American Hospital Association®

AHA Annual Survey Database™

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AHA Annual Survey Database™
Fiscal Year 2015

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Introduction

AHA Annual Survey Database™ for Fiscal Year 2015 is a comprehensive hospital
database for health services research and market analysis. It is derived primarily from the
AHA Annual Survey of Hospitals, which has been administered by the American Hospital
Association (AHA), since 1946. The survey responses are supplemented by data drawn
from the American Hospital Association registration database, the U.S. Census Bureau,
hospital accrediting bodies, and other organizations.

We encourage participation in the *AHA Annual Survey of Hospitals* by all hospitals that
are open and operating in the United States and territories—a group that totals over 6,300
hospitals. Survey participants are not required to be members of the American Hospital
Association, or even registered by the American Hospital Association. Non-registered
hospitals are identified through state hospital associations, the Centers for Medicare and
Medicaid Services, and other national organizations and government entities.

Whether identifying hospital characteristics for a single year or across time, the Database
can be used in a variety of settings. Because the Survey has been conducted for many
years, researchers can use the data for time-series analyses with confidence in consistent
processes and standards in data collection. You can also use identifiers such as the CMS
Certification Number (Medicare Provider Number) to link the Database to other data sets.

The Database includes:

- Data files in multiple formats (see *Technical Notes*)
- File Layout (also available in soft copy format)
- This documentation book

Some items on the questionnaire, such as revenue responses, are deemed confidential at
the hospital-specific level and are not included on the Database. Some of these
confidential data, summarized at national and state levels, can be found in our reference
titled: *AHA Hospital Statistics*™.

Thank you for your purchase of the *AHA Annual Survey Database*. We welcome your
feedback at **support@aha.org.**

Changes for Fiscal Year 2015

The following fields are added for Fiscal Year 2015:

Field label	Short Description
BNDPAY	Bundled payment program.
ERNFTE	RN FTEs involved in direct patient care.
FTPHRN	Full-time physician assistant.
PTPHRN	Part-time physician assistant.
FTEPHRN	Physician assistant FTEs.

The file layout notes new database items in **bold**.

Two items are removed from the Fiscal Year 2015 database:

Field label	Short Description
MAPP6	Hospital-controlled professional nursing school.
MAPP9	Blue Cross contracting or participating.

Technical User Notes

The Annual Survey Database Fiscal Year 2015 is provided in ASCII, comma delimited, and Microsoft® Access formats for use in a statistical application or other applications.

The Database files included are organized as follows:

/ACCESS

AS2015.accdb	MS Access Database

/COMMA

AS15dem.xlsx	MS Excel file - demographic
AS15svc1.xlsx	MS Excel file – service 1 of 3
AS15svc2.xlsx	MS Excel file – service 2 of 3
AS15svc3.xlsx	MS Excel file – service 3 of 3
AS15util1.xlsx	MS Excel file – utilization 1 of 2
AS15util2.xlsx	MS Excel file – utilization 2 of 2
AS2015FULLFILE.xlsx	MS Excel full file
ASPUB15.csv	Comma delimited file
ASPUB15DCTfile.dct	Dictionary file

/DOCUMENTATION

AS2015lay.xls	File layout
AS2015desc.xls	Data description file
SASLAYOUT2015.txt	SAS layout

/FLAT

PUBAS15.asc	The flat ascii fixed-length file

/NPI

NPI2015.xlsx	NPI database
NPIFileLayout.xls	The file layout of the AHA NPI with the AHA taxonomy descriptions and CMS taxonomy codes descriptions

/UNITS

FUNIT_ID.xls	Hospital Units cross reference file

A unit is a distinct and separately identified site of care that is a component part of a larger hospital. Summary data appears only for the larger parent hospital. Beds and activity pertaining to the individual unit is subsumed under the parent hospital activity and cannot be separated from the larger hospital's data. This list, FUNIT_ID, links these familiar names to their parent hospital.

In order to decide which files are most appropriate for your use, read these descriptions and choose the data and documentation that best fits your environment.

Data

PUBAS15.ASC
This is a traditional fixed length flat ASCII file. New fields are incorporated into the file. Every effort is made to maintain consistency with prior years.

Use this file with the included SAS Code or to read the data into an existing application. The File Layout describes the fields and their positions.

ASPUBAS15.CSV
A comma delimited version of the database. The field names are imbedded in the first row of the file. This file can be read into any application that recognizes comma-separated-values, or comma-delimited formats. The File Layout describes the fields.

AS2015.accdb
The database is provided in Microsoft® ACCESS format. The tables in the database have been logically separated in order to accommodate a 256-column limit. The tables are:
AS15DEM — contains the demographic and descriptive fields for each facility
AS15SVC1 — contains facilities and services fields
AS15SVC2— contains facilities and services fields
AS15SVC3— contains facilities and services fields
AS15UTIL1— contains utilization, personnel and the financial fields
AS15UTIL2— contains utilization, personnel and the financial fields

The **File Layout** identifies the specific Table location (name) for each field.

Documentation

The documentation is organized as follows:

AS 2015 Description.xls
The Database Description follows the organization of the Survey questionnaire. This is a descriptive document and has:
- The corresponding survey question
- Field descriptions
- Notes about the field, including reference to secondary sources of information.

AS 2015 Layout.xls
This document is a technical layout of the Database file and contains:
- Field names
- Descriptions
- Relationship to the Survey instrument
- Location in Microsoft® ACCESS Table

Appendices
- Code Descriptions (Appendices A, B, C, D, F, G, H) referenced in the Description and Layout documents. *Note: The former Appendix E is consolidated with Appendix C.*

SAS INPUT 2015.TXT
The SAS code has been tested for this release of the *AHA Annual Survey Database*. Enter the path name to read in the entire flat ASCII file. It will attach field labels to every field.

NPI DATA.xls
The technical layout of the NPI file.

For technical assistance contact us at 866-375-3633 or via email at support@aha.org.

Frequently Asked Questions

1. Which hospitals participate in the AHA Annual Survey?

The Survey is sent to all hospitals identified by the American Hospital Association as open and operating as a hospital. Both AHA member and non-member hospitals receive the Survey. This is not a sample survey. It is a survey of the complete universe of hospitals in the United States and territories.

2. Do all hospitals complete a Survey?

Although this is a voluntary survey, we achieve a response rate at or near 80%. Responding and non-responding hospitals are included in the Database. For non-responding hospitals an estimation process is used to impute missing statistical values (*see Estimation Process* in Technical User Notes).

3. How can I tell if a hospital responded to the Survey?

First, look at the field named RESP to see if the hospital responded to the survey. Additionally, for a number of fields, such as the utilization indicators, there are accompanying fields indicating whether the data are estimated or reported. *See the File Layout for a complete list of these "estimation flags." Also see Appendix H.*

4. How can I identify teaching hospitals or academic medical centers?

There is no one field for identifying teaching hospitals or academic medical centers. However it is possible to examine teaching status by looking at these five fields:

- MAPP3 -Participating site recognized for one or more Accreditation Council for Graduate Medical Education accredited programs.
- MAPP5 - Medical school affiliation reported to the American Medical Association (AMA).
- MAPP8 - Member of the Council of Teaching Hospitals (COTH) of the Association of American Medical Colleges.
- MAPP12 - Internship approved by American Osteopathic Association.
- MAPP13 - Residency approved by American Osteopathic Association.

We consider **major teaching hospitals** to be all hospitals that have the Council of Teaching Hospitals designation (MAPP8). We consider **minor teaching hospitals** to be all hospitals that have any one or more of the other four MAPP codes identified above.

5. How are Urban/Rural locations derived?

A **rural** hospital is located outside a Metropolitan Statistical Area (MSA), as designated by the U.S. Office of Management and Budget (OMB), effective June 6, 2003. **Urban** hospitals are inside Metropolitan Statistical Areas. Micropolitan areas, which were new to the OMB June 6, 2003 definitions, continue to be classified as "rural" in AHA data offerings. *See the AHA Annual Survey Glossary for more information. Also see the File Layout for the* ***CBSATYPE*** *field.*

6. Does the Database include *'Unit'* hospitals?

Unit hospitals are not included within the hospital Database. There is a separate cross-reference file identifying units and their affiliated parent hospital. Learn more about 'Unit' hospitals and how to access the file in the 'Technical User Notes'.

7. Are Health Care Systems included in the Database?

Where applicable the affiliated health care system is identified as part of the hospital record. *See the file layout for SYSNAME.* For purposes of the AHA Annual Survey Database, a multihospital health care system is an entity with two or more hospitals owned, leased, sponsored, or contract managed by a central organization.

8. How can I identify integrated delivery networks?

There is no field for integrated delivery networks (IDNs), or integrated delivery systems (IDSs). We suggest that you look at the "health system" or "network" fields.

9. Why aren't all items on the Questionnaire included in the Database?

Our Agreement with participating hospitals indicates we will not release revenue data at the hospital specific level. Confidential items are denoted with an asterisk on the Questionnaire. Additionally, first year questionnaire items and other asterisked questions may be excluded from the Database for additional evaluation of the responses received in relationship to the intent of the question.

10. Why are AHA Identification Numbers (hospitals) from a prior year Database not on the Fiscal Year 2015 Database?

Each AHA Annual Survey Database represents the population of hospitals recognized by American Hospital Association as open and operating in the fiscal year represented. The *Summary of Changes* located in the 'Change Logs' of this

Documentation book identifies the AHA IDs added or removed from the Fiscal Year 2015 Database, and the reason for the change.

11.   What other Survey data are available?

The American Hospital Association and its subsidiaries conduct a variety of surveys throughout the year. To learn about the availability of data from these surveys, contact us at ahadatainfo@aha.org.

Registration Requirements for Hospitals

AHA REGISTERED HOSPITALS

Any institution that can be classified as a hospital according to the requirements may be registered if it so desires. Membership in the American Hospital Association is not a prerequisite.

The American Hospital Association may, at the sole discretion of the Executive Committee of the Board of Trustees, grant, deny, or withdraw the registration of an institution.

An institution may be registered by the American Hospital Association as a hospital if it is accredited as a hospital by the Joint Commission on Accreditation of Healthcare Organizations or is certified as a provider of acute services under Title 18 of the Social Security Act and has provided the Association with documents verifying the accreditation or certification.

In lieu of preceding accreditation or certification, an institution licensed as a hospital by the appropriate state agency may be registered by AHA as a hospital by meeting the following alternative requirements:

FUNCTION: The primary function of the institution is to provide patient services, diagnostic and therapeutic, for particular or general medical conditions.

The institution shall maintain at least six inpatient beds, which shall be continuously available for the care of patients who are nonrelated and who stay on the average in excess of 24 hours per admission.

The institution shall be constructed, equipped, and maintained to ensure the health and safety of patients and to provide uncrowded, sanitary facilities for the treatment of patients.

There shall be an identifiable governing authority legally and morally responsible for the conduct of the hospital.

There shall be a chief executive to whom the governing authority delegates the continuous responsibility for the operation of the hospital in accordance with established policy.

There shall be an organized medical staff or fully licensed physicians* that may include other licensed individuals permitted by law and by the hospital to provide patient care services independently in the hospital.

The medical staff shall be accountable to the governing authority for maintaining proper standards of medical care, and it shall be governed by bylaws adopted by said staff and approved by the governing authority.

Each patient shall be admitted on the authority of a member of the medical staff who has been granted the privilege to admit patients to inpatient services in accordance with state law and criteria for standards of medical care established by the individual medical staff. Each patient's general medical condition is the responsibility of the qualified physician member of the medical staff. When non-physician members of the medical staff are granted privileges to admit patients, provision is made for prompt medical evaluation of these patients by a qualified physician. Any graduate of a foreign medical school who is permitted to assume responsibilities for patient care shall possess a valid license to practice medicine, or shall be certified by the Education Commission for Foreign Medical Graduates, or shall have qualified for and have successfully completed an academic year of supervised clinical training under direction of a medical school approved by the Liaison Committee on GAT Medical Education.

Registered nurse supervision and other nursing services are continuous.

A current and complete‡ medical record shall be maintained by the institution for each patient and shall be available for reference.

Pharmacy services shall be maintained in the institution and shall be supervised by a registered pharmacist.

The institution shall provide patients with food service that meets their nutritional and therapeutic requirements; special diets also shall be provided

TYPES OF HOSPITALS
In addition to meeting these 10 general registration requirements, hospitals are registered as one of four types of hospitals: general, special, rehabilitation and chronic disease, or psychiatric. The following type of hospital and special requirements for each are employed:

General
The primary function of the institution is to provide patient services, diagnostic and therapeutic, for a variety of medical conditions. A general hospital also shall provide:
- Diagnostic x-ray services with facilities and staff for a variety of procedures.
- Clinical laboratory services with facilities and with anatomical pathology services regularly and conveniently available.
- Operating room service with facilities and staff.

Special
The primary function of the institute is to provide diagnostic and treatment services for patients who have specified medical conditions, both surgical and nonsurgical. A special hospital also shall provide:
- Such diagnostic and treatment services as may be determined by the Executive Committee of the Board of Trustees of the American Hospital Association to be

appropriate for the specified medical conditions for which medical services are provided shall be maintained in the institution with suitable facilities and staff. If such conditions do not normally require diagnostic x-ray service, laboratory service, or operating room service, and if any such services are therefore not maintained in the institution, there shall be written arrangements to make them available to patients requiring them.
- Clinical laboratory services capable of providing tissue diagnosis when offering pregnancy termination services.

Rehabilitation and Chronic Disease
The primary function of the institution is to provide diagnostic and treatment services to handicapped or disabled individuals requiring restorative and adjustive services. A rehabilitation and chronic disease hospital shall also provide:
- Arrangements for diagnostic x-ray services, as required, on a regular and conveniently available basis.
- Arrangements for clinical laboratory service, as required, on a regular and conveniently available basis.
- Arrangements for operating room services, as required, on a regular and conveniently available basis.
- A physical therapy service with suitable facilities and staff in the institution.
- An occupational therapy service with suitable facilities and staff in the institution.
- Arrangements for psychological and social work services on a regular and conveniently available basis.
- Arrangements for educational and vocational services on a regular and conveniently available basis.
- Written arrangements with general hospital for the transfer of patients who require medical, obstetrical, or surgical services not available in the institution.

Psychiatric
The primary function of the institution is to provide diagnostic and treatment services for patients who have psychiatric-related illnesses. A psychiatric hospital shall also provide:
- Arrangements for clinical laboratory service, as required, on a regular and conveniently available basis.
- Arrangements for diagnostic x-ray services, as required, on a regular and conveniently available basis.
- Psychiatric, psychological, and social work service with facilities and staff in the institution.
- Arrangements for electroencephalograph services, as required, on a regular and conveniently available basis.
- Written arrangements with general hospital for the transfer of patients who require medical, obstetrical, or surgical services not available in the institution.

The American Hospital Association may, at the sole discretion of the Executive Committee of the Board of Trustees, grant, deny, or withdraw the registration of the institution.

*   Physician-term used to describe an individual with an M.D. or D.O. degree who is fully licensed to practice medicine in all its phases.

‡   The completed records in general shall contain at least the following: The patients identifying data and consent forms, medical history, record of physical examination, physicians' progress notes, operative notes, nurses' notes, routine x-ray and laboratory reports, doctors' orders, and final diagnosis.

Estimation Process

Each year, AHA administers the Annual Survey of Hospitals. The purpose of the Survey is to collect utilization, financial and personnel information on each of the nations' hospitals. The Survey's overall response rate averages approximately 80% each year, which is considerably high for a voluntary survey given its length and the size of the universe (about 6,300 hospitals).

For hospitals that do not respond at all, or not respond fully to the survey, a statistical methodology is run against their records to estimate missing values. The following describes the two major approaches used for estimation:

For nine key variables - total admissions; total births; total inpatient days; total expenses; total full-time employees; total surgical operations; total outpatient visits; total part-time employees; and total revenue – estimates are generated from regression models. For each variable, the previous year's data (base year) along with estimation status, percentage change in state median, MSA size and bed size are used as the independent variables, while the current year's value is the dependent value. The regression model generates a coefficient for each independent variable, which later will be used in estimating the current year's value. In other words, the current year's missing value is "predicted" by multiplying the base year data with the corresponding coefficients derived from the regression model.

Alternatively, components of the key variables and all other variables eligible for estimation are generated from a matrix of estimators. An estimator is a ratio of two variables: numerators are the variable to estimate; denominators are an indicator variable such as beds, bassinets or a total variable in which the numerator is an additive component. In the first step, the universe of hospitals is stratified into 52 stratum or cells. The stratification is based on the intersection of the following variables, control, service, bed size, and length of stay. Estimators are calculated using all reported data in each stratum. Each estimator takes on a different value for each stratum (thus the matrix). Using payroll expense as an example, matrix estimation occurs as follows. For hospitals in the same stratum, payroll expense as a percentage of total expense is computed based on reported data only. For a non-responding hospital in this same stratum, the estimated payroll expense value is derived by applying the above mentioned percentage to the non-respondent's total expense value regardless of whether that value is reported or estimated.

Please note that missing facilities and services collected through Section C of the Survey are never estimated when missing. Beds, control, service, length of stay also are not estimated but are present in all cases. Values for these variables come from the AHA master facility inventory system. For an institution to be listed in the inventory file there must be a value for those variables. The compilation and management of the inventory is independent of the Annual Survey process.

	Database Description Document	
	FY 2015 Edition	
	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, 0=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 Control code descriptions see **Appendix A**
B.2.	Service Code - category best describing the hospital of the type of Primary Service provided to the majority of admissions	For Primary Service code descriptions see **Appendix B**
B.3.a.	Does the hospital restrict admissions primarily to children?	1=yes, 0=no
B.3.b.	Does the hospital itself operate subsidiary corporations?	1=yes, 0=no
B.3.c.	Is the hospital contract-managed?	1=yes, 0=no
B.3.c.1.	Management organization name	
B.3.c.2.	Management organization city	
B.3.c.3.	Management organization state	
B.3.d.	Is the hospital a participant in a network?	1=yes, 0=no
B.3.d.1.	Network name	
B.3.d.2.	Network city	
B.3.d.3.	Network state	
B.3.d.4.	Telephone number	
B.3.e.	Is your hospital owned in whole or in part by physicians or physician groups	1=yes, 0=no
B.3.f.	If you checked 80 acute long-term care hospital (LTCH) in the Section B2 (Service), please indicate if you are a freestanding LTCH or a LTCH arranged (collocated) within a general acute care hospital.	1=free standing LTCH, 2=LTCH arranged in a general acute care hospital
B.3.f.1	Collocated hospital name	
B.3.f.2	Collocated hospital city	
B.3.f.3.	Collocated hospital state	
C: FACILITIES AND SERVICES		1=provides, 0=doesn't provide
Each type of facility and service is asked for the **hospital**, the **health system**, and **joint venture**		
C.1.	General medical and surgical care (adult), and # beds	
C.2.	General medical and surgical care (pediatric), and # beds	

	Database Description Document	
	FY 2015 Edition	
C.3.	Obstetric care, and # beds	
C.3.	Level of Obstetric care	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, and # beds	
C.5.	Cardiac intensive care, and # beds	
C.6.	Neonatal intensive care, and # beds	
C.7.	Neonatal intermediate care, and # beds	
C.8.	Pediatric intensive care, and # beds	
C.9.	Burn care, and # beds	
C.10.	Other special care, and # beds	Literal Description and Number of Beds
C.11.	Other intensive care, and # beds	Literal Description and Number of Beds
C.12.	Physical rehabilitation care, and # beds	
C.13.	Alcohol/drug abuse or dependency inpatient care, and # beds	
C.14.	Psychiatric care, and # beds	
C.15.	Skilled nursing care, and # beds	
C.16.	Intermediate nursing care, and # beds	
C.17.	Acute long term care, and # beds	
C.18.	Other long term care, and # beds	
C.19.	Other care, and # beds	Literal Description and Number of 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	
C.24.	Ambulance services	
C.25.	Ambulatory surgery center	
C.26.	Arthritis treatment center	
C.27.	Assisted living services	
C.28.	Auxiliary services	
C.29.	Bariatric/weight control services	
C.30.	Birthing room/LDR room/LDRP room	
C.31.	Blood Donor Center	
C.32.	Breast cancer screening/mammograms	

	Database Description Document	
	FY 2015 Edition	
C.33.	Cardiology and cardiac surgery services	
C.33.a.	Adult cardiology services	
C.33.b.	Pediatric cardiology services	
C.33.c.	Adult diagnostic catheterization	
C.33.d.	Pediatric diagnostic catheterization	
C.33.e.	Adult interventional cardiac catheterization	
C.33.f.	Pediatric interventional cardiac catheterization	
C.33.g.	Adult cardiac surgery	
C.33.h.	Pediatric cardiac surgery	
C.33.i.	Adult cardiac electrophysiology	
C.33.j.	Pediatric cardiac electrophysiology	
C.33.k.	Cardiac rehabilitation	
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C.35.	Chaplaincy/pastoral care services	
C.36.	Chemotherapy	
C.37.	Children's wellness program	
C.38.	Chiropractic services	
C.39.	Community outreach	
C.40.	Complementary and alternative medicine services	
C.41.	Computer assisted orthopedic surgery (CAOS)	
C.42.	Crisis prevention	
C.43.	Dental services	
C.44.	Emergency Services	
C.44.a.	Emergency department	
C.44.b	Pediatric emergency department	
C.44.c.	Satellite emergency department	
C.44.d.	If Satellite emergency dept is in hospital, is dept. open 24 hours, 7 days a week	1=yes, 0=no
C.44.e.	Certified trauma center	
C.44.e.	Level of Trauma Center	1=regional resource trauma center; 2=community trauma center; 3-rural trauma hospital; 4 or greater = other (specific to select states)
C.45.	Enabling services	
C.46.	Endoscopic services	
C.46.a. Optical	colonoscopy	
C.46.b.	Endoscopic ultrasound	
C.46.c.	Ablation of Barrett's esophagus	
C.46.d.	Esophageal impedance study	

C.46.e	Endoscopic retrograde cholangiopancreatography (ERCP)	
C.47	Enrollment (insurance) assistance services	
C.48.	Extracorporeal shock-wave lithotripter (ESWL)	
C.49.	Fertility clinic	
C.50.	Fitness center	
C.51.	Freestanding outpatient care center	
C.52.	Geriatric services	
C.53.	Health fair	
C.54.	Community health education	
C.55.	Genetic testing/counseling	
C.56.	Health screenings	
C.57.	Health research	
C.58.	Hemodialysis	
C.59.	HIV-AIDS services	
C.60.	Home health services	
C.61.	Hospice program	
C.62.	Hospital-based outpatient care center services	
C.63.	Immunization program	
C.64.	Indigent care clinic	
C.65.	Linguistic/translation services	
C.66.	Meals on wheels	
C.67.	Mobile health services	
C.68.	Neurological services	
C.69.	Nutrition programs	
C.70.	Occupational health services	
C.71.	Oncology services	
C.72.	Orthopedic services	
C.73.	Outpatient surgery	
C.74.	Pain management program	
C.75.	Palliative care program	
C.76.	Palliative care inpatient unit	
C.77.	Patient controlled analgesia (PCA)	
C.78.	Patient education center	
C.79.	Patient representative services	
C.80.	Physical rehabilitation services	
C.80.a.	Assistive technology center	
C.80.b.	Electrodiagnostic services	
C.80.c.	Physical rehabilitation outpatient services	

C.80.d.	Prosthetic and orthotic services	
C.80.e.	Robot-assisted walking therapy	
C.80.f.	Simulated rehabilitation environment	
C.81.	Primary care department	
C.82.	Psychiatric services	
C.82.a.	Psychiatric child-adolescent services	
C.82.b.	Psychiatric consultation-liaison services	
C.82.c.	Psychiatric education services	
C.82.d.	Psychiatric emergency services	
C.82.e.	Psychiatric geriatric services	
C.82.f.	Psychiatric outpatient services	
C.82.g.	Psychiatric partial hospitalization services	
C.82.h	Psychiatric residential treatment	
C.83.	Radiology, diagnostic	
C.83.a.	Computed-tomography (CT) scanner	
C.83.b.	Diagnostic radioisotope facility	
C.83.c.	Electron beam computed tomography (EBCT)	
C.83.d.	Full-field digital mammography	
C.83.e.	Magnetic resonance imaging (MRI)	
C.83.f.	Intraoperative magnetic resonance imaging	
C.83.g.	Magnetoencephalography (MEG)	
C.83.h.	Multislice spiral computed tomography (<64+slice CT)	
C.83.i.	Multi-slice spiral computed tomography (64+ Slice CT)	
C.83.j.	Positron emission tomography (PET)	
C.83.k.	Positron emission tomography /CT (PET/CT)	
C.83.l.	Single photon emission computerized tomography (SPECT)	
C.83.m.	Ultrasound	
C.84	Radiology, therapeutic	
C.84.a.	Image-guided radiation therapy (IGRT)	
C.84.b.	Intensity-modulated radiation therapy (IMRT)	
C.84.c.	Proton beam therapy	
C.84.d	Shaped beam radiation system	
C.84.e.	Stereotactic radiosurgery	
C.85.	Retirement housing	
C.86.	Robotic surgery	
C.87.	Rural health clinic	
C.88.	Sleep center	

