care revenue	
E.6.a.1.b	Gross patient revenue from Medicare – Managed care revenue	
E.7.a.	Property, plant and equipment at cost	
E.6.a.1.b	Net patient revenue from Medicare – Managed care revenue	
E.6.a.1.c	Gross patient revenue from Medicare – total	
E.6.a.1.c	Net patient revenue from Medicare – total	
E.6.a.2.a	Gross patient revenue from Medicaid – Routine care revenue	
E.6.a.2.a	Net patient revenue from Medicaid – Routine care revenue	
E.6.a.2.b	Gross patient revenue from Medicaid – Managed care revenue	
E.6.a.2.b	Net patient revenue from Medicaid – Managed care revenue	
E.6.a.2.c	Gross patient revenue from Medicaid – total	
E.6.a.2.c	Net patient revenue from Medicaid - total	

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Survey Question	Field Description	Notes
E.8: Staffing		
E.6.a.3.	Other government gross patient revenue	
E.6.a.3.	Other government net patient revenue	
E.6.b.1.	Gross patient revenue from Self Pay	
E.6.b.1.	Net patient revenue from Self Pay	
E.6.b.2.a.	Gross patient revenue from Managed care (includes HMO and PPO)	
E.6.b.2.a.	Net patient revenue from Managed care (includes HMO and PPO)	
E.6.b.2.b.	Gross patient revenue from other 3rd party payors	
E.6.b.2.b.	Net patient revenue from other 3rd party payors	
E.6.b.2.c.	Gross patient revenue from 3rd party payors – total	
E.6.b.2.c.	Net patient revenue from 3rd party payors - total	
E.6.b.3.	Other non-government gross patient revenue	
E.6.b.3.	Other non-government net patient revenue	
E.6.c.	Total gross patient revenue (sum by source)	
7.a.	Property, plant and equipment at cost	
7.b.	Accumulated depreciation	**NEW FIELD**
7.c.	Net property, plant and equipment (1-b)	
7.d.	**Total gross square feet of your physical plant used for or in support of your healthcare activities.**	**NEW FIELD**
E.8.a.	Full time physicians and dentists	
E.8.a.	Part time physicians and dentists	
E.8.a.	**FTEs Physicians and dentists**	**NEW FIELD**
E.8.b.	Full time medical and dental residents and interns	
E.8.b.	Part time medical and dental residents and interns	
E.8.b.	**FTEs medical and dental residents and interns**	**NEW FIELD**
E.8.c.	Full time other trainees	
E.8.c.	Part time other trainees	
E.8.c.	**FTEs other trainees**	**NEW FIELD**
E.8.d.	Full time registered nurses	
E.8.d.	Part time registered nurses	
E.8.d.	**FTEs registered nurses**	**NEW FIELD**

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Survey Question	Field Description	Notes
E.8: Staffing (contd.)		
E.8.e.	Full time licensed practical or vocational nurses	
E.8.e.	Part time licensed practical or vocational nurses	
E.8.e.	**FTEs licensed practical or vocational nurses**	**NEW FIELD**
E.8.f.	Full time nursing assistive personnel	**NEW FIELD**
E.8.f.	Part time nursing assistive personnel	**NEW FIELD**
E.8.f.	**FTEs assistive personnel**	**NEW FIELD**
E.8.g.	Full time all other personnel	
E.8.g.	Part time all other personnel	
E.8.g.	**FTEs all other personnel**	**NEW FIELD**
E.8.h.	Full time total personnel	
E.8.h.	Part time total personnel	
E.8.h.	**FTEs total personnel**	**NEW FIELD**
E.8.i.	Total full time nursing home personnel	
Calculated	Total full time hospital unit personnel	
Calculated	Total part time hospital unit personnel	
E.8.i.	Total part time nursing home personnel	
E.8.i.	**FTEs nursing home personnel**	**NEW FIELD**
E.8.j.	**Do hospitalists provide care for patients in your hospital?**	**NEW FIELD**
E.8.k.	**If yes, please report the number of full time and part time hospitalists?*	**NEW FIELD**
E.8.l.	**If yes, please select the category below that best describes the employment model for your hospitalists: Independent provider group, Employed by a physician group, Employed by your hospital, Employed by a university or school program.**	**NEW FIELD**