C.89.	Social work services	
C.90.	Sports medicine	
C.91.	Support groups	
C.92.	Swing bed services	
C.93.	Teen outreach services	
C.94.	Tobacco treatment/cessation program	
C.95.	Transplant Services	
C.95.a.	Bone marrow	
C.95.b.	Heart	
C.95.c.	Kidney	
C.95.d.	Liver	
C.95.e.	Lung	
C.95.f.	Tissue	
C.95.g.	Other	
C.96.	Transportation to health services	
C.97.	Urgent care center	
C.98.	Virtual colonoscopy	
C.99.	Volunteer services department	
C.100.	Women's health center/services	
C.101.	Wound management services	
Type of physician arrangement is asked for the **hospital**, the **health system**, and the **health network**		
C.102.a.	Independent practice association	Number of physicians
C.102.b.	Group practice without walls	Number of physicians
C.102.c.	Open physician-hospital organization (PHO)	Number of physicians
C.102.d.	Closed physician-hospital organization (PHO)	Number of physicians
C.102.e.	Management service organization (MSO)	Number of physicians
C.102.f.	Integrated salary model	Number of physicians
C.102.g.	Equity model	Number of physicians
C.102.h.	Foundation	Number of physicians
C.102.i.	Other, please specify	Number of physicians
C.102.b.	Looking across all the relationships identified in question 102a, what is the total number of physicians (count each physician only once) that are engaged in an arrangement with your hospital that allows for joint contracting with payers or shared responsibility for financial risk or clinical performance between the hospital and physician (arrangement may be at the hospital, system or network level)?	Number of physicians
C.103.a.	Does your hospital participate in any joint venture arrangements with physicians or physician groups?	1=yes, 0=no

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C.103.b.a.	Limited service hospital	1=yes, 0=no
C.103.b.b.	Ambulatory surgical centers	1=yes, 0=no
C.103.b.c.	Imaging centers	1=yes, 0=no
C.103.b.d.	Other	1=yes, 0=no
C.103.b.d.	Other (description text)	literal value
C.103.c.	If you selected 'a. Limited Service Hospital', please tell us what type(s) of services are provided	
C.103.c.a.	Cardiac	1=yes, 0=no
C.103.c.b.	Orthopedic	1=yes, 0=no
C.103.c.c.	Surgical	1=yes, 0=no
C.103.c.d.	Other	1=yes, 0=no
C.103.c.d.	Other (description text)	
C.103.d.	Does you hospital participate in joint venture arrangements with organizations other than physician groups	1=yes, 0=no
C.104.a.	Has your hospital or health care system established an accountable care organization (ACO)?	1=yes, 0=no
C.104.b.	If yes, please indicate the patient population that participates in the ACO (Check all that apply)	
C.104.b.a.	Medicaid	
C.104.b.b.	Medicare	
C.104.b.c.	Privately insured	
C.104.b.d.	Other	
C.104.b.d.	Please specify	
C.105.	Does your hospital have an established medical home program?	1=yes, 0=no
C.106.	Does your hospital participate in a bundled payment program involving inpatient, physician, and/or post acute care services where the hospital receives a single payment from a payer for a package of services and then distributes payments to participating providers of care (such as a single fee for hospital and physician services for a specific procedure, e.g. hip replacement, CABG)?	1=yes, 0=no
Question 107 is asked for the **hospital**, the **health system**, the **network**, and **joint venture with insurer**		
C.107.	Does your hospital have equity interest in any of following insurance products?	1=yes, 0=no
C.107.a.	Health Maintenance Organization	
c.107.b.	Preferred Provider Organization	
c.107.c.	Indemnity Fee for Service Plan	
C.108.	Does your hospital have formal written contract that specifies obligations of each party with:	1=yes, 0=no
C.108.a.	HMO	1=yes, 0=no

C.108.b.	If yes, how many contracts	
C.108.c.	PPO	1=yes, 0=no
C.108.d.	If yes, how many contracts	
C.109.	What percentage of net patient revenue is paid on capitated basis?	0=does not participate
C.110.	What percentage of net patient revenue is paid on shared risk basis?	
C.111.	Does hospital contract directly with employers or coalition of employers to provide care on capitated, predetermined or shared risk basis.	1=yes, 0=no
C.112.	If hospital arranges to care for specified group of enrollees in exchange for capitated payment, how many lives are covered?	
C.113.	[2]Does your hospital have contracts with commercial payers where payment is tied to performance on quality/safety metrics?	1 = yes, 0 = no
C.114.a.	[2]Does your hospital conduct an internal survey of the hospital's quality/safety culture at least every 18 months?	1 = yes, 0 = no
C.114.b.	[2]If yes please indicate the response rate for the most recent survey [%].	
C.114.c.	[2]If yes, are valid results available at the level of individual units (e.g., medical ICUs, cardiothoracic surgery)?	1 = yes, 0 = no
	[2]On questionnaire; not in database.	
D: TOTAL FACILITY BEDS, UTILIZATION, FINANCES AND STAFFING		
Calculated	Does the hospital maintain a separate nursing home type of long-term care unit?	1=yes, 0=no, see **Appendix H** for more information
D.1.a	Total licensed beds	
D.1.a.	Total licensed beds-nursing home unit	
D.1.b.	Total facility beds set up and staffed at the end of reporting period	
D.1.b.	Nursing home beds set up and staffed	
Calculated	Hospital unit beds set up and staffed	Total beds less nursing home beds
D.1.c.	Bassinets set up and staffed	
D.1.d.	Total births (excluding fetal deaths)	
D.1.e	Total facility admissions	
D.1.e.	Nursing home admissions	
Calculated	Hospital unit admissions	Total admissions less nursing home admissions
D.1.f.	Total facility inpatient days	
D.1.f.	Nursing home inpatient days	
Calculated	Hospital unit inpatient days	Total inpatient days less nursing home inpatient days
D.1.g.	Emergency depaprtment visits	

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D.1.h.	Total outpatient visits	
Calculated	Other outpatient visits	Total outpatient visits less emergency room visits
D.1.i.	Inpatient surgical operations	
D.1.j.	Number of operating rooms	
D.1.k.	Outpatient surgical operations	
Calculated	Total surgical operations	Inpatient surgical operations plus outpatient surgical operations
D.2.a1.	Total facility Medicare inpatient discharges	
D.2.a1.	Nursing home Medicare inpatient discharges	
Calculated	Hospital unit Medicare inpatient discharges	Total Medicare discharges less nursing home Medicare discharges
D.2.a2.	Medicare Managed care inpatient discharges	
D.2.a2.	Nursing home Medicare managed care discharges	
Calculated	Hospital unit Medicare managed care inpatient discharges	Total Medicare Managed care discharges less nursing home Medicare managed care discharges
D.2.b1.	Total facility Medicare inpatient days	
D.2.b1.	Nursing home Medicare inpatient days	
Calculated	Hospital unit Medicare inpatient days	Total Medicare days less nursing home Medicare days
D.2.b2.	Total facility Medicare managed care inpatient days	
D.2.b2.	Nursing home Medicare managed care inpatient days	
Calculated	Hospital unit Medicare managed care inpatient days	Total Medicare managed care inpatient days less nursing home Medicare managed care inpatient days
D.2.c1.	Total facility Medicaid inpatient discharges	
D.2.c1.	Nursing home Medicaid inpatient discharges	
Calculated	Hospital unit Medicaid inpatient discharges	Total Medicaid discharges less nursing home Medicaid discharges
D.2.c2.	Total facility Medicaid managed care inpatient discharges	
D.2.c2.	Nursing home Medicaid managed care inpatient discharges	
Calculated	Hospital unit Medicaid managed care inpatient discharges	Total Medicaid managed care inpatient discharges less nursing home Medicaid managed care inpatient discharges
D.2.d1.	Total facility Medicaid inpatient days	
D.2.d1.	Nursing home Medicaid inpatient days	
Calculated	Hospital unit Medicaid inpatient days	Total Medicaid days less nursing home Medicaid days
D.2.d2.	Total facility Medicaid managed care inpatient days	

D.2.d2.	Nursing home Medicaid managed care inpatient days	
Calculated	Hospital unit Medicaid managed care inpatient days	Total Medicaid managed care inpatient days less nursing home Medicaid managed care inpatient days
Note: Items D.3.a-e (Revenue data) are considered confidential and are not released publicly at the hospital-specific level		
D.3.a.	Net patient revenue (treat bad debt as a deduction from revenue)	Data not available
D.3.a.	Nursing Home Revenue, Net Patient Total, including bad debt	Data not available
Calculated	Hospital Revenue, Net Patient Total, including bad debt	Total facility net patient revenue less nursing home net patient revenue. Data not available.
D.3.b.	Other operating revenue, Tax appropriations	Data not available
D.3.c.	Other operating revenue, other than tax appropriations	Data not available
D.3.d.	Other total non-operating revenue	Data not available
D.3.e.	Total revenue, including bad debt	Data not available
D.3.e.	Nursing home total revenue, including bad debt	Data not available
Calculated	Hospital total revenue, including bad debt	Total facility revenue less nursing home revenue. Data not available.
D.3.f.	Total facility payroll expenses	
D.3.f.	Nursing home payroll expenses	
Calculated	Hospital unit payroll expenses	Total payroll expenses less nursing home payroll expenses
D.3.g.	Total facility employee benefits	
D.3.g.	Nursing home employee benefits	
Calculated	Hospital unit employee benefits	Total employee benefits expenses less nursing home employee benefits expenses
D.3.h.	Depreciated expense (for reporting period only)	
D.3.i.	Interest expense	
D.3.j.	Supply expense	
D.3.k.	**All other expenses**	
D.3.l.	Total facility total expenses	
D.3.l.	Nursing home total expenses	
Calculated	Hospital unit total expenses	(Total payroll plus all non-payroll expenses) less (nursing home payroll plus all non-payroll expenses). Excludes bad debt.
Note: Items D.4.a. - D.6.c. (Revenue data) are considered confidential and are not released publicly at the hospital-specific level		
*D.4.a.	*Gross inpatient revenue	*Data not available
*D.4.b.	*Gross outpatient revenue	*Data not available
*D.4.c.	*Total gross patient revenue	*Data not available

	Database Description Document	
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*D.5.a.	*Bad debt expenses	*Data not available
*D.5.b.	*Charity care revenue forgone at full established rates. Included in gross revenue	*Data not available
*D.6.a.1.a	*Gross patient revenue from Medicare - Routine care revenue	*Data not available
*D.6.a.1.a	*Net patient revenue from Medicare - Routine care revenue	*Data not available
*D.6.a.1.b	*Gross patient revenue from Medicare - Managed care revenue	*Data not available
*D.6.a.1.b	*Net patient revenue from Medicare - Managed care revenue	*Data not available
*D.6.a.1.c	*Gross patient revenue from Medicare - total	*Data not available
*D.6.a.1.c	*Net patient revenue from Medicare - total	*Data not available
*D.6.a.2.a	*Gross patient revenue from Medicaid - Routine care revenue	*Data not available
*D.6.a.2.a	*Net patient revenue from Medicaid - Routine care revenue	*Data not available
*D.6.a.2.b	*Gross patient revenue from Medicaid - Managed care revenue	*Data not available
*D.6.a.2.b	*Net patient revenue from Medicaid - Managed care revenue	*Data not available
*D.6.a.2.c	*Gross patient revenue from Medicaid - total	*Data not available
*D.6.a.2.c	*Net patient revenue from Medicaid - total	*Data not available
*D.6.a.3.	Other government gross patient revenue	*Data not available
*D.6.a.3.	Other government net patient revenue	*Data not available
*D.6.b.1.	Gross patient revenue from Self Pay	*Data not available
*D.6.b.1.	Net patient revenue from Self Pay	*Data not available
*D.6.b.2.a.	Gross patient revenue from Managed care (includes HMO and PPO)	*Data not available
*D.6.b.2.a.	Net patient revenue from Managed care (includes HMO and PPO)	*Data not available
*D.6.b.2.b.	Gross patient revenue from other 3rd party payors	*Data not available
*D.6.b.2.b.	Net patient revenue from other 3rd party payors	*Data not available
*D.6.b.2.c.	Gross patient revenue from 3rd party payors - total	*Data not available
*D.6.b.2.c.	Net patient revenue from 3rd party payors - total	*Data not available
*D.6.b.3.	Other non-government gross patient revenue	*Data not available
*D.6.b.3.	Other non-government net patient revenue	*Data not available
*D.6.c.	Total gross patient revenue (sum by source)	*Data not available
D.7.	Fixed assets	
D.7.a.	Property, plant and equipment at cost	
D.7.b.	Accumulated depreciation	
D.7.c.	Net property, plant and equipment (a-b)	
D.7.d.	Total gross square feet of your physical plant used for or in support of your healthcare activities.	
D.8.	Total Capital Expenses	
Note: Items D.9.a. - D.9.d. are considered confidential and are not released publicly at the hospital-specific level		
D.9.a.	*IT operating expense	
D.9.b.	*IT capital expense	

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D.9.c.	*IT Number of employed IT staff (in FTEs)	
D.9.d.	*Number of outsourced IT staff (in FTEs)	
D.9.e.	Does your hospital have an electronic health record	0=no; 1=Yes, partially implemented; 2=Yes, fully implemented
D.10.a.	Full time physicians	
D.10.a.	Part time physicians	
D.10.a.	FTEs Physicians	
D.10.a.	Vacancies Physicians	
D.10.b.	Full time dentists	
D.10.b.	Part time dentists	
D.10.b.	FTE dentists	
D.10.b.	Vacancies Dentists	
D.10.c.	Full time medical and dental residents and interns	
D.10.c.	Part time medical and dental residents and interns	
D.10.c.	FTEs medical and dental residents and interns	
D.10.c.	Vacancies medical and dental residents and interns	
D.10.d.	Full time other trainees	
D.10.d.	Part time other trainees	
D.10.d.	FTEs other trainees	
D.10.d.	Vacancies other trainees	
D.10.e.	Full time registered nurses	
D.10.e.	Part time registered nurses	
D.10.e.	FTEs registered nurses	
D.10.e.	Vacancies registered nurses	
D.10.f.	Full time licensed practical or vocational nurses	
D.10.f.	Part time licensed practical or vocational nurses	
D.10.f.	FTEs licensed practical or vocational nurses	
D.10.f.	Vacancies licensed practical or vocational nurses	
D.10.g.	Full time nursing assistive personnel	
D.10.g.	Part time nursing assistive personnel	
D.10.g.	FTEs nursing assistive personnel	
D.10.g.	Vacancies nursing assistive personnel	
D.10.h.	Full time Radiology technicians	
D.10.h.	Part time Radiology technicians	
D.10.h.	FTEs Radiology technicians	
D.10.h.	Vacancies Radiology technicians	
D.10.i.	Full time laboratory technicians	

D.10.i.	Part time laboratory technicians	
D.10.i.	FTEs laboratory technicians	
D.10.i.	Vacancies laboratory technicians	
D.10.j.	Full time Pharmacists, licensed	
D.10.j.	Part time Pharmacists, licensed	
D.10.j.	FTEs Pharmacists, licensed	
D.10.j.	Vacancies Pharmacists, licensed	
D.10.k.	Full time Pharmacy technicians	
D.10.k.	Part time Pharmacy technicians	
D.10.k.	FTEs Pharmacy technicians	
D.10.k.	Vacancies Pharmacy technicians	
D.10.l.	Full time Respiratory therapists	
D.10.l.	Part time Respiratory therapists	
D.10.l.	FTEs Respiratory therapists	
D.10.l.	Vacancies Respiratory therapists	
D.10.m.	Full time all other personnel	
D.10.m.	Part time all other personnel	
D.10.m.	FTEs all other personnel	
D.10.m.	Vacancies all other personnel	
D.10.n.	Full time total personnel	
D.10.n.	Part time total personnel	
D.10.n.	FTEs total personnel	
D.10.n.	Vacancies total personnel	
D.10.o.	Full time nursing home type unit/facility registered nurses	
D.10.o.	Part time nursing home type unit/facility registered nurses	
D.10.o.	FTE nursing home type unit/facility registered nurses	
D.10.o.	Vacancies nursing home type unit/facility registered nurses	
D.10.p.	Total full time total nursing home personnel	
D.10.p.	Total part time total nursing home personnel	
D.10.p.	FTEs nursing total nursing home personnel	
D.10.p.	Vacancies total nursing home personnel	
D.10.q.	For your employed RNs reported in D.10.e., please report the number of FTEs who are involved in direct patient care.	
D.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total employed	
D.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total individual contract	

D.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total group contract	
D.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - not employed or under contract	
D.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total privileged	
D.11.b.	Emergency medicine - total employed	
D.11.b.	Emergency medicine - total individual contract	
D.11.b.	Emergency medicine - total group contract	
D.11.b.	Emergency medicine - not employed or under contract	
D.11.b.	Emergency medicine - total privileged	
D.11.c.	Hospitalist - total employed	
D.11.c.	Hospitalist - total individual contract	
D.11.c.	Hospitalist - total group contract	
D.11.c.	Hospitalist - not employed or under contract	
D.11.c.	Hospitalist - total privileged	
D.11.d.	Intensivist - total employed	
D.11.d.	Intensivist - total individual contract	
D.11.d.	Intensivist - total group contract	
D.11.d.	Intensivist - not employed or under contract	
D.11.d.	Intensivist - total privileged	
D.11.e.	Radiologist/pathologist/anesthesiologist - total employed	
D.11.e.	Radiologist/pathologist/anesthesiologist - total individual contract	
D.11.e.	Radiologist/pathologist/anesthesiologist - total group contract	
D.11.e.	Radiologist/pathologist/anesthesiologist - not employed or under contract	
D.11.e.	Radiologist/pathologist/anesthesiologist - total privileged	
D.11.f.	Other specialist - total employed	
D.11.f.	Other specialist - total individual contract	
D.11.f.	Other specialist - total group contract	
D.11.f.	Other specialist - not employed or under contract	
D.11.f.	Other specialist - total privileged	
D.11.g.	Total physicians - total employed	
D.11.g.	Total physicians - total individual contract	
D.11.g.	Total physicians - total group contract	
D.11.g.	Total physicians - not employed or under contract	
D.11.g.	Total physicians - total privileged	
D.12.a.	Do hospitalists provide care for patients in your hospital?	1=yes, 0=no

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D.12.b.	If yes, please report the number of full time equivalents (FTE) hospitalists?	
D.13.a.	Do intensivists provide care for patients in your hospital?	1=yes, 0=no
D.13.b.1.	Intensivists (FTE) medical-surgical intensive care	
D.13.b.1.	Medical surgical intensive care - closed to intensivists	
D.13.b.2.	Intensivists (FTE) cardiac intensive care	
D.13.b.2.	Cardiac intensive care - closed to intensivists	
D.13.b.3.	Intensivists (FTE) neonatal intensive care	
D.13.b.3.	Neonatal intensive care - closed to intensivists	
D.13.b.4.	Intensivists (FTE) pediatric intensive care	
D.13.b.4.	Pediatric intensive care - closed to intensivists	
D.13.b.5.	Intensivists (FTE) other intensive care	
D.13.b.5.	Other intensive care - closed to intensivists	
D.13.b.6.	Total number of FTE Intensivists	
D.14.a.	Do advanced practice nurse/physician assistants provide care for patients in your hospital?	1=yes, 0=no
D.14.b.	FT Advanced practice nurses (number)	
D.14.b.	PT Advanced practice nurses (number)	
D.14.b.	FTE Advanced practice nurses (number)	
D.14.b.	Physician Assistants FT (number)	
D.14.b.	Physician Assistants PT (number)	
D.14.b.	Physician Assistants FTE (number)	
D.14.c.	Primary care advanced practice nurses	1=yes, 0=no
D.14.c.	Anesthesia services advanced practice nurses	1=yes, 0=no
D.14.c.	Emergency department care advanced practice nurses	1=yes, 0=no
D.14.c.	Other specialty care advanced practice nurses	1=yes, 0=no
D.14.c.	Patient education advanced practice nurses	1=yes, 0=no
D.14.c.	Case management advanced practice nurses	1=yes, 0=no
D.14.c.	Other advanced practice nurses	1=yes, 0=no
D.15.a.	Did your facility hire more foreign-educated nurses	0=did not hire, 1=more, 2=less, 3=same
D.15.b.	From which countries/continents are you recruiting foreign-educated nurses?	
D.15.b.	Africa	1=yes, 0=no
D.15.b.	South Korea	1=yes, 0=no
D.15.b.	Canada	1=yes, 0=no
D.15.b.	Philippines	1=yes, 0=no
D.15.b.	China	1=yes, 0=no
D.15.b.	India	1=yes, 0=no
D.15.b.	Other	1=yes, 0=no

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E: SUPPLEMENTAL INFORMATION		**Not used at all; Used minimally; Used moderately; Used widely; Used hospital-wide.**
E.1.	Does your hospital provide services through a satellite facility(s)?	1=yes, 0=no
E.2	Does the hospital participate in a group purchasing arrangement? If yes, please provide the name, city, and state of the group purchasing organization.	
E.2.	Name of group purchasing organization	
E.2.	City of group purchasing organization	
E.2.	State of group purchasing organization	
E.3.	Does the hospital purchase medical/surgical supplies directly through a distributor?	1=yes, 0=no
E.3.	Name of Distributor	
E.4.	If your hospital hired RNs during the reporting period, how many were new graduates from nursing schools?	
E.5.	Describe the extent of your hospital's current partnership with the following types of organizations for community or population health improvement initiatives.[2]	
E.5.a.	Health care providers outside your system.	Not involved; Collaboration; Formal Alliance.
E.5.b.	Local or state public health organizations.	Not involved; Collaboration; Formal Alliance.
E.5.c.	Local or state human/social service organizations.	Not involved; Collaboration; Formal Alliance.
E.5.d.	Other local or state government.	Not involved; Collaboration; Formal Alliance.
E.5.e.	Non-profit organizations.	Not involved; Collaboration; Formal Alliance.
E.5.f.	Faith-based organizations.	Not involved; Collaboration; Formal Alliance.
E.5.g.	Health insurance companies.	Not involved; Collaboration; Formal Alliance.
E.5.h.	Schools	Not involved; Collaboration; Formal Alliance.
E.5.i.	Local businesses or chambers of commerce.	Not involved; Collaboration; Formal Alliance.
E.5.j.	Other (list).	Not involved; Collaboration; Formal Alliance.

ADDITIONAL INFORMATION	
This data is from various sources including AHA Membership	
AHA Registered Hospital code	Y=registered hospital
AHA Member code	Y=member
Hospital name	Source: AHA membership
Name of Chief Administrator	Source: AHA membership
Medicare Provider Identifier (CMS Certification Number -- CCN)	Source: AHA membership
System Identifier	Source: AHA membership
System Primary Contact	Source: AHA membership
System Contact's title	Source: AHA membership
Health System Cluster Code	AHA derived field, see **Appendix G**
Health Service Area Code	
Health Service Area Name	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.
This data is from various sources including AHA Membership	
Health Referral Region Code	
Health Referral Region Name	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 hospital service areas were aggregated into hospital referral regions.
Community Hospital Flag (consistent with *AHA Hospital Statistics)*	Use to foot to *AHA Hospital Statistics.* Derived using the following formula: state code>10 + mtype=Y + los=1 + chc=1. Where Y=community hospital, N=not a community hospital.
ADDITIONAL CALCULATED FIELDS	
Response code	1=yes, 2=no

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	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	Calculated: Admissions/Inpatient Days
	Adjusted admissions	Calculated: Admissions + (Admissions * (Outpatient Revenue/Inpatient Revenue))
	Adjusted patient days	Calculated: Inpatient Days + (Inpatient Days * (Outpatient Revenue/Inpatient Revenue))
	Adjusted average daily census	Calculated: 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	
This data is derived from the AHA corporate database		
GEOGRAPHIC CODES		
	Consolidated metropolitan statistical area code (CMSA)	Source: U.S. Census Bureau
	Core Based Statistical Area (CBSA)	Source: U.S. Census Bureau
	CBSA Name	Source: U.S. Census Bureau
	CBSA Type	Metropolitan, Micropolitan, Rural. Source: U.S. Census Bureau
	Census Metropolitan Division Name	Source: U.S. Census Bureau
	Census Metropolitan Division Code	Source: U.S. Census Bureau
	Combined Statistical Area Name	Source: U.S. Census Bureau
	Combined Statistical Area Code	Source: U.S. Census Bureau
	Modified FIPS County Code	AHA derived code, see **Appendix H**
	FIPS State and County Code	Source: U.S. Census Bureau
	FIPS State code	Source: U.S. Census Bureau, see **Appendix C**
	FIPS County code	Source: U.S. Census Bureau County Code
	County Name	Source: U.S. Census Bureau County name

	Latitude		Latitude of hospital location; Source: Federal Emergency Management Agency
	Longitude		Longitude of hospital location; Source: Federal Emergency Management Agency
	Ranking of 100 largest cities		Source: U.S. Census Bureau most recent census, see **Appendix F**
APPROVAL AND ACCREDITATION CODES			
This data is from the AHA corporate database			
	Accreditation by The Joint Commission		1=yes, 2=no; Source: The Joint Commission
	Cancer program approved by American College of Surgeons, Commission on Cancer		1=yes, 2=no; Source: American College of Surgeons, Commission on Cancer
	Participating site recognized for one or more Accreditation Council for Graduate Medical Education accredited programs.		1=yes, 2=no; Source: Accreditation Council for Graduate Medical Education
	Medical school affiliation reported to American Medical Association		1=yes, 2=no; Source: American Medical Association
	Accreditation by Commission on Accreditation of Rehabilitation Facilities (CARF)		1=yes, 2=no; Source: Commission on Accreditation of Rehabilitation Facilities
	Member of Council of Teaching Hospital of the Association of American Medical Colleges (COTH)		1=yes, 2=no; Source: Association of American Medical Colleges
	Medicare certification by the U.S. Department of Health and Human Services		1=yes, 2=no; Source: Centers for Medicare and Medicaid Services
	Accreditation by Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Association		1=yes, 2=no; Source: Healthcare Facilities Accreditation Program
	Internship approved by American Osteopathic Association		1=yes, 2=no; Source: American Osteopathic Association
	Residency approved by American Osteopathic Association		1=yes, 2=no; Source: American Osteopathic Association
	Catholic church operated		1=yes, 2=no
	Critical Access Hospital (CAH)		1=yes, 2=no; Source: Centers for Medicare and Medicaid Services
	Rural Referral Center (RRCTR)		1=yes, 2=no; Source: Centers for Medicare and Medicaid Services
	Sole Community Provider (SCPROV)		1=yes, 2=no; Source: Centers for Medicare and Medicaid Services
	DNV Healthcare Accreditation		1=yes, 2=no; Source: DNV Healthcare

	Database Description Document	
	FY 2015 Edition	
	Center for Improvement in Healthcare Quality (CIHQ) accreditation	1=yes, 2=no; Source: Center for Improvement in Healthcare Quality
ESTIMATION CODES (refer to Appendix H for further explanation)		0=reported, 1=estimated, 2=expanded
	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	
	Total facility employee benefits	
	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 nursing assistive personnel	
	Full time radiology technicians	
	Full time laboratory technicians	
	Full time pharmacists licensed	
	Full time pharmacists technicians	
	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 nursing assistive personnel	
	Part time radiology technicians	
	Part time laboratory technicians	
	Part time pharmacists licensed	
	Part time pharmacists technicians	
	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	
	Gross patient revenue, Medicare	
	Net patient revenue Medicare	
	Gross patient revenue, other government	
	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, 3rd party	
	Net patient revenue, 3rd 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	

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
1	ID	NA	7	1	7	AHA Identification Number		as15dem	
	REG	NA	1	2	2	AHA Region Code		as15dem	
	STCD	NA	2	2	3	AHA State Code		as15dem	See Appendix C - Census Divisions and State Codes
	HOSPN	NA	4	4	7	AHA Hospital Number		as15dem	
2	DTBEG	N	10	8	17	Beginning of reporting period	A.1.	as15dem	MM/DD/YYYY
	DBEGM	N	2	8	9	Reporting Period Beginning Month		as15dem	
	DBEGD	N	2	11	12	Reporting Period Beginning Day		as15dem	
	DBEGY	N	4	14	17	Reporting Period Beginning Year		as15dem	
3	DTEND	N	10	18	27	End of reporting period	A.1.	as15dem	MM/DD/YYYY
	DENDM	N	2	18	19	Reporting Period End Month		as15dem	
	DENDD	N	2	21	22	Reporting Period End Day		as15dem	
	DENDY	N	4	24	27	Reporting Period End Year		as15dem	
4	DCOV	NA	3	28	30	Days open during reporting period	A.2.b.	as15dem	000 for non-reporters
5	FYR	N	1	31	31	Was the hospital in operation 12 full months to the end of the reporting period?	A.2.a.	as15dem	1=yes, 2=less than or more than full year.
6	FISYR	N	10	32	41	Beginning date of fiscal year	A.3.	as15dem	MM/DD/YYYY
	FISM	N	2	32	33	Fiscal Year Beginning Month		as15dem	
	FISD	N	2	35	36	Fiscal Year Beginning Day		as15dem	
	FISY	N	4	38	41	Fiscal Year Beginning Year		as15dem	
7	CNTRL	NA	2	42	43	Control Code – type of authority responsible for establishing policy concerning overall operation of the hospital	B.1.	as15dem	See Appendix A - Control Code Descriptions
8	SERV	NA	2	44	45	Service Code – category best describing the hospital or the type of service provided to the majority of admissions	B.2.	as15dem	See Appendix B - Primary Service Code Descriptions
9	SERVOTH	N	100	46	145	Special Service description		as15dem	Only if Service Code is 49 or 59
10	RADMCHI	N	1	146	146	Does the hospital restrict admissions primarily to children?	B.3.a.	as15dem	1=yes, 0=no
11	HSACODE	NA	5	147	151	Health Service Area Code - Dartmouth		as15dem	
12	HSANAME	NA	30	152	181	Health Service Area Name - Dartmouth		as15dem	
13	HRRCODE	NA	3	182	184	Health Referral Region Code - Dartmouth		as15dem	
14	HRRNAME	NA	30	185	214	Health Referral Region Name - Dartmouth		as15dem	
15	MTYPE	NA	2	215	216	Hospital type code		as15dem	Y=AHA registered hospital, N=not a registered hospital. Source: AHA Membership.

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
16	LOS	NA	1	217	217	Short-term, long-term classification code		as15dem	1=short-term, 2=long-term, Source: AHA Membership
17	MNAME	NA	100	218	317	Hospital name		as15dem	Source: AHA Membership
18	MADMIN	NA	150	318	467	Name of chief administrator		as15dem	Source: AHA Membership
19	MLOCADDR	NA	60	468	527	Street address		as15dem	Source: AHA Membership
20	MLOCCITY	NA	30	528	557	City		as15dem	Source: AHA Membership
21	MLOCSTCD	NA	2	558	559	State Code		as15dem	See Appendix C - Census Divisions and State Codes
22	MLOCZIP	NA	10	560	569	ZIP code		as15dem	Source: AHA Membership
23	MSTATE	NA	2	570	571	Hospital, 2-letter state abbreviation		as15dem	Source: AHA Membership
24	AREA	NA	3	572	574	Area code		as15dem	Source: AHA Membership
25	TELNO	NA	7	575	581	Local telephone number		as15dem	Source: AHA Membership
26	RESP	NA	1	582	582	Response code		as15dem	1=yes, 2=no
27	CHC	NA	1	583	583	Community hospital code (as defined by AHA membership)		as15dem	1=community hospital, 2=not a community hospital
28	BSC	NA	1	584	584	Bed size code		as15dem	See Appendix D - Bed Size Codes
29	MHSMEMB	N	1	585	585	System member		as15dem	If SYSID is not blank then MHSMEMB = 1
30	SUBS	N	1	586	586	Does the hospital itself operate subsidiary corporations?	B.3.b.	as15dem	1=yes, 0=no
31	MNGT	N	1	587	587	Is the hospital contract managed?	B.3.c.	as15dem	1=yes, 0=no
32	MNGTNAME	NA	100	588	687	Management organization name	B.3.c.	as15dem	
33	MNGTCITY	NA	30	688	717	Management organization city	B.3.c.	as15dem	
34	MNGTSTCD	NA	2	718	719	Management organization state abbreviation	B.3.c.	as15dem	
35	NETWRK	N	1	720	720	Is the hospital a participant in a network?	B.3.d.	as15dem	1=yes, 0=no
36	NETNAME	NA	100	721	820	Network name	B.3.d.	as15dem	
37	NETCT	NA	30	821	850	Network city	B.3.d.	as15dem	
38	NETSC	NA	2	851	852	Network state	B.3.d.	as15dem	
39	NETPHONE	NA	10	853	862	Network, concatenated phone	B.3.d.	as15dem	
40	GROUP	N	1	863	863	Does the hospital participate in a group purchasing agreement?	E.2.	as15dem	1=yes, 0=no
41	GPONAME	N	100	864	963	Group purchasing organization name	E.2.	as15dem	
42	GPOCITY	N	30	964	993	Group purchasing organization city	E.2.	as15dem	
43	GPOST	N	2	994	995	Group purchasing organization state	E.2.	as15dem	
44	SUPLY	N	1	996	996	Supplies purchased directly through distributor	E.3.	as15dem	1=yes, 0=no
45	SUPNM	N	100	997	1096	Distributor's name	E.3.	as15dem	Literal Description
46	PHYGP	N	1	1097	1097	Is hospital owned in whole or in part by physicians or a physician group?	B.3.e.	as15dem	1=yes, 0=no
47	LTCHF	N	1	1098	1098	Freestanding LTCH	B.3.f.	as15dem	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
48	LTCHC	N	1	1099	1099	LTCH arranged within a general acute care hospital	B.3.f.	as15dem	1=yes, 0=no
49	LTNM	N	100	1100	1199	If arranged in a general acute care hospital, what is host hospital's name?	B.3.f.	as15dem	Literal Description
50	LTCT	N	30	1200	1229	Host hospital's city	B.3.f.	as15dem	
51	LTST	N	2	1230	1231	Host hospital's state	B.3.f.	as15dem	
52	NPINUM	N	10	1232	1241	10 Digit NPI number		as15dem	
53	CLUSTER	NA	1	1242	1242	AHA System Cluster Code		as15dem	See Appendix G - Cluster Codes
54	SYSID	NA	4	1243	1246	Health care system ID		as15dem	AHA Health Care System Identifier unique values (last four digits)
55	SYSNAME	NA	100	1247	1346	System name		as15dem	Source: AHA Membership
56	SYSADDR	NA	60	1347	1406	System address		as15dem	Source: AHA Membership
57	SYSCITY	NA	30	1407	1436	System city		as15dem	Source: AHA Membership
58	SYSST	NA	2	1437	1438	System state		as15dem	Source: AHA Membership
59	SYSZIP	NA	10	1439	1448	System ZIP code		as15dem	Source: AHA Membership
60	SYSAREA	NA	3	1449	1451	System area code		as15dem	Source: AHA Membership
61	SYSTELN	NA	8	1452	1459	System telephone number		as15dem	Source: AHA Membership
62	SYSTEM_PRIMARY_CONTACT		30	1460	1489	System primary contact		as15dem	Source: AHA Membership
63	SYSTITLE	NA	100	1490	1589	System contact's title		as15dem	Source: AHA Membership
64	COMMTY	NA	1	1590	1590	Community Hospital flag - to foot to *AHA Hospital Statistics™*		as15dem	Y=community hospital as defined in *AHA Hospital Statistics™*, N=not a community hospital
65	MCRNUM	NA	6	1591	1596	Medicare Provider ID		as15dem	Sources: Centers for Medicare and Medicaid and AHA Membership
66	LAT	NA	10	1597	1606	Hospital, Latitude		as15dem	Source: Federal Emergency Management Agency
67	LONG	NA	10	1607	1616	Hospital, Longitude		as15dem	Source: Federal Emergency Management Agency
68	CNTYNAME	NA	60	1617	1676	County Name, State Abbreviation		as15dem	
69	CBSANAME	NA	60	1677	1736	Core Based Statistical Area Name, State Abbreviation		as15dem	Source: U.S. Census Bureau
70	CBSATYPE	NA	8	1737	1744	Core-Based Statistical Area Type		as15dem	Metro, Micro, Rural; Source: U.S. Census Bureau (*see 'Census Division Name'* for Census Bureau Division names*)*
71	CBSACODE	NA	5	1745	1749	Core-Based Statistical Area Code		as15dem	Source: U.S. Census Bureau (*see 'Census Division Code'* for Census Bureau Division codes)
72	DIVNAME	NA	60	1750	1809	Metropolitan Division name		as15dem	Source: U.S. Census Bureau
73	DIVCODE	NA	5	1810	1814	Metropolitan Division code		as15dem	Source: U.S. Census Bureau
74	CSANAME	NA	60	1815	1874	Combined Statistical Area name		as15dem	Source: U.S. Census Bureau

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
75	CSACODE	NA	3	1875	1877	Combined Statistical Area code		as15dem	Source: U.S. Census Bureau
76	MCNTYCD	NA	3	1878	1880	Modified FIPS County Code		as15dem	AHA derived code
77	FCOUNTY	NA	5	1881	1885	FIPS State and County Code		as15dem	Source: U.S. Census Bureau
78	FSTCD	NA	2	1886	1887	FIPS State code		as15dem	Source: U.S. Census Bureau State code
79	FCNTYCD	NA	3	1888	1890	FIPS County code		as15dem	Source: U.S. Census Bureau County code
80	CITYRK	NA	3	1891	1893	Ranking of 100 largest cities		as15dem	See Appendix F - City Rank Code
81	MAPP1	NA	1	1894	1894	Accreditation by The Joint Commission		as15dem	1=yes, 2=no; Source: The Joint Commission
82	MAPP2	NA	1	1895	1895	Cancer program approved by American College of Surgeons		as15dem	1=yes, 2=no; Source: American College of Surgeons, Commission on Cancer
83	MAPP3	NA	1	1896	1896	Participating site recognized for one or more Accreditation Council for Graduate Medical Education accredited programs		as15dem	1=yes, 2=no; Source: Accreditation Council of Graduate Medical Education (ACGME)
84	MAPP5	NA	1	1897	1897	Medical school affiliation reported to American Medical Association		as15dem	1=yes, 2=no; Source: American Medical Association
85	MAPP7	NA	1	1898	1898	Accreditation by Commission on Accreditation of Rehabilitation Facilities (CARF)		as15dem	1=yes, 2=no; Source: Commission on Accreditation of Rehabilitation Facilities
86	MAPP8	NA	1	1899	1899	Member of Council of Teaching Hospital of the Association of American Medical Colleges (COTH)		as15dem	1=yes, 2=no; Source: Association of American Medical Colleges
87	MAPP10	NA	1	1900	1900	Medicare certification by the U.S. Department of Health and Human Services		as15dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
88	MAPP11	NA	1	1901	1901	Accreditation by Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Association.		as15dem	1=yes, 2=no; Source: Healthcare Facilities Accreditation Program
89	MAPP12	NA	1	1902	1902	Internship approved by American Osteopathic Association		as15dem	1=yes, 2=no; Source: American Osteopathic Association
90	MAPP13	NA	1	1903	1903	Residency approved by American Osteopathic Association		as15dem	1=yes, 2=no; Source: American Osteopathic Association
91	MAPP16	NA	1	1904	1904	Catholic church operated		as15dem	1=yes, 2=no
92	MAPP18	NA	1	1905	1905	Critical Access Hospital		as15dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
93	MAPP19	NA	1	1906	1906	Rural Referral Center		as15dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
94	MAPP20	NA	1	1907	1907	Sole Community Provider		as15dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
95	MAPP21	NA	1	1908	1908	DNV Healthcare Accreditation		as15dem	1=yes, 2=no; Source: DNV Healthcare
96	MAPP22	NA	1	1909	1909	Center for Improvement in Healthcare Quality accreditation		as15dem	1=yes, 2=no; Source: Center for Improvement in Healthcare Quality

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
97	AHAMBR	NA	1	1910	1910	AHA Membership Flag		as15dem	1=yes, 0=no
98	SNT	N	1	1911	1911	Does your hospital provide services through one or more satellite facilities?	E.1.	as15dem	1=yes, 0=no
99	SUNITS	N	1	1912	1912	Does the hospital maintain a separate nursing home type of long-term care unit?		as15dem	1=yes, 0=no
100	IPAHOS	N	1	1913	1913	Independent practice association - hospital	C.102.a.	as15dem	1=yes, 0=no
101	IPASYS	N	1	1914	1914	Independent practice association - health system	C.102.a.	as15dem	1=yes, 0=no
102	IPANET	N	1	1915	1915	Independent practice association - network	C.102.a.	as15dem	1=yes, 0=no
103	GPWWHOS	N	1	1916	1916	Group practice without walls - hospital	C.102.b.	as15dem	1=yes, 0=no
104	GPWWSYS	N	1	1917	1917	Group practice without walls - health system	C.102.b.	as15dem	1=yes, 0=no
105	GPWWNET	N	1	1918	1918	Group practice without walls - network	C.102.b.	as15dem	1=yes, 0=no
106	OPHOHOS	N	1	1919	1919	Open physician-hospital organization - hospital	C.102.c.	as15dem	1=yes, 0=no
107	OPHOSYS	N	1	1920	1920	Open physician-hospital organization - health system	C.102.c.	as15dem	1=yes, 0=no
108	OPHONET	N	1	1921	1921	Open physician-hospital organization - network	C.102.c.	as15dem	1=yes, 0=no
109	CPHOHOS	N	1	1922	1922	Closed physician-hospital organization - hospital	C.102.d.	as15dem	1=yes, 0=no
110	CPHOSYS	N	1	1923	1923	Closed physician-hospital organization - health system	C.102.d.	as15dem	1=yes, 0=no
111	CPHONET	N	1	1924	1924	Closed physician-hospital organization - network	C.102.d.	as15dem	1=yes, 0=no
112	MSOHOS	N	1	1925	1925	Management service organization - hospital	C.102.e.	as15dem	1=yes, 0=no
113	MSOSYS	N	1	1926	1926	Management service organization - health system	C.102.e.	as15dem	1=yes, 0=no
114	MSONET	N	1	1927	1927	Management service organization - network	C.102.e.	as15dem	1=yes, 0=no
115	ISMHOS	N	1	1928	1928	Integrated salary model - hospital	C.102.f.	as15dem	1=yes, 0=no
116	ISMSYS	N	1	1929	1929	Integrated salary model - health system	C.102.f.	as15dem	1=yes, 0=no
117	ISMNET	N	1	1930	1930	Integrated salary model - network	C.102.f.	as15dem	1=yes, 0=no
118	EQMODHOS	N	1	1931	1931	Equity model - hospital	C.102.g.	as15dem	1=yes, 0=no
119	EQMODSYS	N	1	1932	1932	Equity model - health system	C.102.g.	as15dem	1=yes, 0=no
120	EQMODNET	N	1	1933	1933	Equity model - network	C.102.g.	as15dem	1=yes, 0=no
121	FOUNDHOS	N	1	1934	1934	Foundation - hospital	C.102.h.	as15dem	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
122	FOUNDSYS	N	1	1935	1935	Foundation - health system	C.102.h.	as15dem	1=yes, 0=no
123	FOUNDNET	N	1	1936	1936	Foundation - network	C.102.h.	as15dem	1=yes, 0=no
124	PHYOTH	N	100	1937	2036	Other, please specify	C.102.i.	as15dem	Literal Description
125	PHYHOS	N	1	2037	2037	Other - hospital	C.102.i.	as15dem	1=yes, 0=no
126	PHYSYS	N	1	2038	2038	Other - health system	C.102.i.	as15dem	1=yes, 0=no
127	PHYNET	N	1	2039	2039	Other - network	C.102.i.	as15dem	1=yes, 0=no
128	IPHMOHOS	N	1	2040	2040	Health maintenance organization (HMO) - hospital	C.107.a.	as15dem	1=yes, 0=no
129	IPHMOSYS	N	1	2041	2041	Health maintenance organization (HMO) - health system	C.107.a.	as15dem	1=yes, 0=no
130	IPHMONET	N	1	2042	2042	Health maintenance organization (HMO) - network	C.107.a.	as15dem	1=yes, 0=no
131	IPHMOVEN	N	1	2043	2043	Health maintenance organization (HMO) - joint venture	C.107.a.	as15dem	1=yes, 0=no
132	IPPPOHOS	N	1	2044	2044	Preferred provider organization (PPO) - hospital	C.107.b.	as15dem	1=yes, 0=no
133	IPPPOSYS	N	1	2045	2045	Preferred provider organization (PPO) - health system	C.107.b.	as15dem	1=yes, 0=no
134	IPPPONET	N	1	2046	2046	Preferred provider organization (PPO) - network	C.107.b.	as15dem	1=yes, 0=no
135	IPPPOVEN	N	1	2047	2047	Preferred provider organization (PPO) - joint venture	C.107.b.	as15dem	1=yes, 0=no
136	IPFEEHOS	N	1	2048	2048	Indemnity fee for service plan - hospital	C.107.c.	as15dem	1=yes, 0=no
137	IPFEESYS	N	1	2049	2049	Indemnity fee for service plan - health system	C.107.c.	as15dem	1=yes, 0=no
138	IPFEENET	N	1	2050	2050	Indemnity fee for service plan - network	C.107.c.	as15dem	1=yes, 0=no
139	IPFEEVEN	N	1	2051	2051	Indemnity fee for service plan - joint venture	C.107.c.	as15dem	1=yes, 0=no
140	HMO86	N	1	2052	2052	Does the hospital have a formal written contract with an HMO?	C.108.a.	as15dem	1=yes, 0=no
141	HMOCON	N	4	2053	2056	Number of HMO contracts	C.108.b.	as15dem	
142	PPO86	N	1	2057	2057	Does the hospital have a formal written contract with a PPO?	C.108.c.	as15dem	1=yes, 0=no
143	PPOCON	N	4	2058	2061	Number of PPO contracts	C.108.d.	as15dem	
144	CAPCON94	N	1	2062	2062	Does the hospital contract directly with employers or a coalition of employers to provide care on a capitated, predetermined or shared risk basis?	C.111	as15dem	1=yes, 0=no
145	CAPCOV	N	8	2063	2070	Number of lives covered on a capitated basis	C.112.	as15dem	

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
146	IPAP	N	8	2071	2078	Number of physicians, Independent Practice Association	C.102.a.	as15dem	
147	GPWP	N	8	2079	2086	Number of physicians, Group Practice without walls	C.102.b.	as15dem	
148	OPHP	N	8	2087	2094	Number of physicians, Open Physician-Hospital Organization (PHO)	C.102.c.	as15dem	
149	CPHP	N	8	2095	2102	Number of physicians, Closed Physician-Hospital Organization (PHO)	C.102.d.	as15dem	
150	MSOP	N	8	2103	2110	Number of physicians, Management Service Organization (MSO)	C.102.e.	as15dem	
151	ISMP	N	8	2111	2118	Number of physicians, Integrated Salary Model	C.102.f.	as15dem	
152	EQMP	N	8	2119	2126	Number of physicians, Equity Model	C.102.g.	as15dem	
153	FNDP	N	8	2127	2134	Number of physicians, Foundation	C.102.h.	as15dem	
154	PHYP	N	8	2135	2142	Number of physicians, Other	C.102.i.	as15dem	
155	FTMT	N	8	2143	2150	Total physicians engaged in arrangement with hospital	C.102.b.	as15dem	Number of physicians
156	JNTPH	N	1	2151	2151	Does your hospital participate in any joint venture arrangements with physicians or physician groups?	C.103.a.	as15dem	1=yes, 0=no
157	JNLS	N	1	2152	2152	Limited Service Hospital	C.103.b.a.	as15dem	1=yes, 0=no
158	JNTAMB	N	1	2153	2153	Ambulatory Surgical Centers	C.103.b.b.	as15dem	1=yes, 0=no
159	JNTCTR	N	1	2154	2154	Imaging Centers	C.103.b.c.	as15dem	1=yes, 0=no
160	JNTOTH	N	1	2155	2155	Other	C.103.b.d.	as15dem	1=yes, 0=no
161	LSHTXT	N	100	2156	2255	Joint other Description	C.103.b.d. other	as15dem	Literal Description
162	JNTLSC	N	1	2256	2256	Cardiac - Limited Service Hospital	C.103.c.a.	as15dem	1=yes, 0=no
163	JNTLSO	N	1	2257	2257	Orthopedic - Limited Service Hospital	C.103.c.b.	as15dem	1=yes, 0=no
164	JNTLSS	N	1	2258	2258	Surgical - Limited Service Hospital	C.103.c.c.	as15dem	1=yes, 0=no
165	JNTLST	N	1	2259	2259	Other - Limited Service Hospital	C.103.c.d.	as15dem	1=yes, 0=no
166	JNTTXT	N	100	2260	2359	Limited Service Hospital other description	C.103.c.d other	as15dem	Literal Description
167	JNTMD	N	1	2360	2360	Does hospital participate in joint venture arrangements with organizations other than physician groups?	C.103.d.	as15dem	1=yes, 0=no
168	MEDHME	N	1	2361	2361	Does your hospital have an established medical home program?	C.105	as15dem	1=yes, 0=no
169	**BNDPAY**	**N**	**1**	**2362**	**2362**	**Does your hospital participate in a bundled payment program?**	**C.106**	**as15dem**	**1=yes, 0=no**