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ADDITIONAL INFORMATION		
This data is from various sources including AHA Membership		
Registration type code		Y=registered hospital
Membership code		Y=member
Membership short-term, long-term classification code		1=short-term, 2=long-term: See Appendix H
Hospital name		From membership
Name of Chief Administrator		From membership
Medicare Provider Identifier		From membership
System Identifier		From membership
System contact's last name		From membership
System contact's suffix		From membership
System contact's title		From membership
GPO identifier		**NEW FIELD**
GPO name		**NEW FIELD**
GPO city		**NEW FIELD**
GPO state		**NEW FIELD**
GPO address		**NEW FIELD**
GPO zip code		**NEW FIELD**
GPO contact		**NEW FIELD**
GPO contact title		**NEW FIELD**
GPO internet address (url)		**NEW FIELD**
Health System Cluster Code		AHA derived field, see Appendix G
Health Service Area Code and Name Description		Local health care markets for community-based inpatient care derived by researchers at Dartmouth Medical school for the Dartmouth Atlas of Health Care from a national patient origin study. Each HSA is a cluster of contiguous Zip Codes, the residents of which predominantly use one or more hospitals within the HSA. 3,436 discrete HSAs have been defined.

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ADDITIONAL INFORMATION (contd.)		
This data is from various sources including AHA Membership		
	Health Referral Region Code and Name Description	Regional health care markets for tertiary medical care. Hospital referral regions were defined in the Dartmouth Atlas of Health Care by documenting where residents of hospital service areas received major cardiovascular surgical procedures and neurosurgery. Using these two services as markers for tertiary care, the 3,436 hospital service areas were aggregated into 306 hospital referral regions.
	Community Hospital Flag	Use to foot to Hospital Statistics (is derived using the following formula: state code>10 + mtype=Y + los=1 + chc=1) Y=community hospital, N=not a community hospital

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Survey Question	Field Description	Notes
ADDITIONAL CALCULATED FIELDS		
	Response code	1=yes, 2=no
	Community hospital code (as defined by AHA membership)	1=community hospital, 2=not a community hospital, see Appendix H
	Bed size code	For code descriptions, see Appendix D
	Short-term, long-term classification code	1=short-term, 2=long term, see Appendix H
	Average daily census	Admissions/Inpatient Days
	Adjusted admissions	Admissions + (Admissions * (Outpatient Revenue/Inpatient Revenue))
	Adjusted patient days	Inpatient Days + (Inpatient Days * (Outpatient Revenue/Inpatient Revenue))
	Adjusted average daily census	Adjusted Inpatient Days/Number of Days in Reporting Period
	Full time equivalent physicians and dentists	All full time equivalent personnel fields are
	Full time equivalent medical and dental residents and interns	calculated by adding full time personnel to
	Full time equivalent other trainees	0.5 * related part time personnel.
	Full time equivalent registered nurses	
	Full time equivalent licensed practical or vocational nurses	
	Full time equivalent other personnel	
	Full time equivalent total trainees	
	Full time equivalent hospital unit total personnel	
	Full time equivalent nursing home total personnel	
	Full time equivalent total personnel	
GEOGRAPHIC CODES		
This data is derived from the AHA Membership file		
	Consolidated metropolitan statistical area code (CMSA)	
	Metropolitan statistical area code (MSA)	
	MSA Name	Census bureau MSA name

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Survey Question	Field Description	Notes
	MSA Type	Census bureau MSA classification
	Modified FIPS County Code	AHA derived code, see Appendix H
	FIPS State and County Code	Census bureau codes
	FIPS State code	Census bureau state code
GEOGRAPHIC CODES		
This data is derived from the AHA Membership file		
	FIPS County code	Census bureau county code
	County Name	Census bureau county name
	Latitude	Latitude of hospital location
	Longitude	Longitude of hospital location
	Ranking of 100 largest cities	Based on 1990 census, see Appendix F
	MSA Size	For code descriptions, see Appendix E
APPROVAL AND ACCREDITATION CODES		
This data is from the AHA Membership file		
	Accreditation by Joint Commission on Accreditation of Health Care Organizations (JCAHO)	1=yes, 2=no
	Cancer program approved by American College of Surgeons	1=yes, 2=no
	Residency training approval by Accreditation Council for Graduate Medical Education	1=yes, 2=no
	Medical school affiliation reported to American Medical Association	1=yes, 2=no
	Hospital-controlled professional nursing school reported by National League for Nursing	1=yes, 2=no
	Accreditation by Commission on Accreditation of Rehabilitation Facilities (CARF)	1=yes, 2=no
	Member of Council of Teaching Hospital of the Association of American Medical Colleges (COTH)	1=yes, 2=no
	Blue Cross contracting or participating	1=yes, 2=no
	Medicare certification by the U.S. Department of Health and Human Services	1=yes, 2=no
	Accreditation by American Osteopathic Association	1=yes, 2=no
	Internship approved by American Osteopathic Association	1=yes, 2=no
	Residency approved by American Osteopathic Association	1=yes, 2=no
	Registered Osteopathic Hospital (member of AOHA)	1=yes, 2=no
	Registered Osteopathic Hospital (non-member of AOHA)	1=yes, 2=no
	Catholic church operated	1=yes, 2=no

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Survey Question	Field Description	Notes
ESTIMATION	CODES (contd.) (refer to Appendix H for further explanation)	0=reported, 1=estimated, 2=expanded
	Member of Federation of American Health Care Systems	1=yes, 2=no
	Critical Access Hospital (CAH)	YES or blank **NEW FIELD**
	Rural Referral Center (RRCTR)	YES or blank **NEW FIELD**
	Sole Community Provider (SCPROV)	YES or blank **NEW FIELD**
	Total facility admissions	
	Total facility inpatient days	
	Hospital unit admissions	
	Hospital unit inpatient days	
	Nursing home admissions	
	Nursing home inpatient days	
	Total facility Medicare discharges	
	Total facility Medicare days	
	Total facility Medicaid discharges	
	Total facility Medicaid days	
	Hospital unit Medicare discharges	
	Hospital unit Medicare days	
	Hospital unit Medicaid discharges	
	Hospital unit Medicaid days	
	Nursing home Medicare discharges	
	Nursing home Medicare days	
	Nursing home Medicaid discharges	
	Nursing home Medicaid days	
	Births	
	Inpatient surgical operations	
	Outpatient surgical operations	
	Total surgical operations	
	Emergency room visits	
	Other outpatient visits	
	Total outpatient visits	
	Total facility payroll expenses	

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Survey Question	Field Description	Notes
	Total facility employee benefits	
ESTIMATION	CODES (contd.) (refer to Appendix H for further explanation)	0=reported, 1=estimated, 2=expanded
	Total facility expenses	
	Hospital unit payroll expenses	
	Hospital unit employee benefits	
	Hospital unit total expenses	
	Nursing home payroll expenses	
	Nursing home employee benefits	
	Nursing home total expenses	
	Full time physicians and dentists	
	Full time medical and dental residents and interns	
	Full time other trainees	
	Full time registered nurses	
	Full time licensed practical or vocational nurses	
	Full time other personnel	
	Full time total personnel	
	Part time physicians and dentists	
	Part time medical and dental residents and interns	
	Part time other trainees	
	Part time registered nurses	
	Part time licensed practical or vocational nurses	
	Part time other personnel	
	Part time total personnel	
	Total full time hospital unit personnel	
	Total part time hospital unit personnel	
	Total full time nursing home personnel	
	Total part time nursing home personnel	
	Bad debt expense	
	Revenue, Charity deduction	
	Gross patient revenue, Medicaid	
	Net patient revenue, Medicaid	