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
170	EHLTH	N	1	2362	2362	Does your hospital have an electronic health record?	D.9.e.	as15dem	0=No; 1=Yes, partially implemented; 2=Yes, fully implemented
171	GENBD	N	4	2363	2366	General medical and surgical (adult) beds	C.1.	as15svc1	
172	PEDBD	N	4	2367	2370	General medical and surgical (pediatric) beds	C.2.	as15svc1	
173	OBLEV	N	1	2371	2371	Obstetric unit care level	C.3.	as15svc1	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
174	OBBD	N	4	2372	2375	Obstetric care beds	C.3.	as15svc1	
175	MSICBD	N	4	2376	2379	Medical/surgical intensive care beds	C.4.	as15svc1	
176	CICBD	N	4	2380	2383	Cardiac intensive care beds	C.5.	as15svc1	
177	NICBD	N	4	2384	2387	Neonatal intensive care beds	C.6.	as15svc1	
178	NINTBD	N	4	2388	2391	Neonatal intermediate care beds	C.7.	as15svc1	
179	PEDICBD	N	4	2392	2395	Pediatric intensive care beds	C.8.	as15svc1	
180	BRNBD	N	4	2396	2399	Burn care beds	C.9.	as15svc1	
181	SPCICBD	N	4	2400	2403	Other special care beds	C.10.	as15svc1	
182	OSPOTH	N	100	2404	2503	Other special care beds, description	C.10.	as15svc1	
183	OTHICBD	N	4	2504	2507	Other intensive care beds	C.11.	as15svc1	
184	OTHIC	N	100	2508	2607	Other intensive care beds, description	C.11.	as15svc1	
185	REHABBD	N	4	2608	2611	Physical rehabilitation care beds	C.12.	as15svc1	
186	ALCHBD	N	4	2612	2615	Alcohol/drug abuse or dependency inpatient care beds	C.13.	as15svc1	
187	PSYBD	N	4	2616	2619	Psychiatric care beds	C.14.	as15svc1	
188	SNBD88	N	4	2620	2623	Skilled nursing care beds	C.15.	as15svc1	
189	ICFBD88	N	4	2624	2627	Intermediate nursing care beds	C.16.	as15svc1	
190	ACULTBD	N	4	2628	2631	Acute long-term care beds	C.17.	as15svc1	
191	OTHLBD94	N	4	2632	2635	Other long-term care beds	C.18.	as15svc1	
192	OTHBD94	N	4	2636	2639	Other care beds	C.19.	as15svc1	
193	OTHOTH	N	100	2640	2739	Other care beds, description	C.19.	as15svc1	
194	HOSPBD	N	4	2740	2743	Total hospital beds (calculated)		as15svc1	Calculated Field: Sum of all individual bed counts
195	GENHOS	N	1	2744	2744	General medical and surgical care (adult) - hospital	C.1.	as15svc1	1=yes, 0=no
196	GENSYS	N	1	2745	2745	General medical and surgical care (adult) - health system	C.1.	as15svc1	1=yes, 0=no
197	GENVEN	N	1	2746	2746	General medical and surgical care (adult) - joint venture	C.1.	as15svc1	1=yes, 0=no
198	PEDHOS	N	1	2747	2747	General medical and surgical care (pediatric) - hospital	C.2.	as15svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
199	PEDSYS	N	1	2748	2748	General medical and surgical care (pediatric) - health system	C.2.	as15svc1	1=yes, 0=no
200	PEDVEN	N	1	2749	2749	General medical and surgical care (pediatric) - joint venture	C.2.	as15svc1	1=yes, 0=no
201	OBHOS	N	1	2750	2750	Obstetrics care - hospital	C.3.	as15svc1	1=yes, 0=no
202	OBSYS	N	1	2751	2751	Obstetrics care - health system	C.3.	as15svc1	1=yes, 0=no
203	OBVEN	N	1	2752	2752	Obstetrics care - joint venture	C.3.	as15svc1	1=yes, 0=no
204	MSICHOS	N	1	2753	2753	Medical/surgical intensive care - hospital	C.4.	as15svc1	1=yes, 0=no
205	MSICSYS	N	1	2754	2754	Medical/surgical intensive care - health system	C.4.	as15svc1	1=yes, 0=no
206	MSICVEN	N	1	2755	2755	Medical/surgical intensive care - joint venture	C.4.	as15svc1	1=yes, 0=no
207	CICHOS	N	1	2756	2756	Cardiac intensive care - hospital	C.5.	as15svc1	1=yes, 0=no
208	CICSYS	N	1	2757	2757	Cardiac intensive care - health system	C.5.	as15svc1	1=yes, 0=no
209	CICVEN	N	1	2758	2758	Cardiac intensive care - joint venture	C.5.	as15svc1	1=yes, 0=no
210	NICHOS	N	1	2759	2759	Neonatal intensive care - hospital	C.6.	as15svc1	1=yes, 0=no
211	NICSYS	N	1	2760	2760	Neonatal intensive care - health system	C.6.	as15svc1	1=yes, 0=no
212	NICVEN	N	1	2761	2761	Neonatal intensive care - joint venture	C.6.	as15svc1	1=yes, 0=no
213	NINTHOS	N	1	2762	2762	Neonatal intermediate care - hospital	C.7.	as15svc1	1=yes, 0=no
214	NINTSYS	N	1	2763	2763	Neonatal intermediate care - health system	C.7.	as15svc1	1=yes, 0=no
215	NINTVEN	N	1	2764	2764	Neonatal intermediate care - joint venture	C.7.	as15svc1	1=yes, 0=no
216	PEDICHOS	N	1	2765	2765	Pediatric intensive care - hospital	C.8.	as15svc1	1=yes, 0=no
217	PEDICSYS	N	1	2766	2766	Pediatric intensive care - health system	C.8.	as15svc1	1=yes, 0=no
218	PEDICVEN	N	1	2767	2767	Pediatric intensive care - joint venture	C.8.	as15svc1	1=yes, 0=no
219	BRNHOS	N	1	2768	2768	Burn care - hospital	C.9.	as15svc1	1=yes, 0=no
220	BRNSYS	N	1	2769	2769	Burn care - health system	C.9.	as15svc1	1=yes, 0=no
221	BRNVEN	N	1	2770	2770	Burn care - joint venture	C.9.	as15svc1	1=yes, 0=no
222	SPCICHOS	N	1	2771	2771	Other special care - hospital	C.10.	as15svc1	1=yes, 0=no
223	SPCICSYS	N	1	2772	2772	Other special care - health system	C.10.	as15svc1	1=yes, 0=no
224	SPCICVEN	N	1	2773	2773	Other special care - joint venture	C.10.	as15svc1	1=yes, 0=no
225	OTHIHOS	N	1	2774	2774	Other intensive care - hospital	C.11.	as15svc1	1=yes, 0=no
226	OTHISYS	N	1	2775	2775	Other intensive care - health system	C.11.	as15svc1	1=yes, 0=no
227	OTHIVEN	N	1	2776	2776	Other intensive care - joint venture	C.11.	as15svc1	1=yes, 0=no
228	REHABHOS	N	1	2777	2777	Physical rehabilitation care - hospital	C.12.	as15svc1	1=yes, 0=no
229	REHABSYS	N	1	2778	2778	Physical rehabilitation care - health system	C.12.	as15svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
230	REHABVEN	N	1	2779	2779	Physical rehabilitation care - joint venture	C.12.	as15svc1	1=yes, 0=no
231	ALCHHOS	N	1	2780	2780	Alcohol/drug abuse or dependency inpatient care - hospital	C.13.	as15svc1	1=yes, 0=no
232	ALCHSYS	N	1	2781	2781	Alcohol/drug abuse or dependency inpatient care - health system	C.13.	as15svc1	1=yes, 0=no
233	ALCHVEN	N	1	2782	2782	Alcohol/drug abuse or dependency inpatient care - joint venture	C.13.	as15svc1	1=yes, 0=no
234	PSYHOS	N	1	2783	2783	Psychiatric care - hospital	C.14.	as15svc1	1=yes, 0=no
235	PSYSYS	N	1	2784	2784	Psychiatric care - health system	C.14.	as15svc1	1=yes, 0=no
236	PSYVEN	N	1	2785	2785	Psychiatric care - joint venture	C.14.	as15svc1	1=yes, 0=no
237	SNHOS	N	1	2786	2786	Skilled nursing care - hospital	C.15.	as15svc1	1=yes, 0=no
238	SNSYS	N	1	2787	2787	Skilled nursing care - health system	C.15.	as15svc1	1=yes, 0=no
239	SNVEN	N	1	2788	2788	Skilled nursing care - joint venture	C.15.	as15svc1	1=yes, 0=no
240	ICFHOS	N	1	2789	2789	Intermediate nursing care - hospital	C.16.	as15svc1	1=yes, 0=no
241	ICFSYS	N	1	2790	2790	Intermediate nursing care - health system	C.16.	as15svc1	1=yes, 0=no
242	ICFVEN	N	1	2791	2791	Intermediate nursing care - joint venture	C.16.	as15svc1	1=yes, 0=no
243	ACUHOS	N	1	2792	2792	Acute long-term care - hospital	C.17.	as15svc1	1=yes, 0=no
244	ACUSYS	N	1	2793	2793	Acute long-term care - health system	C.17.	as15svc1	1=yes, 0=no
245	ACUVEN	N	1	2794	2794	Acute long-term care - joint venture	C.17.	as15svc1	1=yes, 0=no
246	OTHLTHOS	N	1	2795	2795	Other long-term care - hospital	C.18.	as15svc1	1=yes, 0=no
247	OTHLTSYS	N	1	2796	2796	Other long-term care - health system	C.18.	as15svc1	1=yes, 0=no
248	OTHLTVEN	N	1	2797	2797	Other long-term care - joint venture	C.18.	as15svc1	1=yes, 0=no
249	OTHCRHOS	N	1	2798	2798	Other care - hospital	C.19.	as15svc1	1=yes, 0=no
250	OTHCRSYS	N	1	2799	2799	Other care - health system	C.19.	as15svc1	1=yes, 0=no
251	OTHCRVEN	N	1	2800	2800	Other care - joint venture	C.19.	as15svc1	1=yes, 0=no
252	ADULTHOS	N	1	2801	2801	Adult day care program - hospital	C.20.	as15svc1	1=yes, 0=no
253	ADULTSYS	N	1	2802	2802	Adult day care program - health system	C.20.	as15svc1	1=yes, 0=no
254	ADULTVEN	N	1	2803	2803	Adult day care program - joint venture	C.20.	as15svc1	1=yes, 0=no
255	AIRBHOS	N	1	2804	2804	Airborne infection isolation room - hospital	C.21.	as15svc1	1=yes, 0=no
256	AIRBSYS	N	1	2805	2805	Airborne infection isolation room - health system	C.21.	as15svc1	1=yes, 0=no
257	AIRBVEN	N	1	2806	2806	Airborne infection isolation room - joint venture	C.21.	as15svc1	1=yes, 0=no
258	AIRBROOM	N	4	2807	2810	Number of airborne infection isolation rooms	C.21.	as15svc1	Number of rooms
259	ALCOPHOS	N	1	2811	2811	Alcohol/drug abuse or dependency outpatient services - hospital	C.22.	as15svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
260	ALCOPSYS	N	1	2812	2812	Alcohol/drug abuse or dependency outpatient services - health system	C.22.	as15svc1	1=yes, 0=no
261	ALCOPVEN	N	1	2813	2813	Alcohol/drug abuse or dependency outpatient services - joint venture	C.22.	as15svc1	1=yes, 0=no
262	ALZHOS	N	1	2814	2814	Alzheimer Center - hospital	C.23.	as15svc1	1=yes, 0=no
263	ALZSYS	N	1	2815	2815	Alzheimer Center - health system	C.23.	as15svc1	1=yes, 0=no
264	ALZVEN	N	1	2816	2816	Alzheimer Center - joint venture	C.23.	as15svc1	1=yes, 0=no
265	AMBHOS	N	1	2817	2817	Ambulance services - hospital	C.24.	as15svc1	1=yes, 0=no
266	AMBSYS	N	1	2818	2818	Ambulance services - health system	C.24.	as15svc1	1=yes, 0=no
267	AMBVEN	N	1	2819	2819	Ambulance services - joint venture	C.24.	as15svc1	1=yes, 0=no
268	AMBSHOS	N	1	2820	2820	Ambulatory surgery center - hospital	C.25.	as15svc1	1=yes, 0=no
269	AMBSSYS	N	1	2821	2821	Ambulatory surgery center - health system	C.25.	as15svc1	1=yes, 0=no
270	AMBSVEN	N	1	2822	2822	Ambulatory surgery center - joint venture	C.25.	as15svc1	1=yes, 0=no
271	ARTHCHOS	N	1	2823	2823	Arthritis treatment center - hospital	C.26.	as15svc1	1=yes, 0=no
272	ARTHCSYS	N	1	2824	2824	Arthritis treatment center - health system	C.26.	as15svc1	1=yes, 0=no
273	ARTHCVEN	N	1	2825	2825	Arthritis treatment center - joint venture	C.26.	as15svc1	1=yes, 0=no
274	ASSTLHOS	N	1	2826	2826	Assisted living services - hospital	C.27.	as15svc1	1=yes, 0=no
275	ASSTLSYS	N	1	2827	2827	Assisted living services - health system	C.27.	as15svc1	1=yes, 0=no
276	ASSTLVEN	N	1	2828	2828	Assisted living services - joint venture	C.27.	as15svc1	1=yes, 0=no
277	AUXHOS	N	1	2829	2829	Auxiliary - hospital	C.28.	as15svc1	1=yes, 0=no
278	AUXSYS	N	1	2830	2830	Auxiliary - health system	C.28.	as15svc1	1=yes, 0=no
279	AUXVEN	N	1	2831	2831	Auxiliary - joint venture	C.28.	as15svc1	1=yes, 0=no
280	BWHTHOS	N	1	2832	2832	Bariatric/weight control services - hospital	C.29.	as15svc1	1=yes, 0=no
281	BWHTSYS	N	1	2833	2833	Bariatric/weight control services - health system	C.29.	as15svc1	1=yes, 0=no
282	BWHTVEN	N	1	2834	2834	Bariatric/weight control services - joint venture	C.29.	as15svc1	1=yes, 0=no
283	BROOMHOS	N	1	2835	2835	Birthing room/LDR room/LDRP room - hospital	C.30.	as15svc1	1=yes, 0=no
284	BROOMSYS	N	1	2836	2836	Birthing room/LDR room/LDRP room - health system	C.30.	as15svc1	1=yes, 0=no
285	BROOMVEN	N	1	2837	2837	Birthing room/LDR room/LDRP room - joint venture	C.30.	as15svc1	1=yes, 0=no
286	BLDOHOS	N	1	2838	2838	Blood Donor Center - hospital	C.31.	as15svc1	1=yes, 0=no
287	BLDOSYS	N	1	2839	2839	Blood Donor Center - health system	C.31.	as15svc1	1=yes, 0=no
288	BLDOVEN	N	1	2840	2840	Blood Donor Center - joint venture	C.31.	as15svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
289	MAMMSHOS	N	1	2841	2841	Breast cancer screening/mammograms - hospital	C.32.	as15svc1	1=yes, 0=no
290	MAMMSSYS	N	1	2842	2842	Breast cancer screening/mammograms - health system	C.32.	as15svc1	1=yes, 0=no
291	MAMMSVEN	N	1	2843	2843	Breast cancer screening/mammograms - joint venture	C.32.	as15svc1	1=yes, 0=no
292	ACARDHOS	N	1	2844	2844	Adult cardiology services - hospital	C.33.a.	as15svc1	1=yes, 0=no
293	ACARDSYS	N	1	2845	2845	Adult cardiology services - health system	C.33.a.	as15svc1	1=yes, 0=no
294	ACARDVEN	N	1	2846	2846	Adult cardiology services - joint venture	C.33.a.	as15svc1	1=yes, 0=no
295	PCARDHOS	N	1	2847	2847	Pediatric cardiology services - hospital	C.33.b.	as15svc1	1=yes, 0=no
296	PCARDSYS	N	1	2848	2848	Pediatric cardiology services - health system	C.33.b.	as15svc1	1=yes, 0=no
297	PCARDVEN	N	1	2849	2849	Pediatric cardiology services - joint venture	C.33.b.	as15svc1	1=yes, 0=no
298	ACLABHOS	N	1	2850	2850	Adult diagnostic catheterization - hospital	C.33.c.	as15svc1	1=yes, 0=no
299	ACLABSYS	N	1	2851	2851	Adult diagnostic catheterization - health system	C.33.c.	as15svc1	1=yes, 0=no
300	ACLABVEN	N	1	2852	2852	Adult diagnostic catheterization - joint venture	C.33.c.	as15svc1	1=yes, 0=no
301	PCLABHOS	N	1	2853	2853	Pediatric diagnostic catheterization - hospital	C.33.d.	as15svc1	1=yes, 0=no
302	PCLABSYS	N	1	2854	2854	Pediatric diagnostic catheterization - health system	C.33.d.	as15svc1	1=yes, 0=no
303	PCLABVEN	N	1	2855	2855	Pediatric diagnostic catheterization - joint venture	C.33.d.	as15svc1	1=yes, 0=no
304	ICLABHOS	N	1	2856	2856	Adult interventional cardiac catheterization - hospital	C.33.e.	as15svc1	1=yes, 0=no
305	ICLABSYS	N	1	2857	2857	Adult interventional cardiac catheterization - health system	C.33.e.	as15svc1	1=yes, 0=no
306	ICLABVEN	N	1	2858	2858	Adult interventional cardiac catheterization - joint venture	C.33.e.	as15svc1	1=yes, 0=no
307	PELABHOS	N	1	2859	2859	Pediatric interventional cardiac catheterization - hospital	C.33.f.	as15svc1	1=yes, 0=no
308	PELABSYS	N	1	2860	2860	Pediatric interventional cardiac catheterization - health system	C.33.f.	as15svc1	1=yes, 0=no
309	PELABVEN	N	1	2861	2861	Pediatric interventional cardiac catheterization - joint venture	C.33.f.	as15svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
310	ADTCHOS	N	1	2862	2862	Adult cardiac surgery - hospital	C.33.g.	as15svc1	1=yes, 0=no
311	ADTCSYS	N	1	2863	2863	Adult cardiac surgery - health system	C.33.g.	as15svc1	1=yes, 0=no
312	ADTCVEN	N	1	2864	2864	Adult cardiac surgery - joint venture	C.33.g.	as15svc1	1=yes, 0=no
313	PEDCSHOS	N	1	2865	2865	Pediatric cardiac surgery - hospital	C.33.h.	as15svc1	1=yes, 0=no
314	PEDCSSYS	N	1	2866	2866	Pediatric cardiac surgery - health system	C.33.h.	as15svc1	1=yes, 0=no
315	PEDCSVEN	N	1	2867	2867	Pediatric cardiac surgery - joint venture	C.33.h.	as15svc1	1=yes, 0=no
316	ADTEHOS	N	1	2868	2868	Adult cardiac electrophysiology-hospital	C.33.i.	as15svc1	1=yes, 0=no
317	ADTESYS	N	1	2869	2869	Adult cardiac electrophysiology-health system	C.33.i.	as15svc1	1=yes, 0=no
318	ADTEVEN	N	1	2870	2870	Adult cardiac electrophysiology-joint venture	C.33.i.	as15svc1	1=yes, 0=no
319	PEDEHOS	N	1	2871	2871	Pediatric cardiac electrophysiology-hospital	C.33.j.	as15svc1	1=yes, 0=no
320	PEDESYS	N	1	2872	2872	Pediatric cardiac electrophysiology-health system	C.33.j.	as15svc1	1=yes, 0=no
321	PEDEVEN	N	1	2873	2873	Pediatric cardiac electrophysiology-joint venture	C.33.j.	as15svc1	1=yes, 0=no
322	CHABHOS	N	1	2874	2874	Cardiac Rehabilitation - hospital	C.33.k.	as15svc1	1=yes, 0=no
323	CHABSYS	N	1	2875	2875	Cardiac Rehabilitation - health system	C.33.k.	as15svc1	1=yes, 0=no
324	CHABVEN	N	1	2876	2876	Cardiac Rehabilitation - joint venture	C.33.k.	as15svc1	1=yes, 0=no
325	CMNGTHOS	N	1	2877	2877	Case Management - hospital	C.34.	as15svc1	1=yes, 0=no
326	CMNGTSYS	N	1	2878	2878	Case Management - health system	C.34.	as15svc1	1=yes, 0=no
327	CMNGTVEN	N	1	2879	2879	Case Management - joint venture	C.34.	as15svc1	1=yes, 0=no
328	CHAPHOS	N	1	2880	2880	Chaplaincy/pastoral care services - hospital	C.35.	as15svc1	1=yes, 0=no
329	CHAPSYS	N	1	2881	2881	Chaplaincy/pastoral care services - health system	C.35.	as15svc1	1=yes, 0=no
330	CHAPVEN	N	1	2882	2882	Chaplaincy/pastoral care services - joint venture	C.35.	as15svc1	1=yes, 0=no
331	CHTHHOS	N	1	2883	2883	Chemotherapy - hospital	C.36.	as15svc1	1=yes, 0=no
332	CHTHSYS	N	1	2884	2884	Chemotherapy - health system	C.36.	as15svc1	1=yes, 0=no
333	CHTHVEN	N	1	2885	2885	Chemotherapy - joint venture	C.36.	as15svc1	1=yes, 0=no
334	CWELLHOS	N	1	2886	2886	Children's wellness program - hospital	C.37.	as15svc1	1=yes, 0=no
335	CWELLSYS	N	1	2887	2887	Children's wellness program - health system	C.37.	as15svc1	1=yes, 0=no
336	CWELLVEN	N	1	2888	2888	Children's wellness program - joint venture	C.37.	as15svc1	1=yes, 0=no
337	CHIHOS	N	1	2889	2889	Chiropractic services - hospital	C.38.	as15svc1	1=yes, 0=no
338	CHISYS	N	1	2890	2890	Chiropractic services - health system	C.38.	as15svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
339	CHIVEN	N	1	2891	2891	Chiropractic services - joint venture	C.38.	as15svc1	1=yes, 0=no
340	COUTRHOS	N	1	2892	2892	Community outreach - hospital	C.39.	as15svc1	1=yes, 0=no
341	COUTRSYS	N	1	2893	2893	Community outreach - health system	C.39.	as15svc1	1=yes, 0=no
342	COUTRVEN	N	1	2894	2894	Community outreach - joint venture	C.39.	as15svc1	1=yes, 0=no
343	COMPHOS	N	1	2895	2895	Complementary and alternative medicine services - hospital	C.40.	as15svc1	1=yes, 0=no
344	COMPSYS	N	1	2896	2896	Complementary and alternative medicine services - health system	C.40.	as15svc1	1=yes, 0=no
345	COMPVEN	N	1	2897	2897	Complementary and alternative medicine services - joint venture	C.40.	as15svc1	1=yes, 0=no
346	CAOSHOS	N	1	2898	2898	Computer assisted orthopedic surgery - hospital	C.41.	as15svc1	1=yes, 0=no
347	CAOSSYS	N	1	2899	2899	Computer assisted orthopedic surgery - health system	C.41.	as15svc1	1=yes, 0=no
348	CAOSVEN	N	1	2900	2900	Computer assisted orthopedic surgery - joint venture	C.41.	as15svc1	1=yes, 0=no
349	CPREVHOS	N	1	2901	2901	Crisis prevention - hospital	C.42.	as15svc1	1=yes, 0=no
350	CPREVSYS	N	1	2902	2902	Crisis prevention - health system	C.42.	as15svc1	1=yes, 0=no
351	CPREVVEN	N	1	2903	2903	Crisis prevention - joint venture	C.42.	as15svc1	1=yes, 0=no
352	DENTSHOS	N	1	2904	2904	Dental services - hospital	C.43.	as15svc1	1=yes, 0=no
353	DENTSSYS	N	1	2905	2905	Dental services - health system	C.43.	as15svc1	1=yes, 0=no
354	DENTSVEN	N	1	2906	2906	Dental services - joint venture	C.43.	as15svc1	1=yes, 0=no
355	EMDEPHOS	N	1	2907	2907	Emergency Department - hospital	C.44.a.	as15svc1	1=yes, 0=no
356	EMDEPSYS	N	1	2908	2908	Emergency Department - health system	C.44.a.	as15svc1	1=yes, 0=no
357	EMDEPVEN	N	1	2909	2909	Emergency Department - joint venture	C.44.a.	as15svc1	1=yes, 0=no
358	PEMERHOS	N	1	2910	2910	Pediatric emergency department - hospital	C.44.b.	as15svc1	1=yes, 0=no
359	PEMERSYS	N	1	2911	2911	Pediatric emergency department - health system	C.44.b.	as15svc1	1=yes, 0=no
360	PEMERVEN	N	1	2912	2912	Pediatric emergency department - joint venture	C.44.b.	as15svc1	1=yes, 0=no
361	FSERHOS	N	1	2913	2913	Freestanding/Satellite Emergency Department - hospital	C.44.c.	as15svc1	1=yes, 0=no
362	FSERSYS	N	1	2914	2914	Freestanding/Satellite Emergency Department - health system	C.44.c.	as15svc1	1=yes, 0=no
363	FSERVEN	N	1	2915	2915	Freestanding/Satellite Emergency Department - joint venture	C.44.c.	as15svc1	1=yes, 0=no
364	FSERYN	N	1	2916	2916	Is the department open 24 hours a day, 7 days a week?	C.44.d.	as15svc1	1=yes, 0=no
365	TRAUMHOS	N	1	2917	2917	Certified trauma center - hospital	C.44.e.	as15svc2	1=yes, 0=no
366	TRAUMSYS	N	1	2918	2918	Certified trauma center - health system	C.44.e.	as15svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
367	TRAUMVEN	N	1	2919	2919	Certified trauma center - joint venture	C.44.e.	as15svc2	1=yes, 0=no
368	TRAUML90	N	1	2920	2920	Level of trauma center	C.44.e.	as15svc2	1=regional resource trauma center, 2=community trauma center, 3=rural trauma center, 4 or greater=other (specific to some states)
369	ENBHOS	N	1	2921	2921	Enabling Services - hospital	C.45.	as15svc2	1=yes, 0=no
370	ENBSYS	N	1	2922	2922	Enabling Services - health system	C.45.	as15svc2	1=yes, 0=no
371	ENBVEN	N	1	2923	2923	Enabling Services - joint venture	C.45.	as15svc2	1=yes, 0=no
372	ENDOCHOS	N	1	2924	2924	Optical Colonoscopy-hospital	C.46.a	as15svc2	1=yes, 0=no
373	ENDOCSYS	N	1	2925	2925	Optical Colonoscopy-health system	C.46.a	as15svc2	1=yes, 0=no
374	ENDOCVEN	N	1	2926	2926	Optical Colonoscopy-joint venture	C.46.a	as15svc2	1=yes, 0=no
375	ENDOUHOS	N	1	2927	2927	Endoscopic ultrasound - hospital	C.46.b.	as15svc2	1=yes, 0=no
376	ENDOUSYS	N	1	2928	2928	Endoscopic ultrasound - health system	C.46.b.	as15svc2	1=yes, 0=no
377	ENDOUVEN	N	1	2929	2929	Endoscopic ultrasound - joint venture	C.46.b.	as15svc2	1=yes, 0=no
378	ENDOAHOS	N	1	2930	2930	Ablation of Barrett's esophagus - hospital	C.46.c.	as15svc2	1=yes, 0=no
379	ENDOASYS	N	1	2931	2931	Ablation of Barrett's esophagus - health system	C.46.c.	as15svc2	1=yes, 0=no
380	ENDOAVEN	N	1	2932	2932	Ablation of Barrett's esophagus - joint venture	C.46.c.	as15svc2	1=yes, 0=no
381	ENDOEHOS	N	1	2933	2933	Esophageal impedance study - hospital	C.46.d.	as15svc2	1=yes, 0=no
382	ENDOESYS	N	1	2934	2934	Esophageal impedance study - health system	C.46.d.	as15svc2	1=yes, 0=no
383	ENDOEVEN	N	1	2935	2935	Esophageal impedance study - joint venture	C.46.d.	as15svc2	1=yes, 0=no
384	ENDORHOS	N	1	2936	2936	Endoscopic retrograde cholangiopancreatography (ERCP) - hospital	C.46.e.	as15svc2	1=yes, 0=no
385	ENDORSYS	N	1	2937	2937	Endoscopic retrograde cholangiopancreatography (ERCP) - health system	C.46.e.	as15svc2	1=yes, 0=no
386	ENDORVEN	N	1	2938	2938	Endoscopic retrograde cholangiopancreatography (ERCP) - joint venture	C.46.e.	as15svc2	1=yes, 0=no
387	ENRHOS	N	1	2939	2939	Enrollment Assistance Program - hospital	C.47.	as15svc2	1=yes, 0=no
388	ENRSYS	N	1	2940	2940	Enrollment Assistance Program - health system	C.47.	as15svc2	1=yes, 0=no
389	ENRVEN	N	1	2941	2941	Enrollment Assistance Program - joint venture	C.47.	as15svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
390	ESWLHOS	N	1	2942	2942	Extracorporeal shock waved lithotripter (ESWL) - hospital	C.48.	as15svc2	1=yes, 0=no
391	ESWLSYS	N	1	2943	2943	Extracorporeal shock waved lithotripter (ESWL) - health system	C.48.	as15svc2	1=yes, 0=no
392	ESWLVEN	N	1	2944	2944	Extracorporeal shock waved lithotripter (ESWL) - joint venture	C.48.	as15svc2	1=yes, 0=no
393	FRTCHOS	N	1	2945	2945	Fertility Clinic - hospital	C.49.	as15svc2	1=yes, 0=no
394	FRTCSYS	N	1	2946	2946	Fertility Clinic - health system	C.49.	as15svc2	1=yes, 0=no
395	FRTCVEN	N	1	2947	2947	Fertility Clinic - joint venture	C.49.	as15svc2	1=yes, 0=no
396	FITCHOS	N	1	2948	2948	Fitness center - hospital	C.50.	as15svc2	1=yes, 0=no
397	FITCSYS	N	1	2949	2949	Fitness center - health system	C.50.	as15svc2	1=yes, 0=no
398	FITCVEN	N	1	2950	2950	Fitness center - joint venture	C.50.	as15svc2	1=yes, 0=no
399	OPCENHOS	N	1	2951	2951	Freestanding outpatient center - hospital	C.51.	as15svc2	1=yes, 0=no
400	OPCENSYS	N	1	2952	2952	Freestanding outpatient center - health system	C.51.	as15svc2	1=yes, 0=no
401	OPCENVEN	N	1	2953	2953	Freestanding outpatient center - joint venture	C.51.	as15svc2	1=yes, 0=no
402	GERSVHOS	N	1	2954	2954	Geriatric services - hospital	C.52.	as15svc2	1=yes, 0=no
403	GERSVSYS	N	1	2955	2955	Geriatric services - health system	C.52.	as15svc2	1=yes, 0=no
404	GERSVVEN	N	1	2956	2956	Geriatric services - joint venture	C.52.	as15svc2	1=yes, 0=no
405	HLTHFHOS	N	1	2957	2957	Health Fair - hospital	C.53.	as15svc2	1=yes, 0=no
406	HLTHFSYS	N	1	2958	2958	Health Fair - health system	C.53.	as15svc2	1=yes, 0=no
407	HLTHFVEN	N	1	2959	2959	Health Fair - joint venture	C.53.	as15svc2	1=yes, 0=no
408	HLTHCHOS	N	1	2960	2960	Community Health Education - hospital	C.54.	as15svc2	1=yes, 0=no
409	HLTHCSYS	N	1	2961	2961	Community Health Education - health system	C.54.	as15svc2	1=yes, 0=no
410	HLTHCVEN	N	1	2962	2962	Community Health Education - joint venture	C.54.	as15svc2	1=yes, 0=no
411	GNTCHOS	N	1	2963	2963	Genetic testing/counseling - hospital	C.55.	as15svc2	1=yes, 0=no
412	GNTCSYS	N	1	2964	2964	Genetic testing/counseling - health system	C.55.	as15svc2	1=yes, 0=no
413	GNTCVEN	N	1	2965	2965	Genetic testing/counseling - joint venture	C.55.	as15svc2	1=yes, 0=no
414	HLTHSHOS	N	1	2966	2966	Health screenings - hospital	C.56.	as15svc2	1=yes, 0=no
415	HLTHSSYS	N	1	2967	2967	Health screenings - health system	C.56.	as15svc2	1=yes, 0=no
416	HLTHSVEN	N	1	2968	2968	Health screenings - joint venture	C.56.	as15svc2	1=yes, 0=no
417	HLTRHOS	N	1	2969	2969	Health research - hospital	C.57.	as15svc2	1=yes, 0=no
418	HLTRSYS	N	1	2970	2970	Health research - health system	C.57.	as15svc2	1=yes, 0=no
419	HLTRVEN	N	1	2971	2971	Health research - joint venture	C.57.	as15svc2	1=yes, 0=no
420	HEMOHOS	N	1	2972	2972	Hemodialysis - hospital	C.58.	as15svc2	1=yes, 0=no
421	HEMOSYS	N	1	2973	2973	Hemodialysis - health system	C.58.	as15svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
422	HEMOVEN	N	1	2974	2974	Hemodialysis - joint venture	C.58.	as15svc2	1=yes, 0=no
423	AIDSSHOS	N	1	2975	2975	HIV-AIDS services - hospital	C.59.	as15svc2	1=yes, 0=no
424	AIDSSSYS	N	1	2976	2976	HIV-AIDS services - health system	C.59.	as15svc2	1=yes, 0=no
425	AIDSSVEN	N	1	2977	2977	HIV-AIDS services - joint venture	C.59.	as15svc2	1=yes, 0=no
426	HOMEHHOS	N	1	2978	2978	Home health services - hospital	C.60.	as15svc2	1=yes, 0=no
427	HOMEHSYS	N	1	2979	2979	Home health services - health system	C.60.	as15svc2	1=yes, 0=no
428	HOMEHVEN	N	1	2980	2980	Home health services - joint venture	C.60.	as15svc2	1=yes, 0=no
429	HOSPCHOS	N	1	2981	2981	Hospice Program - hospital	C. 61.	as15svc2	1=yes, 0=no
430	HOSPCSYS	N	1	2982	2982	Hospice Program - health system	C. 61.	as15svc2	1=yes, 0=no
431	HOSPCVEN	N	1	2983	2983	Hospice Program - joint venture	C. 61.	as15svc2	1=yes, 0=no
432	OPHOSHOS	N	1	2984	2984	Hospital-based outpatient care center/services - hospital	C.62.	as15svc2	1=yes, 0=no
433	OPHOSSYS	N	1	2985	2985	Hospital-based outpatient care center/services - health system	C.62.	as15svc2	1=yes, 0=no
434	OPHOSVEN	N	1	2986	2986	Hospital-based outpatient care center/services - joint venture	C.62.	as15svc2	1=yes, 0=no
435	IMPRHOS	N	1	2987	2987	Immunization program - hospital	C.63.	as15svc2	1=yes, 0=no
436	IMPRSYS	N	1	2988	2988	Immunization program - health system	C.63.	as15svc2	1=yes, 0=no
437	IMPRVEN	N	1	2989	2989	Immunization program - joint venture	C.63.	as15svc2	1=yes, 0=no
438	ICARHOS	N	1	2990	2990	Indigent care clinic - hospital	C.64.	as15svc2	1=yes, 0=no
439	ICARSYS	N	1	2991	2991	Indigent care clinic - health system	C.64.	as15svc2	1=yes, 0=no
440	ICARVEN	N	1	2992	2992	Indigent care clinic - joint venture	C.64.	as15svc2	1=yes, 0=no
441	LINGHOS	N	1	2993	2993	Linguistic/translation services - hospital	C.65.	as15svc2	1=yes, 0=no
442	LINGSYS	N	1	2994	2994	Linguistic/translation services - health system	C.65.	as15svc2	1=yes, 0=no
443	LINGVEN	N	1	2995	2995	Linguistic/translation services - joint venture	C.65.	as15svc2	1=yes, 0=no
444	MEALSHOS	N	1	2996	2996	Meals on wheels - hospital	C.66.	as15svc2	1=yes, 0=no
445	MEALSSYS	N	1	2997	2997	Meals on wheels - health system	C.66.	as15svc2	1=yes, 0=no
446	MEALSVEN	N	1	2998	2998	Meals on wheels - joint venture	C.66.	as15svc2	1=yes, 0=no
447	MOHSHOS	N	1	2999	2999	Mobile Health Services - hospital	C.67.	as15svc2	1=yes, 0=no
448	MOHSSYS	N	1	3000	3000	Mobile Health Services - health system	C.67.	as15svc2	1=yes, 0=no
449	MOHSVEN	N	1	3001	3001	Mobile Health Services - joint venture	C.67.	as15svc2	1=yes, 0=no
450	NEROHOS	N	1	3002	3002	Neurological services - hospital	C.68.	as15svc2	1=yes, 0=no
451	NEROSYS	N	1	3003	3003	Neurological services - health system	C.68.	as15svc2	1=yes, 0=no
452	NEROVEN	N	1	3004	3004	Neurological services - joint venture	C.68.	as15svc2	1=yes, 0=no
453	NUTRPHOS	N	1	3005	3005	Nutrition program - hospital	C.69.	as15svc2	1=yes, 0=no
454	NUTRPSYS	N	1	3006	3006	Nutrition program - health system	C.69.	as15svc2	1=yes, 0=no
455	NUTRPVEN	N	1	3007	3007	Nutrition program - joint venture	C.69.	as15svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
456	OCCHSHOS	N	1	3008	3008	Occupational health services - hospital	C.70.	as15svc2	1=yes, 0=no
457	OCCHSSYS	N	1	3009	3009	Occupational health services - health system	C.70.	as15svc2	1=yes, 0=no
458	OCCHSVEN	N	1	3010	3010	Occupational health services - joint venture	C.70.	as15svc2	1=yes, 0=no
459	ONCOLHOS	N	1	3011	3011	Oncology services - hospital	C.71.	as15svc2	1=yes, 0=no
460	ONCOLSYS	N	1	3012	3012	Oncology services - health system	C.71.	as15svc2	1=yes, 0=no
461	ONCOLVEN	N	1	3013	3013	Oncology services - joint venture	C.71.	as15svc2	1=yes, 0=no
462	ORTOHOS	N	1	3014	3014	Orthopedic services - hospital	C.72.	as15svc2	1=yes, 0=no
463	ORTOSYS	N	1	3015	3015	Orthopedic services - health system	C.72.	as15svc2	1=yes, 0=no
464	ORTOVEN	N	1	3016	3016	Orthopedic services - joint venture	C.72.	as15svc2	1=yes, 0=no
465	OPSRGHOS	N	1	3017	3017	Outpatient surgery - hospital	C.73.	as15svc2	1=yes, 0=no
466	OPSRGSYS	N	1	3018	3018	Outpatient surgery - health system	C.73.	as15svc2	1=yes, 0=no
467	OPSRGVEN	N	1	3019	3019	Outpatient surgery - joint venture	C.73.	as15svc2	1=yes, 0=no
468	PAINHOS	N	1	3020	3020	Pain Management Program - hospital	C.74.	as15svc2	1=yes, 0=no
469	PAINSYS	N	1	3021	3021	Pain Management Program - health system	C.74.	as15svc2	1=yes, 0=no
470	PAINVEN	N	1	3022	3022	Pain Management Program - joint venture	C.74.	as15svc2	1=yes, 0=no
471	PALHOS	N	1	3023	3023	Palliative Care Program - hospital	C.75.	as15svc2	1=yes, 0=no
472	PALSYS	N	1	3024	3024	Palliative Care Program - health system	C.75.	as15svc2	1=yes, 0=no
473	PALVEN	N	1	3025	3025	Palliative Care Program - joint venture	C.75.	as15svc2	1=yes, 0=no
474	IPALHOS	N	1	3026	3026	Inpatient palliative care unit - hospital	C.76.	as15svc2	1=yes, 0=no
475	IPALSYS	N	1	3027	3027	Inpatient palliative care unit - health system	C.76.	as15svc2	1=yes, 0=no
476	IPALVEN	N	1	3028	3028	Inpatient palliative care unit - joint venture	C.76.	as15svc2	1=yes, 0=no
477	PCAHOS	N	1	3029	3029	Patient Controlled Analgesia - hospital	C.77.	as15svc2	1=yes, 0=no
478	PCASYS	N	1	3030	3030	Patient Controlled Analgesia - health system	C.77.	as15svc2	1=yes, 0=no
479	PCAVEN	N	1	3031	3031	Patient Controlled Analgesia - joint venture	C.77.	as15svc2	1=yes, 0=no
480	PATEDHOS	N	1	3032	3032	Patient education center - hospital	C.78.	as15svc2	1=yes, 0=no
481	PATEDSYS	N	1	3033	3033	Patient education center - health system	C.78.	as15svc2	1=yes, 0=no
482	PATEDVEN	N	1	3034	3034	Patient education center - joint venture	C.78.	as15svc2	1=yes, 0=no
483	PATRPHOS	N	1	3035	3035	Patient representative services - hospital	C.79.	as15svc2	1=yes, 0=no
484	PATRPSYS	N	1	3036	3036	Patient representative services - health system	C.79.	as15svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
485	PATRPVEN	N	1	3037	3037	Patient representative services - joint venture	C.79.	as15svc2	1=yes, 0=no
486	RASTHOS	N	1	3038	3038	Assistive technology center - hospital	C.80.a.	as15svc2	1=yes, 0=no
487	RASTSYS	N	1	3039	3039	Assistive technology center - health system	C.80.a.	as15svc2	1=yes, 0=no
488	RASTVEN	N	1	3040	3040	Assistive technology center - joint venture	C.80.a.	as15svc2	1=yes, 0=no
489	REDSHOS	N	1	3041	3041	Electrodiagnostic services - hospital	C.80.b.	as15svc2	1=yes, 0=no
490	REDSSYS	N	1	3042	3042	Electrodiagnostic services - health system	C.80.b.	as15svc2	1=yes, 0=no
491	REDSVEN	N	1	3043	3043	Electrodiagnostic services - joint venture	C.80.b.	as15svc2	1=yes, 0=no
492	RHBOPHOS	N	1	3044	3044	Physical rehabilitation outpatient services - hospital	C.80.c .	as15svc2	1=yes, 0=no
493	RHBOPSYS	N	1	3045	3045	Physical rehabilitation outpatient services - health system	C.80.c .	as15svc2	1=yes, 0=no
494	RHBOPVEN	N	1	3046	3046	Physical rehabilitation outpatient services - joint venture	C.80.c .	as15svc2	1=yes, 0=no
495	RPRSHOS	N	1	3047	3047	Prosthetic and orthotic services - hospital	C.80.d.	as15svc2	1=yes, 0=no
496	RPRSSYS	N	1	3048	3048	Prosthetic and orthotic services - health system	C.80.d.	as15svc2	1=yes, 0=no
497	RPRSVEN	N	1	3049	3049	Prosthetic and orthotic services - joint venture	C.80.d.	as15svc2	1=yes, 0=no
498	RBOTHOS	N	1	3050	3050	Robot-assisted walking therapy - hospital	C.80.e.	as15svc2	1=yes, 0=no
499	RBOTSYS	N	1	3051	3051	Robot-assisted walking therapy - health system	C.80.e.	as15svc2	1=yes, 0=no
500	RBOTVEN	N	1	3052	3052	Robot-assisted walking therapy - joint venture	C.80.e.	as15svc2	1=yes, 0=no
501	RSIMHOS	N	1	3053	3053	Simulated rehabilitation environment - hospital	C.80.f.	as15svc2	1=yes, 0=no
502	RSIMSYS	N	1	3054	3054	Simulated rehabilitation environment - health system	C.80.f.	as15svc2	1=yes, 0=no
503	RSIMVEN	N	1	3055	3055	Simulated rehabilitation environment - joint venture	C.80.f.	as15svc2	1=yes, 0=no
504	PCDEPHOS	N	1	3056	3056	Primary care department - hospital	C.81.	as15svc2	1=yes, 0=no
505	PCDEPSYS	N	1	3057	3057	Primary care department - health system	C.81.	as15svc2	1=yes, 0=no
506	PCDEPVEN	N	1	3058	3058	Primary care department - joint venture	C.81.	as15svc2	1=yes, 0=no
507	PSYCAHOS	N	1	3059	3059	Psychiatric child/adolescent services - hospital	C.82.a	as15svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
508	PSYCASYS	N	1	3060	3060	Psychiatric child/adolescent services - health system	C.82.a	as15svc2	1=yes, 0=no
509	PSYCAVEN	N	1	3061	3061	Psychiatric child/adolescent services - joint venture	C.82.a	as15svc2	1=yes, 0=no
510	PSYLSHOS	N	1	3062	3062	Psychiatric consultation/liaison services - hospital	C.82.b.	as15svc2	1=yes, 0=no
511	PSYLSSYS	N	1	3063	3063	Psychiatric consultation/liaison services - health system	C.82.b.	as15svc2	1=yes, 0=no
512	PSYLSVEN	N	1	3064	3064	Psychiatric consultation/liaison services - joint venture	C.82.b.	as15svc2	1=yes, 0=no
513	PSYEDHOS	N	1	3065	3065	Psychiatric education services - hospital	C.82.c.	as15svc2	1=yes, 0=no
514	PSYEDSYS	N	1	3066	3066	Psychiatric education services - health system	C.82.c.	as15svc2	1=yes, 0=no
515	PSYEDVEN	N	1	3067	3067	Psychiatric education services - joint venture	C.82.c.	as15svc2	1=yes, 0=no
516	PSYEMHOS	N	1	3068	3068	Psychiatric emergency services - hospital	C.82.d.	as15svc2	1=yes, 0=no
517	PSYEMSYS	N	1	3069	3069	Psychiatric emergency services - health system	C.82.d.	as15svc2	1=yes, 0=no
518	PSYEMVEN	N	1	3070	3070	Psychiatric emergency services - joint venture	C.82.d.	as15svc2	1=yes, 0=no
519	PSYGRHOS	N	1	3071	3071	Psychiatric geriatric services - hospital	C.82.e.	as15svc2	1=yes, 0=no
520	PSYGRSYS	N	1	3072	3072	Psychiatric geriatric services - health system	C.82.e.	as15svc2	1=yes, 0=no
521	PSYGRVEN	N	1	3073	3073	Psychiatric geriatric services - joint venture	C.82.e.	as15svc2	1=yes, 0=no
522	PSYOPHOS	N	1	3074	3074	Psychiatric outpatient services - hospital	C.82.f.	as15svc2	1=yes, 0=no
523	PSYOPSYS	N	1	3075	3075	Psychiatric outpatient services - health system	C.82.f.	as15svc2	1=yes, 0=no
524	PSYOPVEN	N	1	3076	3076	Psychiatric outpatient services - joint venture	C.82.f.	as15svc2	1=yes, 0=no
525	PSYPHHOS	N	1	3077	3077	Psychiatric partial hospitalization program - hospital	C.82.g.	as15svc2	1=yes, 0=no
526	PSYPHSYS	N	1	3078	3078	Psychiatric partial hospitalization program - health system	C.82.g.	as15svc2	1=yes, 0=no
527	PSYPHVEN	N	1	3079	3079	Psychiatric partial hospitalization program - joint venture	C.82.g.	as15svc2	1=yes, 0=no
528	PSTRTHOS	N	1	3080	3080	Psychiatric residential treatment - hospital	C.82.h	as15svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
529	PSTRTSYS	N	1	3081	3081	Psychiatric residential treatment - health system	C.82.h	as15svc2	1=yes, 0=no
530	PSTRTVEN	N	1	3082	3082	Psychiatric residential treatment - joint venture	C.82.h	as15svc2	1=yes, 0=no
531	CTSCNHOS	N	1	3083	3083	Computed-tomography (CT) scanner - hospital	C.83.a.	as15svc3	1=yes, 0=no
532	CTSCNSYS	N	1	3084	3084	Computed-tomography (CT) scanner - health system	C.83.a.	as15svc3	1=yes, 0=no
533	CTSCNVEN	N	1	3085	3085	Computed-tomography (CT) scanner - joint venture	C.83.a.	as15svc3	1=yes, 0=no
534	DRADFHOS	N	1	3086	3086	Diagnostic radioisotope facility - hospital	C.83.b.	as15svc3	1=yes, 0=no
535	DRADFSYS	N	1	3087	3087	Diagnostic radioisotope facility - health system	C.83.b.	as15svc3	1=yes, 0=no
536	DRADFVEN	N	1	3088	3088	Diagnostic radioisotope facility - joint venture	C.83.b.	as15svc3	1=yes, 0=no
537	EBCTHOS	N	1	3089	3089	Electron Beam Computed Tomography (EBCT) - hospital	C.83.c.	as15svc3	1=yes, 0=no
538	EBCTSYS	N	1	3090	3090	Electron Beam Computed Tomography (EBCT) - health system	C.83.c.	as15svc3	1=yes, 0=no
539	EBCTVEN	N	1	3091	3091	Electron Beam Computed Tomography (EBCT) - joint venture	C.83.c.	as15svc3	1=yes, 0=no
540	FFDMHOS	N	1	3092	3092	Full-field digital mammography - hospital	C.83.d.	as15svc3	1=yes, 0=no
541	FFDMSYS	N	1	3093	3093	Full-field digital mammography - health system	C.83.d.	as15svc3	1=yes, 0=no
542	FFDMVEN	N	1	3094	3094	Full-field digital mammography - joint venture	C.83.d.	as15svc3	1=yes, 0=no
543	MRIHOS	N	1	3095	3095	Magnetic resonance imaging (MRI) - hospital	C.83.e.	as15svc3	1=yes, 0=no
544	MRISYS	N	1	3096	3096	Magnetic resonance imaging (MRI) - health system	C.83.e.	as15svc3	1=yes, 0=no
545	MRIVEN	N	1	3097	3097	Magnetic resonance imaging (MRI) - joint venture	C.83.e.	as15svc3	1=yes, 0=no
546	IMRIHOS	N	1	3098	3098	Intraoperative magnetic resonance imaging - hospital	C.83.f.	as15svc3	1=yes, 0=no
547	IMRISYS	N	1	3099	3099	Intraoperative magnetic resonance imaging - health system	C.83.f.	as15svc3	1=yes, 0=no
548	IMRIVEN	N	1	3100	3100	Intraoperative magnetic resonance imaging - joint venture	C.83.f.	as15svc3	1=yes, 0=no
549	MEGHOS	N	1	3101	3101	Magnetoencephalography (MEG) - hospital	C.83.g.	as15svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
550	MEGSYS	N	1	3102	3102	Magnetoencephalography (MEG) - health system	C.83.g.	as15svc3	1=yes, 0=no
551	MEGVEN	N	1	3103	3103	Magnetoencephalography (MEG) - joint venture	C.83.g.	as15svc3	1=yes, 0=no
552	MSCTHOS	N	1	3104	3104	Multislice spiral computed tomography < 64 slice - hospital	C.83.h.	as15svc3	1=yes, 0=no
553	MSCTSYS	N	1	3105	3105	Multislice spiral computed tomography < 64 slice - health system	C.83.h.	as15svc3	1=yes, 0=no
554	MSCTVEN	N	1	3106	3106	Multislice spiral computed tomography < 64 slice - joint venture	C.83.h.	as15svc3	1=yes, 0=no
555	MSCTGHOS	N	1	3107	3107	Multi-slice spiral computed tomography 64 + slice - hospital	C.83.i.	as15svc3	1=yes, 0=no
556	MSCTGSYS	N	1	3108	3108	Multi-slice spiral computed tomography 64 + slice - health system	C.83.i.	as15svc3	1=yes, 0=no
557	MSCTGVEN	N	1	3109	3109	Multi-slice spiral computed tomography 64 + slice - joint venture	C.83.i.	as15svc3	1=yes, 0=no
558	PETHOS	N	1	3110	3110	Positron emission tomography (PET) - hospital	C.83.j.	as15svc3	1=yes, 0=no
559	PETSYS	N	1	3111	3111	Positron emission tomography (PET) - health system	C.83.j.	as15svc3	1=yes, 0=no
560	PETVEN	N	1	3112	3112	Positron emission tomography (PET) - joint venture	C.83.j.	as15svc3	1=yes, 0=no
561	PETCTHOS	N	1	3113	3113	Positron emission tomography/CT (PET/CT) - hospital	C.83.k.	as15svc3	1=yes, 0=no
562	PETCTSYS	N	1	3114	3114	Positron emission tomography/CT (PET/CT) - health system	C.83.k.	as15svc3	1=yes, 0=no
563	PETCTVEN	N	1	3115	3115	Positron emission tomography/CT (PET/CT) - joint venture	C.83.k.	as15svc3	1=yes, 0=no
564	SPECTHOS	N	1	3116	3116	Single photon emission computerized tomography (SPECT) - hospital	C.83.l.	as15svc3	1=yes, 0=no
565	SPECTSYS	N	1	3117	3117	Single photon emission computerized tomography (SPECT) - health system	C.83.l.	as15svc3	1=yes, 0=no
566	SPECTVEN	N	1	3118	3118	Single photon emission computerized tomography (SPECT) - joint venture	C.83.l.	as15svc3	1=yes, 0=no
567	ULTSNHOS	N	1	3119	3119	Ultrasound - hospital	C.83.m.	as15svc3	1=yes, 0=no
568	ULTSNSYS	N	1	3120	3120	Ultrasound - health system	C.83.m.	as15svc3	1=yes, 0=no
569	ULTSNVEN	N	1	3121	3121	Ultrasound - joint venture	C.83.m.	as15svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
570	IGRTHOS	N	1	3122	3122	Image-guided radiation therapy - hospital	C.84.a.	as15svc3	1=yes, 0=no
571	IGRTSYS	N	1	3123	3123	Image-guided radiation therapy - health system	C.84.a.	as15svc3	1=yes, 0=no
572	IGRTVEN	N	1	3124	3124	Image-guided radiation therapy - joint venture	C.84.a.	as15svc3	1=yes, 0=no
573	IMRTHOS	N	1	3125	3125	Intensity-Modulated Radiation Therapy (IMRT) - hospital	C.84.b	as15svc3	1=yes, 0=no
574	IMRTSYS	N	1	3126	3126	Intensity-Modulated Radiation Therapy (IMRT) - health system	C.84.b	as15svc3	1=yes, 0=no
575	IMRTVEN	N	1	3127	3127	Intensity-Modulated Radiation Therapy (IMRT) - joint venture	C.84.b	as15svc3	1=yes, 0=no
576	PTONHOS	N	1	3128	3128	Proton beam therapy - hospital	C.84.c	as15svc3	1=yes, 0=no
577	PTONSYS	N	1	3129	3129	Proton beam therapy - health system	C.84.c	as15svc3	1=yes, 0=no
578	PTONVEN	N	1	3130	3130	Proton beam therapy - joint venture	C.84.c	as15svc3	1=yes, 0=no
579	BEAMHOS	N	1	3131	3131	Shaped beam Radiation System - hospital	C.84.d	as15svc3	1=yes, 0=no
580	BEAMSYS	N	1	3132	3132	Shaped beam Radiation System - health system	C.84.d	as15svc3	1=yes, 0=no
581	BEAMVEN	N	1	3133	3133	Shaped beam Radiation System - joint venture	C.84.d	as15svc3	1=yes, 0=no
582	SRADHOS	N	1	3134	3134	Stereotactic radiosurgery - hospital	C.84.e	as15svc3	1=yes, 0=no
583	SRADSYS	N	1	3135	3135	Stereotactic radiosurgery - health system	C.84.e	as15svc3	1=yes, 0=no
584	SRADVEN	N	1	3136	3136	Stereotactic radiosurgery - joint venture	C.84.e	as15svc3	1=yes, 0=no
585	RETIRHOS	N	1	3137	3137	Retirement housing - hospital	C.85.	as15svc3	1=yes, 0=no
586	RETIRSYS	N	1	3138	3138	Retirement housing - health system	C.85.	as15svc3	1=yes, 0=no
587	RETIRVEN	N	1	3139	3139	Retirement housing - joint venture	C.85.	as15svc3	1=yes, 0=no
588	ROBOHOS	N	1	3140	3140	Robotic surgery - hospital	C.86.	as15svc3	1=yes, 0=no
589	ROBOSYS	N	1	3141	3141	Robotic surgery - health system	C.86.	as15svc3	1=yes, 0=no
590	ROBOVEN	N	1	3142	3142	Robotic surgery - joint venture	C.86.	as15svc3	1=yes, 0=no
591	RURLHOS	N	1	3143	3143	Rural health clinic - hospital	C.87.	as15svc3	1=yes, 0=no
592	RURLSYS	N	1	3144	3144	Rural health clinic - health system	C.87.	as15svc3	1=yes, 0=no
593	RURLVEN	N	1	3145	3145	Rural health clinic - joint venture	C.87.	as15svc3	1=yes, 0=no
594	SLEPHOS	N	1	3146	3146	Sleep Center - hospital	C.88.	as15svc3	1=yes, 0=no
595	SLEPSYS	N	1	3147	3147	Sleep Center - health system	C.88.	as15svc3	1=yes, 0=no
596	SLEPVEN	N	1	3148	3148	Sleep Center - joint venture	C.88.	as15svc3	1=yes, 0=no
597	SOCWKHOS	N	1	3149	3149	Social work services - hospital	C.89.	as15svc3	1=yes, 0=no
598	SOCWKSYS	N	1	3150	3150	Social work services - health system	C.89.	as15svc3	1=yes, 0=no
599	SOCWKVEN	N	1	3151	3151	Social work services - joint venture	C.89.	as15svc3	1=yes, 0=no
600	SPORTHOS	N	1	3152	3152	Sports medicine - hospital	C.90.	as15svc3	1=yes, 0=no
601	SPORTSYS	N	1	3153	3153	Sports medicine - health system	C.90.	as15svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
602	SPORTVEN	N	1	3154	3154	Sports medicine - joint venture	C.90.	as15svc3	1=yes, 0=no
603	SUPPGHOS	N	1	3155	3155	Support groups - hospital	C.91.	as15svc3	1=yes, 0=no
604	SUPPGSYS	N	1	3156	3156	Support groups - health system	C.91.	as15svc3	1=yes, 0=no
605	SUPPGVEN	N	1	3157	3157	Support groups - joint venture	C.91.	as15svc3	1=yes, 0=no
606	SWBDHOS	N	1	3158	3158	Swing bed services - hospital	C.92.	as15svc3	1=yes, 0=no
607	SWBDSYS	N	1	3159	3159	Swing bed services - health system	C.92.	as15svc3	1=yes, 0=no
608	SWBDVEN	N	1	3160	3160	Swing bed services - joint venture	C.92.	as15svc3	1=yes, 0=no
609	TEENSHOS	N	1	3161	3161	Teen outreach services - hospital	C.93.	as15svc3	1=yes, 0=no
610	TEENSSYS	N	1	3162	3162	Teen outreach services - health system	C.93.	as15svc3	1=yes, 0=no
611	TEENSVEN	N	1	3163	3163	Teen outreach services - joint venture	C.93.	as15svc3	1=yes, 0=no
612	TOBHOS	N	1	3164	3164	Tobacco Treatment Services - hospital	C.94.	as15svc3	1=yes, 0=no
613	TOBSYS	N	1	3165	3165	Tobacco Treatment Services - health system	C.94.	as15svc3	1=yes, 0=no
614	TOBVEN	N	1	3166	3166	Tobacco Treatment Services - joint venture	C.94.	as15svc3	1=yes, 0=no
615	OTBONHOS	N	1	3167	3167	Bone Marrow transplant - hospital	C.95.a.	as15svc3	1=yes, 0=no
616	OTBONSYS	N	1	3168	3168	Bone Marrow transplant - health system	C.95.a.	as15svc3	1=yes, 0=no
617	OTBONVEN	N	1	3169	3169	Bone Marrow transplant - joint venture	C.95.a.	as15svc3	1=yes, 0=no
618	HARTHOS	N	1	3170	3170	Heart transplant - hospital	C.95.b.	as15svc3	1=yes, 0=no
619	HARTSYS	N	1	3171	3171	Heart transplant - health system	C.95.b.	as15svc3	1=yes, 0=no
620	HARTVEN	N	1	3172	3172	Heart transplant - joint venture	C.95.b.	as15svc3	1=yes, 0=no
621	KDNYHOS	N	1	3173	3173	Kidney transplant - hospital	C.95.c.	as15svc3	1=yes, 0=no
622	KDNYSYS	N	1	3174	3174	Kidney transplant -health system	C.95.c.	as15svc3	1=yes, 0=no
623	KDNYVEN	N	1	3175	3175	Kidney transplant - joint venture	C.95.c.	as15svc3	1=yes, 0=no
624	LIVRHOS	N	1	3176	3176	Liver transplant - hospital	C.95.d.	as15svc3	1=yes, 0=no
625	LIVRSYS	N	1	3177	3177	Liver transplant - health system	C.95.d.	as15svc3	1=yes, 0=no
626	LIVRVEN	N	1	3178	3178	Liver transplant - joint venture	C.95.d.	as15svc3	1=yes, 0=no
627	LUNGHOS	N	1	3179	3179	Lung transplant - hospital	C.95.e.	as15svc3	1=yes, 0=no
628	LUNGSYS	N	1	3180	3180	Lung transplant - health system	C.95.e.	as15svc3	1=yes, 0=no
629	LUNGVEN	N	1	3181	3181	Lung transplant - joint venture	C.95.e.	as15svc3	1=yes, 0=no
630	TISUHOS	N	1	3182	3182	Tissue transplant - hospital	C.95.f.	as15svc3	1=yes, 0=no
631	TISUSYS	N	1	3183	3183	Tissue transplant - health system	C.95.f.	as15svc3	1=yes, 0=no
632	TISUVEN	N	1	3184	3184	Tissue transplant - joint venture	C.95.f.	as15svc3	1=yes, 0=no
633	OTOTHHOS	N	1	3185	3185	Other Transplant - hospital	C.95.g.	as15svc3	1=yes, 0=no
634	OTOTHSYS	N	1	3186	3186	Other Transplant - health system	C.95.g.	as15svc3	1=yes, 0=no
635	OTOTHVEN	N	1	3187	3187	Other Transplant - joint venture	C.95.g.	as15svc3	1=yes, 0=no
636	TPORTHOS	N	1	3188	3188	Transportation to health services - hospital	C.96.	as15svc3	1=yes, 0=no
637	TPORTSYS	N	1	3189	3189	Transportation to health services - health system	C.96.	as15svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
638	TPORTVEN	N	1	3190	3190	Transportation to health services - joint venture	C.96.	as15svc3	1=yes, 0=no
639	URGCCHOS	N	1	3191	3191	Urgent care center - hospital	C.97.	as15svc3	1=yes, 0=no
640	URGCCSYS	N	1	3192	3192	Urgent care center - health system	C.97.	as15svc3	1=yes, 0=no
641	URGCCVEN	N	1	3193	3193	Urgent care center - joint venture	C.97.	as15svc3	1=yes, 0=no
642	VRCSHOS	N	1	3194	3194	Virtual colonoscopy - hospital	C.98.	as15svc3	1=yes, 0=no
643	VRCSSYS	N	1	3195	3195	Virtual colonoscopy - health system	C.98.	as15svc3	1=yes, 0=no
644	VRCSVEN	N	1	3196	3196	Virtual colonoscopy - joint venture	C.98.	as15svc3	1=yes, 0=no
645	VOLSVHOS	N	1	3197	3197	Volunteer services department - hospital	C.99.	as15svc3	1=yes, 0=no
646	VOLSVSYS	N	1	3198	3198	Volunteer services department - health system	C.99.	as15svc3	1=yes, 0=no
647	VOLSVVEN	N	1	3199	3199	Volunteer services department - joint venture	C.99.	as15svc3	1=yes, 0=no
648	WOMHCHOS	N	1	3200	3200	Women's health center/services - hospital	C.100.	as15svc3	1=yes, 0=no
649	WOMHCSYS	N	1	3201	3201	Women's health center/services - health system	C.100.	as15svc3	1=yes, 0=no
650	WOMHCVEN	N	1	3202	3202	Women's health center/services - joint venture	C.100.	as15svc3	1=yes, 0=no
651	WMGTHOS	N	1	3203	3203	Wound Management Services - hospital	C.101.	as15svc3	1=yes, 0=no
652	WMGTSYS	N	1	3204	3204	Wound Management Services - health system	C.101.	as15svc3	1=yes, 0=no
653	WMGTVEN	N	1	3205	3205	Wound Management Services - joint venture	C.101.	as15svc3	1=yes, 0=no
654	EXPTOT	Y	15	3206	3220	Total facility expenses, excluding bad debt	D.3.l.	as15util1	Total Expenses
655	EXPTHA	Y	15	3221	3235	Hospital total expenses, excluding bad debt		as15util1	Calculated Field: Total expenses less nursing home unit expense
656	EXPTLA	Y	15	3236	3250	Nursing home expenses, excluding bad debt	D.3.l.	as15util1	Total Expenses (Nursing Home Unit)
657	CPPCT	N	4	3251	3254	What % of the hospital's net patient revenue is paid on a capitated basis?	C.109.	as15util1	
658	CAPRSK	N	4	3255	3258	What % of the hospital's net patient revenue is paid on a shared risk basis?	C.110.	as15util1	
659	DPEXA	N	10	3259	3268	Depreciation expense	D.3.h.	as15util1	Expense
660	INTEXA	N	10	3269	3278	Interest expense	D.3.i.	as15util1	Expense
661	SUPEXA	N	10	3279	3288	Supply expense	D.3.j.	as15util1	Expense
662	OTHEXPA	N	10	3289	3298	All other expenses	D.3.k	as15util1	Expense
663	NPAYBEN	Y	10	3299	3308	Total facility employee benefits	D.3.g.	as15util1	Employee benefits
664	PAYTOT	Y	10	3309	3318	Total facility payroll expenses	D.3.f.	as15util1	Payroll Expenses