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Survey Question	Field Description	Notes
	Gross patient revenue, Medicare	
	Net patient revenue Medicare	
	Gross patient revenue, other government	
ESTIMATION CODES (contd.) (refer to Appendix H for further explanation)		0=reported, 1=estimated, 2=expanded
	Gross patient revenue, other non-government	
	Net patient revenue, other government	
	Net patient revenue, other non-government	
	Gross patient revenue	
	Gross inpatient revenue	
	Gross outpatient revenue	
	Total facility revenue, including bad debt	
	Total facility revenue, excluding bad debt	
	Total hospital revenue, including bad debt	
	Total nursing home revenue, including bad debt	
	Other non-operating revenue	
	Net patient revenue, including bad debt	
	Net patient revenue, excluding bad debt	
	Hospital net patient revenue, including bad debt	
	Nursing home net patient revenue, including bad debt	
	Other operating revenue, other than tax appropriations	
	Other operating revenue, tax appropriations	
	Gross patient revenue, self-pay	
	Net patient revenue, self-pay	
	Gross patient revenue, 3 rd party	
	Net patient revenue, 3 rd party	
	Gross patient revenue, sum by source	
	Gross patient revenue, government	
	Gross patient revenue, non-government	
	Net patient revenue, sum by source	
	Net patient revenue, government	
	Net patient revenue, non-government	

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Appendix A Control Code Descriptions

Code	Description
Government, Nonfederal	
12	State
13	County
14	City
15	City-county
16	Hospital district or authority
Nongovernment, not-for-profit	
21	Church operated
23	Other not-for-profit
Investor-owned (for-profit)	
31	Individual
32	Partnership
33	Corporation
Government, federal	
41	Air Force
42	Army
43	Navy
44	Public Health Service other than 47
45	Veterans Affairs
46	Federal other than 41-45, 47-48
47	Public Health Service Indian Service
48	Department of Justice

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Appendix B Service Code Descriptions

Code	Description
10	General medical and surgical
11	Hospital unit of an institution (prison hospital, college infirmary, etc.)
12	Hospital unit within an institution for the mentally retarded
22	Psychiatric
33	Tuberculosis and other respiratory diseases
41	Cancer
42	Heart
44	Obstetrics and gynecology
45	Eye, ear, nose and throat
46	Rehabilitation
47	Orthopedic
48	Chronic disease
49	Other specialty treatment
50	Children's general medical and surgical
51	Children's hospital unit of an institution
52	Children's psychiatric
53	Children's tuberculosis and other respiratory diseases
55	Children's eye, ear, nose and throat
56	Children's rehabilitation
57	Children's orthopedic
58	Children's chronic disease
59	Children's other specialty
62	Institution for mental retardation
80	Acute Long-Term Care
82	Alcoholism and other chemical dependency

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Children's Acute Long-Term Care

Appendix C AHA State Code Descriptions

Code	Description	Code	Description	Code	Description
CENSUS DIVISION 1: NEW ENGLAND		CENSUS DIVISION 4: EAST NORTH CENTRAL		CENSUS DIVISION 7: WEST SOUTH CENTRAL	
11	Maine	41	Ohio	71	Arkansas
12	New Hampshire	42	Indiana	72	Louisiana
13	Vermont	43	Illinois	73	Oklahoma
14	Massachusetts	44	Michigan	74	Texas
15	Rhode Island	45	Wisconsin	CENSUS DIVISION 8: MOUNTAIN	
16	Connecticut	CENSUS DIVISION 5: EAST SOUTH CENTRAL		81	Montana
CENSUS DIVISION 2: MID ATLANTIC		51	Kentucky	82	Idaho
21	New York	52	Tennessee	83	Wyoming
22	New Jersey	53	Alabama	84	Colorado
23	Pennsylvania	54	Mississippi	85	New Mexico
CENSUS DIVISION 3: SOUTH ATLANTIC		CENSUS DIVISION 6: WEST NORTH CENTRAL		86	Arizona
31	Delaware	61	Minnesota	87	Utah
32	Maryland	62	Iowa	88	Nevada
33	District of Columbia	63	Missouri	CENSUS DIVISION 9: PACIFIC	
34	Virginia	64	North Dakota	91	Washington
35	West Virginia	65	South Dakota	92	Oregon
36	North Carolina	66	Nebraska	93	California
37	South Carolina	67	Kansas	94	Alaska
38	Georgia			95	Hawaii
39	Florida			ASSOCIATED AREAS	
				03	Marshall Islands
				04	Puerto Rico
				05	Virgin Islands

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				06	Guam
				07	American Samoa

Appendix D: Bed Size Code Descriptions

Code	Description
1	6-24 beds
2	25-49 beds
3	50-99 beds
4	100-199 beds
5	200-299 beds
6	300-399 beds
7	400-499 beds
8	500 or more beds

Appendix E: MSA Size Code Descriptions

Code	Description
0	Non metropolitan area
1	Under 100,000 population
2	100,000 to 250,000 population
3	250,000 to 500,000 population
4	500,000 to 1,000,000 population
5	1,000,000 to 2,500,000 population
6	Over 2,500,000

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Appendix F: City Rank Code Descriptions

Code	Description	Code	Description	Code	Description
001	NEW YORK, NY	035	ALBUQUERQUE, NM	069	BAKERSFIELD, CA
002	LOS ANGELES, CA	036	KANSAS CITY, MO	070	STOCKTON, CA
003	CHICAGO, IL	037	FRESNO, CA	071	BIRMINGHAM, AL
004	HOUSTON, TX	038	VIRGINIA BEACH, VA	072	JERSEY CITY, NJ
005	PHILADELPHIA, PA	039	ATLANTA, GA	073	NORFOLK, VA
006	PHOENIX AZ	040	SACRAMENTO, CA	074	BATON ROUGE, LA
007	SAN DIEGO, CA	041	OAKLAND, CA	075	HIALEAH, FL
008	DALLAS, TX	042	MESA, AZ	076	LINCOLN, NE
009	SAN ANTONIO, TX	043	TULSA, OK	077	GREENSBORO, NC
010	DETROIT, MI	044	OMAHA, NE	078	PLANO, TX
011	SAN JOSE, CA	045	MINNEAPOLIS, MN	079	ROCHESTER, NY
012	INDIANAPOLIS, IN	046	HONOLULU, HI	080	GLENDALE, AZ
013	SAN FRANCISCO, CA	047	MIAMI, FL	081	AKRON, OH
014	JACKSONVILLE, FL	048	COLORADO SPRINGS, CO	082	GARLAND, TX
015	COLUMBUS, OH	049	SAINT LOUIS, MO	083	MADISON, WI
016	AUSTIN, TX	050	WICHITA, KS	084	FORT WAYNE, IN
017	BALTIMORE, MD	051	SANTA ANA, CA	085	FREMONT, CA
018	MEMPHIS, TN	052	PITTSBURGH, PA	086	SCOTTSDALE, AZ
019	MILWAUKEE, WI	053	ARLINGTON, TX	087	MONTGOMERY, AL
020	BOSTON, MA	054	CINCINNATI, OH	088	SHREVEPORT, LA
021	WASHINGTON, DC	055	ANAHEIM, CA	089	AUGUSTA, GA
022	NASHVILLE, TN	056	TOLEDO, OH	090	LUBBOCK, TX
023	EL PASO, TX	057	TAMPA, FL	091	CHESAPEAKE, VA
024	SEATTLE, WA	058	BUFFALO, NY	092	MOBILE, AL
025	DENVER, CO	059	SAINT PAUL, MN	093	DES MOINES, IA
026	CHARLOTTE, NC	060	CORPUS CHRISTI, TX	094	GRAND RAPIDS, MI
027	FOR WORTH, TX	061	AURORA, CO	095	RICHMOND, VA
028	PORTLAND, OR	062	RALEIGH, NC	096	YONKERS, NY
029	OKLAHOMA CITY, OK	063	NEWARK, NJ	097	SPOKANE, WA
030	TUCSON, AZ	064	LEXINGTON, KY	098	GLENDALE CA
031	NEW ORLEANS, LA	065	ANCHORAGE, AK	099	TACOMA, WA
032	LAS VEGAS, NV	066	LOUISVILLE, KY	100	IRVING, TX