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
665	PAYTOTH	Y	10	3319	3328	Hospital unit payroll expenses		as15util1	Calculated Field: Total facility payroll expenses less Nursing home facility payroll expenses
666	NPAYBENH	N	10	3329	3338	Hospital unit employee benefits		as15util1	Calculated Field: Total facility employee benefits expenses less Nursing home facility employee benefits expenses
667	PAYTOTLT	Y	10	3339	3348	Nursing home payroll expenses	D.3.f.	as15util1	Payroll Expenses (Nursing Home Unit)
668	NPAYBENL	N	10	3349	3358	Nursing home employee benefits	D.3.g.	as15util1	Employee benefits (Nursing Home Unit)
669	LBEDSA	N	6	3359	3364	Licensed Beds Total Facility	D.1.a.	as15util1	Total licensed beds
670	BDTOT	NA	4	3365	3368	Total facility beds set up and staffed at the end of reporting period	D.1.b.	as15util1	Beds set up and staffed (Total Facility)
671	ADMTOT	Y	6	3369	3374	Total facility admissions	D.1.e.	as15util1	Admissions (Total Facility)
672	IPDTOT	Y	8	3375	3382	Total facility inpatient days	D.1.f.	as15util1	Inpatient Days (Total Facility)
673	BDH	N	4	3383	3386	Hospital unit beds set up and staffed		as15util1	Calculated Field: Total facility beds less Nursing home unit beds
674	ADMH	N	6	3387	3392	Hospital unit admissions		as15util1	Calculated Field: Total facility admissions less Nursing home unit admissions
675	IPDH	N	8	3393	3400	Hospital unit inpatient days		as15util1	Calculated Field: Total facility inpatient days less Nursing home unit inpatient days
676	LBEDLA	N	6	3401	3406	Nursing home licensed beds	D.1.a.	as15util1	Licensed Beds (Long Term Unit)
677	BDLT	N	4	3407	3410	Nursing home beds set up and staffed	D.1.b.	as15util1	Nursing home beds set up and staffed
678	ADMLT	N	6	3411	3416	Nursing home admissions	D.1.e.	as15util1	Nursing home admissions
679	IPDLT	N	8	3417	3424	Nursing home inpatient days	D.1.f.	as15util1	Nursing home inpatient days
680	MCRDC	Y	6	3425	3430	Total facility Medicare discharges	D.2.a1.	as15util1	Medicare Discharges (Total Facility)
681	MCRIPD	Y	8	3431	3438	Total facility Medicare days	D.2.b1.	as15util1	Medicare Inpatient Days (Total Facility)
682	MCDDC	Y	6	3439	3444	Total facility Medicaid discharges	D.2.c1.	as15util1	Medicaid Discharges (Total Facility)
683	MCDIPD	Y	8	3445	3452	Total facility Medicaid days	D.2.d1.	as15util1	Medicaid Inpatient days (Total Facility)
684	MCRDCH	N	6	3453	3458	Hospital unit Medicare discharges		as15util1	Calculated Field: Total facility Medicare discharges less Nursing home unit Medicare discharges
685	MCRIPDH	N	8	3459	3466	Hospital unit Medicare days		as15util1	Calculated Field: Total facility Medicare days less Nursing home unit Medicare days
686	MCDDCH	N	6	3467	3472	Hospital unit Medicaid discharges		as15util1	Calculated Field: Total facility Medicaid discharges less Nursing home unit Medicaid discharges
687	MCDIPDH	N	8	3473	3480	Hospital unit Medicaid days		as15util1	Calculated Field: Total facility Medicaid days less Nursing home unit Medicaid days