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033	CLEVELAND, OH	067	RIVERSIDE, CA			
034	LONG BEACH, CA	068	SAINT PETERSBURG, FL			

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Appendix G: Health System Cluster Code Descriptions

Recent research using existing theory and AHA Annual Survey data identified a reliable set of five distinct groups of health systems that share common strategic/structural features. This new identification system was developed jointly by the American Hospital Association's Health Research and Educational Trust and Health Forum, and the University of California-Berkeley. For further information on the development of the taxonomy please see: Bazzoli, GJ; Shortell, SM; Dubbs, N; Chan, C; and Kralovec, P; "A Taxonomy of Health Networks and Systems: Bringing Order Out of Chaos" *Health Services Research*, February; 1999. A health system is assigned to one of five categories based on how much they differentiate and centralize their hospital services, physician arrangements, and provider-based insurance products. Differentiation refers to the number of different products or services that the organization offers. Centralization refers to whether decision-making and service delivery emanates from the system level more so than individual hospitals.

Code	Label	Description
1	Centralized Health System	A delivery system in which the system centrally organizes individual hospital service delivery, physician arrangements, and insurance product development. The number of different products/services that are offered across the system is moderate.
2	Centralized Physician/Insurance Health System	A delivery system with highly centralized physician arrangements and insurance product development. Within this group, hospital services are relatively decentralized with individual hospitals having discretion over the array of services they offer. The number of different products/services that are offered across the system is moderate.
3	Moderately Centralized Health System	A delivery system that is distinguished by the presence of both centralized and decentralized activity for hospital services, physician arrangements, and insurance product development. For example, a system within this group may have centralized care of expensive, high technology services, such as open heart surgery, but allows individual hospitals to provide an array of other health services based on local needs. The number of different products/services that are offered across the system is moderate.
4	Decentralized Health System	A delivery system with a high degree of decentralization of hospital services, physician arrangements, and insurance product development. Within this group, systems may lack an overarching structure for coordination. Service and product differentiation is high, which may explain why centralization is hard to achieve. In this group, the system may simply serve a role in sharing information and providing administrative support to highly developed local delivery systems centered around hospitals.
5	Independent Hospital System	A delivery system with limited differentiation; hospital services, physician arrangements, and insurance product development. These systems are largely horizontal affiliations of autonomous hospitals.
blank		Sufficient data from the 1998 Annual Survey were not available to determine a cluster assignment.

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Appendix H: Additional Explanation of Codes and Fields

Estimation Codes

Code	Description
0	The value was reported by the hospital
1	The value was estimated since no value was reported by the hospitals
2	The value has been expanded, since the reported value is associated with a reporting period of less than 1 full year

- If the hospital did not respond to the survey (RESP=2), the following fields were obtained from previously reported data.

AHA ID	Hospital Name	Bed Size code
Control/Ownership	CEO Name	Length of Stay code
Primary Service code	Address	CMSA code
Number of Bassinets	City	MSA code
Total Beds	State	County code
Membership Type	ZIP code	City Rank
Long term/Short term flag	Area code	MSA Size
Control Code – Membership	Telephone number	All accreditation and affiliation flags
Service Code - Membership	Community Hospital Flag (CHC)	(MAPP1 through MAPP17)

- All fields with corresponding estimation fields have been estimated or expanded. Other fields, such as facilities and services were left blank.
- If the **separate units** code (SUNITS) is 2, all short-term and long-term data fields are blank.

Modified FIPS County Code

County codes generally are odd numbers assigned to an alphabetical listing of the counties within a state. Baltimore City is included in Baltimore County, St Louis City is included in St Louis County, and the independent cities in Virginia are each included in the contiguous counties. Kalawao County, Hawaii is included in Maui County. The four Alaska Judicial Divisions were used as counties.

Long term/Short term Flag (LOS)

If a separate long-term unit is reported and long-term admissions are greater than one-half of total admissions, then LOS is 2; otherwise LOS is 1. If a separate long-term unit is not reported and the ratio of inpatient days to admissions is 30 or more, then LOS is 2; otherwise LOS is 1.