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
688	MCRDCLT	N	6	3481	3486	Nursing home Medicare discharges	D.2.a1.	as15util1	Medicare Discharges (Nursing Home Unit)
689	MCRIPDLT	N	8	3487	3494	Nursing home Medicare days	D.2.b1.	as15util1	Medicare Inpatient Days (Nursing Home Unit)
690	MCDDCLT	N	6	3495	3500	Nursing home Medicaid discharges	D.2.c1.	as15util1	Medicaid discharges (Nursing Home Unit)
691	MCDIPDLT	N	8	3501	3508	Nursing home Medicaid days	D.2.d1.	as15util1	Medicaid Inpatient days (Nursing Home Unit)
692	BASSIN	NA	4	3509	3512	Bassinets set up and staffed	D.1.c.	as15util1	Bassinets set up and staffed
693	BIRTHS	Y	6	3513	3518	Total births (excluding fetal deaths)	D.1.d.	as15util1	Births (exclude fetal deaths)
694	SUROPIP	Y	6	3519	3524	Inpatient surgical operations	D.1.i.	as15util1	Inpatient Surgeries
695	SUROPOP	Y	6	3525	3530	Outpatient surgical operations	D.1.k.	as15util1	Outpatient Surgeries
696	SUROPTOT	Y	6	3531	3536	Total surgical operations		as15util1	Inpatient surgical operations + Outpatient surgical operations
697	VEM	Y	8	3537	3544	Emergency room visits	D.1.g.	as15util1	Emergency department visits
698	VOTH	Y	8	3545	3552	Other outpatient visits		as15util1	Calculated Field: Total Outpatient Visits less Emergency Department Visits (VTOT less VEM = VOTH)
699	VTOT	Y	8	3553	3560	Total outpatient visits	D.1.h.	as15util1	Total Outpatient Visits
Note: Numbers in parentheses below indicate survey questionnaire columns									
700	FTMDTF	Y	5	3561	3565	Full-time physicians and dentists	D.10.a.(1)	as15util1	Full-time Physicians and dentists
701	FTRES	Y	5	3566	3570	Full-time medical and dental residents and interns	D.10.c.(1)	as15util1	Full-time medical and dental residents/interns
702	FTTRAN84	Y	5	3571	3575	Full-time other trainees	D.10.d.(1)	as15util1	Full-time Other trainees
703	FTRNTF	Y	5	3576	3580	Full-time registered nurses	D.10.e.(1)	as15util1	Full-time Registered Nurses
704	FTLPNTF	Y	5	3581	3585	Full-time licensed practical or vocational nurses	D.10.f.(1)	as15util1	Full-time Licensed practical (vocational) nurses
705	FTAST	Y	5	3586	3590	Full-time nursing assistive personnel	D.10.g.(1)	as15util1	Full-time Nursing assistive personnel
706	FTRAD	Y	5	3591	3595	Full-time radiology technicians	D.10.h.(1)	as15util1	Full-time Radiology technicians
707	FTLAB	Y	5	3596	3600	Full-time laboratory technicians	D.10.i.(1)	as15util1	Full-time laboratory technicians
708	FTPHR	Y	5	3601	3605	Full-time pharmacists, licensed	D.10.j.(1)	as15util1	Full-time Pharmacists, licensed
709	FTPHT	Y	5	3606	3610	Full-time pharmacy technicians	D.10.k.(1)	as15util1	Full-time Pharmacy technicians
710	FTRESP	Y	5	3611	3615	Full-time respiratory therapists	D.10.l.(1)	as15util1	Full-time respiratory therapists
711	FTOTHTF	Y	5	3616	3620	Full-time all other personnel	D.10.m.(1)	as15util1	Full-time All Other Personnel
712	FTTOT	Y	5	3621	3625	Full-time total personnel	D.10.n.(1)	as15util1	Full-time Total Facility Personnel
713	PTMDTF	Y	5	3626	3630	Part-time physicians and dentists	D.10.a.(2)	as15util1	Part-time Physicians and dentists
714	PTRES	Y	5	3631	3635	Part-time medical and dental residents and interns	D.10.c.(2)	as15util1	Part-time medical and dental residents/interns
715	PTTRAN84	Y	5	3636	3640	Part-time other trainees	D.10.d.(2)	as15util1	Part-time Other trainees
716	PTRNTF	Y	5	3641	3645	Part-time registered nurses	D.10.e.(2)	as15util1	Part-time Registered Nurses
717	PTLPNTF	Y	5	3646	3650	Part-time licensed practical or vocational nurses	D.10.f.(2)	as15util1	Part-time Licensed practical (vocational) nurses
718	PTAST	Y	5	3651	3655	Part-time nursing assistive personnel	D.10.g.(2)	as15util1	Part-time Nursing assistive personnel

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
719	PTRAD	Y	5	3656	3660	Part-time radiology technicians	D.10.h.(2)	as15util1	Part-time Radiology technicians
720	PTLAB	Y	5	3661	3665	Part-time laboratory technicians	D.10.i.(2)	as15util1	Part-time laboratory technicians
721	PTPHR	Y	5	3666	3670	Part-time pharmacists, licensed	D.10.j.(2)	as15util1	Part-time Pharmacists, licensed
722	PTPHT	Y	5	3671	3675	Part-time pharmacy technicians	D.10.k.(2)	as15util1	Part-time Pharmacy technicians
723	PTRESP	Y	5	3676	3680	Part-time respiratory therapists	D.10.l.(2)	as15util1	Part-time respiratory therapists
724	PTOTHTF	Y	5	3681	3685	Part-time all other personnel	D.10.m.(2)	as15util1	Part-time All Other Personnel
725	PTTOT	Y	5	3686	3690	Part-time total personnel	D.10.n.(2)	as15util1	Part-time Total Facility Personnel
726	FTTOTH	Y	5	3691	3695	Total Full-time hospital unit personnel		as15util1	Calculated Field: Total Full-time facility personnel less Total Full-time nursing home personnel
727	PTTOTH	Y	5	3696	3700	Total Part-time hospital unit personnel		as15util1	Calculated Field: Total Part-time facility personnel less Total Part-time nursing home personnel
728	FTTOTLT	Y	5	3701	3705	Total Full-time nursing home personnel	D.10.p.(1)	as15util1	Total Full-time nursing home personnel
729	PTTOTLT	Y	5	3706	3710	Total Part-time nursing home personnel	D.10.p.(2)	as15util1	Total Part-time nursing home personnel
730	FTED	N	8	3711	3718	Physicians and dentists FTE	D.10.a.(3)	as15util1	Physicians and dentists FTE (Reported)
731	FTER	N	8	3719	3726	Medical and dental residents FTE	D.10.c.(3)	as15util1	Medical and dental residents FTE (Reported)
732	FTET	N	8	3727	3734	Other trainees FTE	D.10.d.(3)	as15util1	Other trainees FTE (Reported)
733	FTEN	N	8	3735	3742	Registered nurses FTE	D.10.e.(3)	as15util1	Registered nurses FTE (Reported)
734	FTEP	N	8	3743	3750	Licensed practical nurses FTE	D.10.f.(3)	as15util1	Licensed practical nurses FTE (Reported)
735	FTEAP	N	8	3751	3758	Nursing assistive personnel FTE	D.10.g.(3)	as15util1	Nursing assistive personnel FTE (Reported)
736	FTERAD	N	8	3759	3766	Radiology technicians FTE	D.10.h.(3)	as15util1	Radiology technicians FTE (Reported)
737	FTELAB	N	8	3767	3774	Laboratory technicians FTE	D.10.i.(3)	as15util1	Laboratory technicians FTE (Reported)
738	FTEPH	N	8	3775	3782	Pharmacists, licensed FTE	D.10.j.(3)	as15util1	Pharmacists, licensed FTE (Reported)
739	FTEPHT	N	8	3783	3790	Pharmacy technicians FTE	D.10.k.(3)	as15util1	Pharmacy technicians FTE (Reported)
740	FTERESP	N	8	3791	3798	Respiratory therapists FTE	D.10.l.(3)	as15util1	Respiratory therapists FTE (Reported)
741	FTEO	N	8	3799	3806	All other personnel FTE	D.10.m.(3)	as15util1	All other personnel FTE (Reported)
742	FTETF	N	8	3807	3814	Total facility personnel FTE	D.10.n.(3)	as15util1	Total facility personnel FTE (Reported)
743	FTERNLT	N	8	3815	3822	Nursing home type unit/facility registered nurses FTE	D.10.o.(3)	as15util1	Nursing home registered nurses FTE (Reported)
744	FTEU	N	8	3823	3830	Nursing home personnel FTE	D.10.p.(3)	as15util1	Nursing home personnel FTE (Reported)
745	VMD	N	8	3831	3838	Physician and dentists- vacancies	D.10.a.(4)	as15util1	Physician and dentists - vacancies
746	VRES	N	8	3839	3846	Medical and dental residents/interns- vacancies	D.10.c.(4)	as15util1	Medical and dental residents/interns- vacancies
747	VTTRN	N	8	3847	3854	Other trainees - vacancies	D.10.d.(4)	as15util1	Other trainees - vacancies
748	VRN	N	8	3855	3862	Registered nurses - vacancies	D.10.e.(4)	as15util1	Registered nurses - vacancies
749	VLPN	N	8	3863	3870	Licensed practical (vocational) nurses - vacancies	D.10.f.(4)	as15util1	Licensed practical (vocational) nurses - vacancies

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
750	VAST	N	8	3871	3878	Nursing assistive personnel - vacancies	D.10.g.(4)	as15util1	Nursing assistive personnel - vacancies
751	VRAD	N	8	3879	3886	Radiology technicians - vacancies	D.10.h.(4)	as15util1	Radiology technicians - vacancies
752	VLAB	N	8	3887	3894	Laboratory technicians - vacancies	D.10.i.(4)	as15util1	Laboratory technicians - vacancies
753	VPHR	N	8	3895	3902	Pharmacists, licensed - vacancies	D.10.j.(4)	as15util1	Pharmacists, licensed - vacancies
754	VPHT	N	8	3903	3910	Pharmacy technicians - vacancies	D.10.k.(4)	as15util1	Pharmacy technicians - vacancies
755	VRSP	N	8	3911	3918	Respiratory therapists - vacancies	D.10.l.(4)	as15util1	Respiratory therapists - vacancies
756	VOTHL	N	8	3919	3926	All other personnel - vacancies	D.10.m.(4)	as15util1	All other personnel - vacancies
757	VTOTL	N	8	3927	3934	Total facility personnel - vacancies	D.10.n.(4)	as15util1	Total facility personnel - vacancies
758	VRNH	N	8	3935	3942	Nursing home type unit/facility registered nurses- vacancies	D.10.o.(4)	as15util1	Nursing home type unit/facility registered nurses- vacancies
759	VTNH	N	8	3943	3950	Total nursing home type unit/facility personnel - vacancies	D.10.p.(4)	as15util1	Total nursing home type unit/facility personnel - vacancies
760	**ERNFTE**	**N**	**8**	**3951**	**3958**	**Number of direct patient care RN FTEs**	**D.10.q.**	**as15util1**	**Number of FTEs (among employed RNs) involved in direct patient care**
761	ADC	NA	8	3959	3966	Average daily census		as15util1	Inpatient Days / Days Covered
762	ADJADM	NA	8	3967	3974	Adjusted admissions		as15util1	Admissions + (Admissions * (Outpatient Revenue/Inpatient Revenue))
763	ADJPD	NA	8	3975	3982	Adjusted patient days		as15util1	Inpatient Days + (Inpatient Days * (Outpatient Revenue/Inpatient Revenue))
764	ADJADC	NA	8	3983	3990	Adjusted average daily census		as15util1	Adjusted Inpatient Days/Number of Days in Reporting Period
765	FTEMD	NA	8	3991	3998	Full time equivalent physicians and dentists		as15util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
766	FTERN	NA	8	3999	4006	Full time equivalent registered nurses		as15util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
767	FTELPN	NA	8	4007	4014	Full time equivalent licensed practical or vocational nurses		as15util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
768	FTERES	NA	8	4015	4022	Full time equivalent medical and dental residents and interns		as15util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
769	FTETRAN	NA	8	4023	4030	Full time equivalent other trainees		as15util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
770	FTETTRN	NA	8	4031	4038	Full time equivalent total trainees		as15util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
771	FTEOTH94	NA	8	4039	4046	Full time equivalent all other personnel		as15util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
772	FTEH	NA	8	4047	4054	Full time equivalent hospital unit total personnel		as15util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
773	FTENH	NA	8	4055	4062	Full time equivalent nursing home total personnel		as15util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
774	FTE	NA	8	4063	4070	Full time equivalent total personnel		as15util1	Excludes medical and dental residents, interns and other trainees
775	OPRA	N	4	4071	4074	Number of Operating Rooms	D.1.j.	as15util1	Number of operating rooms
776	EADMTOT	NA	1	4075	4075	(Estimation Flag) Admissions		as15util1	0=reported, 1=estimated, 2=expanded
777	EIPDTOT	NA	1	4076	4076	(Estimation Flag) Inpatient Days		as15util1	0=reported, 1=estimated, 2=expanded
778	EADMH	NA	1	4077	4077	(Estimation Flag) Hospital Unit Admissions		as15util1	0=reported, 1=estimated, 2=expanded
779	EIPDH	NA	1	4078	4078	(Estimation Flag) Hospital Unit Inpatient Days		as15util1	0=reported, 1=estimated, 2=expanded
780	EADMLT	NA	1	4079	4079	(Estimation Flag) Nursing Home Unit Admissions		as15util1	0=reported, 1=estimated, 2=expanded
781	EIPDLT	NA	1	4080	4080	(Estimation Flag) Nursing Home Unit Inpatient Days		as15util1	0=reported, 1=estimated, 2=expanded
782	EMCRDC	NA	1	4081	4081	(Estimation Flag) Medicare Inpatient Discharges		as15util1	0=reported, 1=estimated, 2=expanded
783	EMCRIPD	NA	1	4082	4082	(Estimation Flag) Medicare Inpatient Days		as15util1	0=reported, 1=estimated, 2=expanded
784	EMCDDC	NA	1	4083	4083	(Estimation Flag) Medicaid Inpatient Discharges		as15util1	0=reported, 1=estimated, 2=expanded
785	EMCDIPD	NA	1	4084	4084	(Estimation Flag) Medicaid Inpatient Days		as15util1	0=reported, 1=estimated, 2=expanded
786	EMCRDCH	NA	1	4085	4085	(Estimation Flag) Hospital Unit Medicare Inpatient Discharges		as15util1	0=reported, 1=estimated, 2=expanded
787	EMCRIPDH	NA	1	4086	4086	(Estimation Flag) Hospital Unit Medicare Inpatient Days		as15util1	0=reported, 1=estimated, 2=expanded
788	EMCDDCH	NA	1	4087	4087	(Estimation Flag) Hospital Unit Medicaid Inpatient Discharges		as15util1	0=reported, 1=estimated, 2=expanded

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
789	EMCDIPDH	NA	1	4088	4088	(Estimation Flag) Hospital Unit Medicaid Inpatient Days		as15util1	0=reported, 1=estimated, 2=expanded
790	EMCRDCLT	NA	1	4089	4089	(Estimation Flag) Nursing Home Unit Medicare Inpatient Discharges		as15util1	0=reported, 1=estimated, 2=expanded
791	EMCRPDLT	NA	1	4090	4090	(Estimation Flag) Nursing Home Unit Medicare Inpatient Days		as15util1	0=reported, 1=estimated, 2=expanded
792	EMCDDCLT	NA	1	4091	4091	(Estimation Flag) Nursing Home Unit Medicaid Inpatient Discharges		as15util1	0=reported, 1=estimated, 2=expanded
793	EMCDPDLT	NA	1	4092	4092	(Estimation Flag) Nursing Home Unit Medicaid Inpatient Days		as15util1	0=reported, 1=estimated, 2=expanded
794	EBIRTHS	NA	1	4093	4093	(Estimation Flag) Births		as15util1	0=reported, 1=estimated, 2=expanded
795	ESUROPIP	NA	1	4094	4094	(Estimation Flag) Surgical Operations Inpatient		as15util1	0=reported, 1=estimated, 2=expanded
796	ESUROPOP	NA	1	4095	4095	(Estimation Flag) Surgical Operations Outpatient		as15util1	0=reported, 1=estimated, 2=expanded
797	ESUROPTO	NA	1	4096	4096	(Estimation Flag) Surgical Operations Total		as15util1	0=reported, 1=estimated, 2=expanded
798	EVEM	NA	1	4097	4097	(Estimation Flag) Outpatient Visits Emergency		as15util1	0=reported, 1=estimated, 2=expanded
799	EVOTH	NA	1	4098	4098	(Estimation Flag) Outpatient Visits Other		as15util1	0=reported, 1=estimated, 2=expanded
800	EVTOT	NA	1	4099	4099	(Estimation Flag) Outpatient Visits Total		as15util1	0=reported, 1=estimated, 2=expanded
801	EPAYTOT	NA	1	4100	4100	(Estimation Flag) Total Payroll Expenses		as15util1	0=reported, 1=estimated, 2=expanded
802	ENPAYBEN	NA	1	4101	4101	(Estimation Flag) Employee Benefits		as15util1	0=reported, 1=estimated, 2=expanded
803	EPAYTOTH	NA	1	4102	4102	(Estimation Flag) Hospital Unit Total Payroll Expenses		as15util1	0=reported, 1=estimated, 2=expanded
804	ENPYBENH	NA	1	4103	4103	(Estimation Flag) Hospital Unit Employee Benefits		as15util1	0=reported, 1=estimated, 2=expanded
805	EPYTOTLT	NA	1	4104	4104	(Estimation Flag) Nursing Home Unit Total Payroll Expenses		as15util1	0=reported, 1=estimated, 2=expanded
806	ENPBENLT	NA	1	4105	4105	(Estimation Flag) Nursing Home Unit Employee Benefits		as15util1	0=reported, 1=estimated, 2=expanded
807	EFTMDTF	NA	1	4106	4106	(Estimation Flag) Full Time Physicians and Dentists		as15util1	0=reported, 1=estimated, 2=expanded
808	EFTRES	NA	1	4107	4107	(Estimation Flag) Full Time Medical and Dental Residents		as15util1	0=reported, 1=estimated, 2=expanded
809	EFTTRN84	NA	1	4108	4108	(Estimation Flag) Full Time Other Trainees		as15util1	0=reported, 1=estimated, 2=expanded
810	EFTRNTF	NA	1	4109	4109	(Estimation Flag) Full Time Registered Nurses		as15util1	0=reported, 1=estimated, 2=expanded

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
811	EFTLPNTF	NA	1	4110	4110	(Estimation Flag) Full Time Licensed Practical or Vocational Nurses		as15util1	0=reported, 1=estimated, 2=expanded
812	EFTAST	NA	1	4111	4111	(Estimation Flag) Full Time Nursing assistive personnel		as15util1	0=reported, 1=estimated, 2=expanded
813	EFTRAD	NA	1	4112	4112	(Estimation Flag) Full Time Radiology technicians		as15util1	0=reported, 1=estimated, 2=expanded
814	EFTLAB	NA	1	4113	4113	(Estimation Flag) Full Time Laboratory technicians		as15util1	0=reported, 1=estimated, 2=expanded
815	EFTPHR	NA	1	4114	4114	(Estimation Flag) Full Time Pharmacists, licensed		as15util1	0=reported, 1=estimated, 2=expanded
816	EFTPHT	NA	1	4115	4115	(Estimation Flag) Full Time Pharmacy technicians		as15util1	0=reported, 1=estimated, 2=expanded
817	EFTRESP	NA	1	4116	4116	(Estimation Flag) Full Time Respiratory therapists		as15util1	0=reported, 1=estimated, 2=expanded
818	EFTOTHTF	NA	1	4117	4117	(Estimation Flag) Full Time All Other Personnel		as15util1	0=reported, 1=estimated, 2=expanded
819	EFTTOT	NA	1	4118	4118	(Estimation Flag) Full Time Total Personnel		as15util1	0=reported, 1=estimated, 2=expanded
820	EPTMDTF	NA	1	4119	4119	(Estimation Flag) Part Time Physicians and Dentists		as15util1	0=reported, 1=estimated, 2=expanded
821	EPTRES	NA	1	4120	4120	(Estimation Flag) Part Time Medical and Dental Residents		as15util1	0=reported, 1=estimated, 2=expanded
822	EPTTRN84	NA	1	4121	4121	(Estimation Flag) Part Time Other Trainees		as15util1	0=reported, 1=estimated, 2=expanded
823	EPTRNTF	NA	1	4122	4122	(Estimation Flag) Part Time Registered Nurses		as15util1	0=reported, 1=estimated, 2=expanded
824	EPTLPNTF	NA	1	4123	4123	(Estimation Flag) Part Time Licensed Practical or Vocational Nurses		as15util1	0=reported, 1=estimated, 2=expanded
825	EPTAST	NA	1	4124	4124	(Estimation Flag) Part Time Nursing assistive personnel		as15util1	0=reported, 1=estimated, 2=expanded
826	EPTRAD	NA	1	4125	4125	(Estimation Flag) Part Time Radiology technicians		as15util1	0=reported, 1=estimated, 2=expanded
827	EPTLAB	NA	1	4126	4126	(Estimation Flag) Part Time Laboratory technicians		as15util1	0=reported, 1=estimated, 2=expanded
828	EPTPHR	NA	1	4127	4127	(Estimation Flag) Part Time Pharmacists, licensed		as15util1	0=reported, 1=estimated, 2=expanded
829	EPTPHT	NA	1	4128	4128	(Estimation Flag) Part Time Pharmacy technicians		as15util1	0=reported, 1=estimated, 2=expanded
830	EPTRESP	NA	1	4129	4129	(Estimation Flag) Part Time Respiratory therapists		as15util1	0=reported, 1=estimated, 2=expanded
831	EPTOTHTF	NA	1	4130	4130	(Estimation Flag) Part Time All Other Personnel		as15util1	0=reported, 1=estimated, 2=expanded

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
832	EPTTOT	NA	1	4131	4131	(Estimation Flag) Part Time Total Personnel		as15util1	0=reported, 1=estimated, 2=expanded
833	EFTTOTH	NA	1	4132	4132	(Estimation Flag) Hospital Unit Total Full Time		as15util1	0=reported, 1=estimated, 2=expanded
834	EPTTOTH	NA	1	4133	4133	(Estimation Flag) Hospital Unit Total Part Time		as15util1	0=reported, 1=estimated, 2=expanded
835	EFTTOTLT	NA	1	4134	4134	(Estimation Flag) Nursing Home Unit Total Full Time		as15util1	0=reported, 1=estimated, 2=expanded
836	EPTTOTLT	NA	1	4135	4135	(Estimation Flag) Nursing Home Unit Total Part Time		as15util1	0=reported, 1=estimated, 2=expanded
837	EEXPTOT	NA	1	4136	4136	(Estimation Flag) Total Expenses		as15util1	0=reported, 1=estimated, 2=expanded
838	EXPTHB	NA	1	4137	4137	(Estimation Flag) Hospital total expenses, excluding bad debt		as15util1	0=reported, 1=estimated, 2=expanded
839	EXPTLB	NA	1	4138	4138	(Estimation Flag) Nursing home expenses, excluding bad debt		as15util1	0=reported, 1=estimated, 2=expanded
840	TECAR	N	8	4139	4146	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total employed	D.11.a.1.	as15util2	Number of physicians with privileges
841	TEMER	N	8	4147	4154	Emergency medicine - total employed	D.11.b.1.	as15util2	Number of physicians with privileges
842	TEHSP	N	8	4155	4162	Hospitalist - total employed	D.11.c.1.	as15util2	Number of physicians with privileges
843	TEINT	N	8	4163	4170	Intensivist - total employed	D.11.d.1.	as15util2	Number of physicians with privileges
844	TEGST	N	8	4171	4178	Radiologists/pathologist/anesthesiologist - total employed	D.11.e.1.	as15util2	Number of physicians with privileges
845	TEOTH	N	8	4179	4186	Other specialists - total employed	D.11.f.1.	as15util2	Number of physicians with privileges
846	TETOT	N	8	4187	4194	Total - Total Employed	D.11.g.1.	as15util2	Number of physicians with privileges
847	TCCAR	N	8	4195	4202	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total individual contract	D.11.a.2.	as15util2	Number of physicians with privileges
848	TCMER	N	8	4203	4210	Emergency medicine - total individual contract	D.11.b.2.	as15util2	Number of physicians with privileges
849	TCHSP	N	8	4211	4218	Hospitalist - total individual contract	D.11.c.2.	as15util2	Number of physicians with privileges
850	TCINT	N	8	4219	4226	Intensivist - total individual contract	D.11.d.2.	as15util2	Number of physicians with privileges
851	TCGST	N	8	4227	4234	Radiologists/pathologist/anesthesiologist - total individual contract	D.11.e.2.	as15util2	Number of physicians with privileges
852	TCOTH	N	8	4235	4242	Other specialist - total individual contract	D.11.f.2.	as15util2	Number of physicians with privileges
853	TCTOT	N	8	4243	4250	Total - individual contract	D.11.g.2.	as15util2	Number of physicians with privileges

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
854	TGCAR	N	8	4251	4258	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total group contract	D.11.a.3.	as15util2	Number of physicians with privileges
855	TGMER	N	8	4259	4266	Emergency medicine - total group contract	D.11.b.3.	as15util2	Number of physicians with privileges
856	TGHSP	N	8	4267	4274	Hospitalist - total group contract	D.11.c.3.	as15util2	Number of physicians with privileges
857	TGINT	N	8	4275	4282	Intensivist - total group contract	D.11.d.3.	as15util2	Number of physicians with privileges
858	TGGST	N	8	4283	4290	Radiologists/pathologist/anesthesiologist - total group contract	D.11.e.3.	as15util2	Number of physicians with privileges
859	TGOTH	N	8	4291	4298	Other specialist - total group contract	D.11.f.3.	as15util2	Number of physicians with privileges
860	TGTOT	N	8	4299	4306	Total - total group contract	D.11.g.3.	as15util2	Number of physicians with privileges
861	NECAR	N	8	4307	4314	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - not employed or under contract	D.11.a.4.	as15util2	Number of physicians with privileges
862	NEMER	N	8	4315	4322	Emergency medicine - not employed or under contract	D.11.b.4.	as15util2	Number of physicians with privileges
863	NEHSP	N	8	4323	4330	Hospitalist - not employed or under contract	D.11.c.4.	as15util2	Number of physicians with privileges
864	NEINT	N	8	4331	4338	Intensivist - not employed or under contract	D.11.d.4.	as15util2	Number of physicians with privileges
865	NEGST	N	8	4339	4346	Radiologists/pathologist/anesthesiologist - not employed or under contract	D.11.e.4.	as15util2	Number of physicians with privileges
866	NEOTH	N	8	4347	4354	Other specialist - not employed or under contract	D.11.f.4.	as15util2	Number of physicians with privileges
867	NETOT	N	8	4355	4362	Total - not employed or under contract	D.11.g.4.	as15util2	Number of physicians with privileges
868	TPCAR	N	8	4363	4370	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total privileged	D.11.a.5.	as15util2	Number of physicians with privileges
869	TPMER	N	8	4371	4378	Emergency medicine - total privileged	D.11.b.5.	as15util2	Number of physicians with privileges
870	TPHSP	N	8	4379	4386	Hospitalist - total privileged	D.11.c.5.	as15util2	Number of physicians with privileges
871	TPINT	N	8	4387	4394	Intensivist - total privileged	D.11.d.5.	as15util2	Number of physicians with privileges
872	TPGST	N	8	4395	4402	Radiologists/pathologist/anesthesiologist - total privileged	D.11.e.5.	as15util2	Number of physicians with privileges
873	TPOTH	N	8	4403	4410	Other specialist - total privileged	D.11.f.5.	as15util2	Number of physicians with privileges
874	TPRTOT	N	8	4411	4418	Total - total privileged	D.11.g.5.	as15util2	Number of physicians with privileges
875	HSPTL	N	1	4419	4419	Hospitalists Provide Care	D.12.a.	as15util2	1 = yes, 0 = no
876	FTEHSP	N	8	4420	4427	Hospitalists FTE	D.12.b.	as15util2	Hospitalists FTE

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
877	INTCAR	N	1	4428	4428	Intensivists provide care	D.13.a.	as15util2	1 = yes, 0 = no
878	FTEMSI	N	8	4429	4436	Intensivists FTE Medical-surgical intensive care	D.13.b.1.	as15util2	Intensivists FTE Medical-surgical intensive care
879	FTECIC	N	8	4437	4444	Intensivists FTE Cardiac intensive care	D.13.b.2.	as15util2	Intensivists FTE Cardiac intensive care
880	FTENIC	N	8	4445	4452	Intensivists FTE Neonatal care	D.13.b.3.	as15util2	Intensivists FTE Neonatal intensive care
881	FTEPIC	N	8	4453	4460	Intensivists FTE Pediatric intensive care	D.13.b.4.	as15util2	Intensivists FTE Pediatric intensive care
882	FTEOIC	N	8	4461	4468	Intensivists FTE Other intensive care	D.13.b.5.	as15util2	Intensivists FTE Other intensive care
883	FTEINT	N	8	4469	4476	Intensivists FTE Total	D.13.b.6.	as15util2	Intensivists FTE Total
884	CLSMSI	N	1	4477	4477	Closed medical surgical intensive care	D.13.b.1.	as15util2	1 = yes
885	CLSCIC	N	1	4478	4478	Closed cardiac intensive care	D.13.b.2.	as15util2	1 = yes
886	CLSNIC	N	1	4479	4479	Closed neonatal intensive care	D.13.b.3.	as15util2	1 = yes
887	CLSPIC	N	1	4480	4480	Closed pediatric intensive care	D.13.b.4.	as15util2	1 = yes
888	CLSOIC	N	1	4481	4481	Closed other intensive care	D.13.b.5.	as15util2	1 = yes
889	APRN	N	1	4482	4482	Do Advanced practice nurses/PA's provide care for patients in your hospital?	D.14.a.	as15util2	1 = yes, 0 = no
890	FTAPRN	N	8	4483	4490	FT Advanced practice nurses	D.14.b.	as15util2	Number of Full Time Advanced Practice Nurses
891	PTAPRN	N	8	4491	4498	PT Advanced practice nurses	D.14.b.	as15util2	Number of Part Time Advanced Practice Nurses
892	FTEAPN	N	8	4499	4506	FTE Advanced practice nurses	D.14.b.	as15util2	Number of Advanced Practice Nurse FTEs
893	**FTPHRN**	**N**	**8**	**4507**	**4514**	**FT Physician assistants**	**D.14.b.**	**as15util2**	**Number of Full Time Physician Assistants**
894	**PTPHRN**	**N**	**8**	**4515**	**4522**	**PT Physician assistants**	**D.14.b.**	**as15util2**	**Number of Part Time Physician Assistants**
895	**FTEPHRN**	**N**	**8**	**4523**	**4530**	**FTE Physician assistants**	**D.14.b.**	**as15util2**	**Number of Physician Assistant FTEs**
896	APCAR	N	1	4531	4531	Primary care Advanced practice nurses/PA's	D.14.c.	as15util2	1 = yes, 0 = no
897	APANES	N	1	4532	4532	Anesthesia services Advanced practice nurses/PA's	D.14.c.	as15util2	1 = yes, 0 = no
898	APEMER	N	1	4533	4533	Emergency department care Advanced practice nurses/PA's	D.14.c.	as15util2	1 = yes, 0 = no
899	APSPC	N	1	4534	4534	Other specialty care Advanced practice nurses/PA's	D.14.c.	as15util2	1 = yes, 0 = no
900	APED	N	1	4535	4535	Patient education Advanced practice nurses/PA's	D.14.c.	as15util2	1 = yes, 0 = no
901	APCASE	N	1	4536	4536	Case management Advanced practice nurses/PA's	D.14.c.	as15util2	1 = yes, 0 = no
902	APOTH	N	1	4537	4537	Other Advanced practice nurses/PA's		as15util2	1 = yes, 0 = no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
903	FORNRSA	N	1	4538	4538	Did your facility hire more foreign-educated nurses to help fill RN vacancies in 2015 vs. 2014?	D.15.a.	as15util2	0=did not hire, 1=more, 2=less, 3=same
904	AFRICA	N	1	4539	4539	From which countries/continents are you recruiting foreign-educated nurses> Africa	D.15.b.	as15util2	1 = yes, 0 = no
905	KOREA	N	1	4540	4540	From which countries/continents are you recruiting foreign-educated nurses? Korea	D.15.b.	as15util2	1 = yes, 0 = no
906	CANADA	N	1	4541	4541	From which countries/continents are you recruiting foreign-educated nurses? Canada	D.15.b.	as15util2	1 = yes, 0 = no
907	PH	N	1	4542	4542	From which countries/continents are you recruiting foreign-educated nurses? Philippines	D.15.b.	as15util2	1 = yes, 0 = no
908	CHINA	N	1	4543	4543	From which countries/continents are you recruiting foreign-educated nurses? China	D.15.b.	as15util2	1 = yes, 0 = no
909	INDIA	N	1	4544	4544	From which countries/continents are you recruiting foreign-educated nurses? India	D.15.b.	as15util2	1 = yes, 0 = no
910	OFRNRS	N	1	4545	4545	From which countries/continents are you recruiting foreign-educated nurses? Other	D.15.b.	as15util2	1 = yes, 0 = no
911	RNSCH	N	10	4546	4555	If your hospital hired RNs during the reporting period, how many were new graduates from nursing schools?	E.4.	as15util2	Number of new graduate RNs
912	PLNTA	N	10	4556	4565	Property, plant and equipment at cost	D.7.a.	as15util2	Property, plant and equipment at cost
913	ADEPRA	N	10	4566	4575	Accumulated depreciation	D.7.b.	as15util2	Accumulated depreciation
914	ASSNET	N	10	4576	4585	Net property, plant and equipment	D.7.c.	as15util2	Net property, plant and equipment
915	GFEET	N	10	4586	4595	Total gross square feet of your physical plant	D.7.d	as15util2	Total gross square feet
916	CEAMT	N	10	4596	4605	Total Capital Expenditures	D.8.	as15util2	Total Capital Expenditures
917	ENDMARK	N	1	4606	4606	End of Survey			

Appendix A - Control Code Descriptions

Code	Description
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

Appendix B - Primary 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 a facility for persons with intellectual disabilities
13	Surgical
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	Intellectual disabilities
80	Acute long-term care hospital
82	Alcoholism and other chemical dependency
90	Children's acute long-term Care

Appendix C - Census Division and State Code Descriptions

State Code	Description		State Code	Description		State 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			
16	Connecticut					**CENSUS DIVISION 8: MOUNTAIN**	
			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
						86	Arizona
CENSUS DIVISION 3: SOUTH ATLANTIC			**CENSUS DIVISION 6: WEST NORTH CENTRAL**			87	Utah
31	Delaware		61	Minnesota		88	Nevada
32	Maryland		62	Iowa			
33	District of Columbia		63	Missouri		**CENSUS DIVISON 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	
						3	Marshall Islands
						4	Puerto Rico
						5	Virgin Islands
						6	Guam
						7	American Samoa
						8	Northern Mariana Islands

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 F - City Rank Code List

Code	City	State	Code	City	State	Code	City	State
1	New York	NY	35	Sacramento	CA	69	Plano	TX
2	Los Angeles	CA	36	Kansas City	MO	70	Newark	NJ
3	Chicago	IL	37	Long Beach	CA	71	Toledo	OH
4	Houston	TX	38	Mesa	AZ	72	Lincoln	NE
5	Philadelphia	PA	39	Atlanta	GA	73	Orlando	FL
6	Phoenix	AZ	40	Colorado Springs	CO	74	Chula Vista	CA
7	San Antonio	TX	41	Virginia Beach	VA	75	Jersey City	NJ
8	San Diego	CA	42	Raleigh	NC	76	Chandler	AZ
9	Dallas	TX	43	Omaha	NE	77	Fort Wayne	IN
10	San Jose	CA	44	Miami	FL	78	Buffalo	NY
11	Austin	TX	45	Oakland	CA	79	Durham	NC
12	Jacksonville	FL	46	Minneapolis	MN	80	Saint Petersburg	FL
13	San Francisco	CA	47	Tulsa	OK	81	Laredo	TX
14	Indianapolis	IN	48	Wichita	KS	82	Lubbock	TX
15	Columbus	OH	49	New Orleans	LA	83	Madison	WI
16	Fort Worth	TX	50	Arlington	TX	84	Gilbert	AZ
17	Charlotte	NC	51	Cleveland	OH	85	Norfolk	VA
18	Seattle	WA	52	Bakersfield	CA	86	Reno	NV
19	Denver	CO	53	Tampa	FL	87	Winston-Salem	NC
20	El Paso	TX	54	Aurora	CO	88	Glendale	AZ
21	Detroit	MI	55	Honolulu	HI	89	Hialeah	FL
22	Washington	DC	56	Anaheim	CA	90	Garland	TX
23	Boston	MA	57	Santa Ana	CA	91	Scottsdale	AZ
24	Memphis	TN	58	Corpus Christi	TX	92	Irving	TX
25	Nashville	TN	59	Riverside	CA	93	Chesapeake	VA
26	Portland	OR	60	St. Louis	MO	94	North Las Vegas	NV
27	Oklahoma City	OK	61	Lexington	KY	95	Fremont	CA
28	Las Vegas	NV	62	Stockton	CA	96	Baton Rouge	LA
29	Baltimore	MD	63	Pittsburgh	PA	97	Richmond	VA
30	Louisville	KY	64	Saint Paul	MN	98	Boise	ID
31	Milwaukee	WI	65	Anchorage	AK	99	San Bernardino	CA
32	Albuquerque	NM	66	Cincinnati	OH	100	Spokane	WA
33	Tucson	AZ	67	Henderson	NV			
34	Fresno	CA	68	Greensboro	NC			

Appendix G - Health Care System Taxonomy Description

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 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.
6 or blank	Blank	Sufficient data from the FY 2015 Annual Survey were not available to determine a cluster assignment.

Appendix H - Estimation, Modified FIPS, and Length of Stay

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 AHA's internal database.

AHA ID	Hospital Name	Bed Size code
Control/Ownership	CEO Name	Length of Stay code
Primary Service code	Address	County code
Number of Bassinets	City	City Rank
Total Beds	State	All accreditation and affiliation flags
Membership Type	ZIP code	(MAPP1 through MAPP22)
Long term/Short term flag	Area code	
Control Code – Membership	Telephone number	
Service Code - Membership		

- 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 0, 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.

SUMMARY OF REGISTERED HOSPITALS

2014 vs 2015 Annual Survey Data

CLASSIFICATION	TOTAL	UNITED STATES	ASSOCIATED AREAS
2014 TOTAL	**5,692**	**5,627**	**65**
DELETIONS			
Status changed from registered to non-registered	1	1	0
Changed to inpatient care other than a hospital	3	3	0
Changed to an outpatient facility	8	8	0
Closed	41	41	0
Demerged/Dissolution	0	0	0
Duplicate record	0	0	0
Merged to form a new hospital	0	0	0
Merged into a hospital already on file	12	12	0
Temporarily inactive record/Under construction	0	0	0
TOTAL DELETIONS	**65**	**65**	**0**
ADDITIONS			
Status changed from non-registered to registered	2	2	0
Demerger result	0	0	0
Merger result	0	0	0
Newly added to the registered file	0	0	0
Previously closed/reopened	0	0	0
Changed to hospital from other inpatient care	0	0	0
TOTAL ADDITIONS	**2**	**2**	**0**
2015 TOTAL	**5,629**	**5,564**	**65**

REGISTERED DELETIONS

The following records have been deleted from the 2015 Annual Survey file of <u>registered</u> hospitals.

ID	NAME	CITY	STATE	REASON FOR DELETION and Parent Organization for Merged Entities
6110173	Parkview Adventist Medical Center	Brunswick	ME	Ambulatory Care Center
6141800	Spaulding Hospital for Continuing Medical Care North Shore	Salem	MA	Closed
6210770	NYU Lutheran	Brooklyn	NY	Merged into 6212925 NYU Lagone Medical Center - New York, NY
6211614	(Long Island Jewish) Forest Hills Hospital	Forest Hills	NY	Merged into 6211680 Long Island Jewish Medical Center - New York, NY
6214010	Summit Park Hospital and Nursing Care Center	Pomona	NY	Closed
6215155	(Long Island Jewish Valley Stream) Franklin Hospital	Valley Stream	NY	Merged into 6211680 Long Island Jewish Medical Center - New York, NY
6233440	Clear Brook Manor	Wilkes-Barre	PA	Not operating as a hospital (Residential Treatment Center)
6340325	Riverside Behavioral Health Center	Hampton	VA	Merged into 6340520 Riverside Regional Medical Center - Newport News, VA
6360212	Crawley Memorial Hospital	Shelby	NC	Closed
6360945	Novant Health Franklin Medical Center	Louisburg	NC	Closed
6361705	Yadkin Valley Community Hospital	Yadkinville	NC	Closed
6370048	Southern Palmetto Hospital	Barnwell	SC	Closed
6370411	Williamsburg Regional Hospital	Kingstree	SC	Temporarily Closed
6380566	North Georgia Medical Center	Ellijay	GA	Closed
6390495	Florida Medical Center - A Campus of North Shore	Fort Lauderdale	FL	Merged into 6390615 North Shore Medical Center - Miami, FL
6390711	North Florida/South Georgia Veteran's Health System	Gainesville	FL	Status changed to nonregistered
6410150	Summa Barberton Citizens Hospital	Barberton	OH	Merged into 6410012 Summa Health System - Akron, OH
6411490	Lakewood Hospital	Lakewood	OH	Closed
6420057	St. Vincent Seton Specialty Hospital	Lafayette	IN	Closed
6420960	Indiana University Health Morgan Hospital	Martinsville	IN	Ambulatory Care Center
6433030	HSHS St. Mary's Hospital	Streator	IL	Closed
6440024	Mercy Health, Mercy Campus	Muskegon	MI	Merged into 6441880 Mercy Health Hackley Campus
6450033	Wheaton Franciscan Healthcare - The Wisconsin Heart Hospital	Wauwatosa	WI	Closed
6510795	New Horizons Health Systems	Owenton	KY	Emergency/Urgent Care Center
6520645	Medical Center of Manchester	Manchester	TN	Closed
6520772	Baptist Rehabilitation-Germantown	Germantown	TN	Not operating as a hospital
6521167	Tennova Healthcare McNairy Regional Hospital	Selmer	TN	Closed
6521180	Methodist Healthcare-Fayette Hospital	Somerville	TN	Closed
6538099	Northport Medical Center	Northport	AL	Merged into 6530960 DCH Regional Medical Center - Tuscaloosa, AL
6540031	Regency Hospital of Jackson	Jackson	MS	Closed
6540658	Pioneer Community Hospital of Newton	Newton	MS	Closed
6610036	CHI Albany Area Health	Albany	MN	Ambulatory Care Center
6620250	Mental Health Institute	Clarinda	IA	Closed
6620980	Mental Health Institute	Mount Pleasant	IA	Closed
6630750	Missouri Rehabilitation Center	Mount Vernon	MO	Closed
6639070	Parkland Health Center - Weber Road	Farmington	MO	Closed
6660640	CHI Health Creighton University Medical Center	Omaha	NE	Merged into 6660720 CHI Health Bergan Mercy - Omaha, NE
6670027	Select Specialty Hospital-Topeka	Topeka	KS	Closed
6670440	Mercy Hospital Independence	Independence	KS	Closed
6710026	Regency Hospital of Northwest Arkansas	Fayetteville	AR	Closed
6720334	Regional Medical Center of Acadiana	Lafayette	LA	Merged into 6720340 Lafayette General Medical Center - Lafayette, LA
6720490	Dauterive Hospital	New Iberia	LA	Closed
6730068	Norman Specialty Hospital	Norman	OK	Closed
6730385	Epic Medical Center	Eufaula	OK	Ambulatory Care Center
6730440	Memorial Hospital and Physician Group	Frederick	OK	Closed
6730995	Sayre Memorial Hospital	Sayre	OK	Closed
6740041	Central Texas Hospital	Cameron	TX	Closed
6740252	East Texas Medical Center-Gilmer	Gilmer	TX	Closed
6740275	Kindred Hospital North Houston	Houston	TX	Closed
6740278	Kindred Hospital East Houston	Channelview	TX	Closed
6740348	Regency Hospital of Fort Worth	Fort Worth	TX	Closed

REGISTERED DELETIONS

The following records have been deleted from the 2015 Annual Survey file of <u>registered</u> hospitals.

ID	NAME	CITY	STATE	REASON FOR DELETION and Parent Organization for Merged Entities
6740411	Bowie Memorial Hospital	Bowie	TX	Closed
6740422	CHRISTUS Dubuis Hospital of Bryan	Bryan	TX	Closed
6740620	East Texas Medical Center Clarksville	Clarksville	TX	Closed
6740716	Hunt Regional Community Hospital	Commerce	TX	Emergency/Urgent Care Center
6740925	Baylor Specialty Hospital	Dallas	TX	Closed
6741880	Select Specialty Hospital-Houston Heights	Houston	TX	Closed
6742575	East Texas Medical Center-Mount Vernon	Mount Vernon	TX	Closed
6742695	Baptist Orange Hospital	Orange	TX	Emergency/Urgent Care Center
6743756	Lake Whitney Medical Center	Whitney	TX	Closed
6820235	U. S. Air Force Clinic	Mountain Home AFB	ID	Ambulatory Care Center
6849015	Cleo Wallace Centers Hospital	Westminster	CO	Not operating as a hospital (Residential Treatment Center) Merged into 6850055
6850029	Presbyterian Kaseman Hospital	Albuquerque	NM	Presbyterian Hospital - Alberquerque, NM Merged into 6933440
6930123	Arroyo Grande Community Hospital	Arroyo Grande	CA	Marian Regional Medical - Santa Maria, CA
6930452	Colusa Regional Medical Center	Colusa	CA	Closed

REGISTERED ADDITIONS

The following records have been added to the 2015 Annual Survey file of <u>registered</u> hospitals.

ID	NAME	CITY	STATE	REASON FOR ADDITION
6740885	HEALTHSOUTH Rehabilitation Hospital - Dallas	Dallas	TX	Previously nonregistered
6230499	OSS Orthopaedic Hospital	York	PA	Previously nonregistered

Summary of Nonregistered Hospitals
2014 vs 2015 Annual Survey Data

CLASSIFICATION	TOTAL	UNITED STATES	ASSOCIATED AREAS
2014 TOTAL	**547**	**547**	**0**
DELETIONS			
Status changed from non-registered to registered	2	2	0
Changed to inpatient care other than a hospital	0	0	0
Changed to an outpatient facility	1	1	0
Closed	9	9	0
Demerged	0	0	0
Duplicate record	0	0	0
Merged to form a new hospital	0	0	0
Merged into a hospital already on file	3	3	0
Temporarily inactive record	0	0	0
TOTAL DELETIONS	**15**	**15**	**0**
ADDITIONS			
Status changed from registered to non-registered	1	1	0
Demerger result	1	1	0
Merger result	0	0	0
Newly added to the non-registered file	88	82	6
Previously closed/reopened	0	0	0
Duplicate record	0	0	0
TOTAL ADDITIONS	**90**	**84**	**6**
2015 TOTAL	**622**	**616**	**6**

Nonregistered Deletions

The following records have been deleted from the 2015 Annual Survey file of **nonregistered** hospitals.

ID	NAME	CITY	STATE	REASON FOR DELETION and Parent Organization for merged entities
6230499	OSS Orthopaedic Hospital	York	PA	Status changed to registered
6520024	Methodist Extended Care Hospital	Memphis	TN	Closed
6630153	Southeast Health Center of Reynolds County	Ellington	MO	Closed
6720062	Community Specialty Hospital	Lafayette	LA	Closed
6720168	Ouachita Community Hospital	West Monroe	LA	Merged into 6720891 Glenwood Regional Medical Center - West Monroe, LA
6720188	AMG Specialty Hospital-Slidell	Slidell	LA	Closed
6740308	Victory Medical Center Mid-Cities	Hurst	TX	Closed
6740552	BCA Permian Basin	Midland	TX	Closed
6740553	Forest Park Medical Center	Dallas	TX	Closed
6740555	Victory Medical Center Craig Ranch	McKinney	TX	Emergency/Urgent Care Center
6740666	Baylor Institute for Rehabilitation at Northwest Dallas	Dallas	TX	Closed
6740885	HEALTHSOUTH Rehabilitation Hospital - Dallas	Dallas	TX	Status changed to registered
6740897	Forest Park Medical Center Frisco	Frisco	TX	Merged into 6742865 Medical Center of Plano - Plano, TX
6740944	Cambridge Hospital in Houston	Houston	TX	Closed
6880035	Sierra Surgery Hospital	Carson City	NV	Merged into 6880025 Carson Tahoe Hospital - Tahoe, NV

Nonregistered Additions

The following records have been added to the 2015 Annual Survevy file of **nonregistered** hospitals.

ID	NAME	CITY	STATE	REASON FOR ADDITION
6040391	Hospital Menonita De Caguas	Caguas	PR	Newly added
6040396	Hospital San Antonio	Mayaguez	PR	Newly added
6040397	Hospital de Psiquiatria Forense	Ponce	PR	Newly added
6048008	Hospital Psiquiatrico Correccional	San Juan	PR	Newly added
6048009	Centro de Trauma	Moca	PR	Newly added
6080001	Commonwealth Health Center	Saipan	MP	Newly added
6141450	Beth Israel Deaconess Hospital-Needham Campus	Needham	MA	Formerly unit of 6140013 (Beth Israel Deaconess Med Center)
6220469	Cornerstone Behavioral Health Hospital of Union County	Berkeley Heights	NJ	Newly added
6221340	Robert Wood Johnson University Hospital Somerset	Somerville	NJ	Newly added
6230287	Pennsylvania Psychiatric Institute	Harrisburg	PA	Newly added
6230505	Advanced Surgical Hospital	Washington	PA	Newly added
6230538	Helen M. Simpson Rehabilitation Hospital	Harrisburg	PA	Newly added
6320391	Holy Cross Germantown Hospital	Germantown	MD	Newly added
6349173	The Pavilion at Williamsburg Place	Williamsburg	VA	Newly added
6360439	Carolinas ContinueCARE Hospital at Kings Mountain	Kings Mountain	NC	Newly added
6369135	Strategic Behavioral Health - Raleigh	Garner	NC	Newly added
6369136	Strategic Behavioral Health - Wilmington	Leland	NC	Newly added
6369137	Strategic Behavioral Health - Charlotte	Charlotte	NC	Newly added
6380257	SummitRidge Hospital	Lawrenceville	GA	Newly added
6380497	Northeast Georgia Medical Center Braselton	Braselton	GA	Newly added
6380498	Landmark Hospital of Savannah	Savannah	GA	Newly added
6381200	Greenleaf Center	Valdosta	GA	Newly added
6389228	Emory Rehabilitation Hospital	Atlanta	GA	Newly added
6390711	North Florida/South Georgia Veteran's Health System	Gainesville	FL	Previously classified as registered
6390713	Landmark Hospital of Southwest Florida	Naples	FL	Newly added
6390714	Healthsouth Rehabilitation Hospital of Altamonte Springs	Altamonte Springs	FL	Newly added
6390716	Promise Hospital of Miami	Miami	FL	Newly added
6399253	Select Specialty Hospital Daytona Beach	Daytona Beach	FL	Newly added
6399254	Promise Hospital of Fort Myers	Fort Myers	FL	Newly added
6399255	North Tampa Behavioral Health	Wesley Chapel	FL	Newly added
6410522	Summa Rehab Hospital	Akron	OH	Newly added
6410545	Select Specialty Hospital - Boardman	Boardman	OH	Newly added
6410558	King's Daughters Medical Center Ohio	Portsmouth	OH	Newly added
6410559	Cleveland Clinic Rehabilitation Hospital	Avon	OH	Newly added
6429154	NorthEastern Center	Auburn	IN	Newly added
6430447	Garfield Park Hospital	Chicago	IL	Newly added
6520009	Quillen Rehabilitation Hospital	Johnson City	TN	Newly added
6520456	TrustPoint Hospital	Murfreesboro	TN	Newly added
6520471	Baptist Memorial Rehabilitation Hospital	Germantown	TN	Newly added
6521093	Pioneer Community Hospital of Scott	Oneida	TN	Newly added
6529208	Regional One Health Extended Care Hospital	Memphis	TN	Newly added
6530404	Behavioral Healthcare Center at Huntsville	Huntsville	AL	Newly added
6620414	Select Specialty Hospital-Des Moines	Des Moines	IA	Newly added
6639248	Osage Beach Center for Cognitive Disorders	Osage Beach	MO	Newly added
6660417	Select Specialty Hospital - Lincoln	Lincoln	NE	Newly added
6660418	Madonna Rehabilitation Hospital	Lincoln	NE	Newly added
6669152	Madonna Rehabilitation Specialty Hospital	Bellevue	NE	Newly added
6670459	Premier Surgical Institute	Galena	KS	Newly added
6670467	Blue Valley Hospital	Overland Park	KS	Newly added
6710027	Regency Hospital of Northwest Arkansas - Springdale	Springdale	AR	Newly added
6720345	Women's and Children's Hospital	Lafayette	LA	Newly added
6720504	Phoenix Behavioral Hospital	Rayne	LA	Newly added
6720693	Compass Behavioral Center of Houma	Houma	LA	Newly added
6740067	Select Specialty Hospital-Houston West	Houston	TX	Newly added
6740277	Kindred Hospital Clear Lake	Webster	TX	Newly added
6740373	Kindred Hospital Tomball	Tomball	TX	Newly added
6740387	Baylor St. Luke's Medical Center McNair Campus	Houston	TX	Newly added
6740880	Scott & White Hospital - Marble Falls	Marble Falls	TX	Newly added
6740969	ContinueCARE Hospital at Midland Memorial	Midland	TX	Newly added
6741008	Vibra Rehabilitation Hospital Lake Travis	Lakeway	TX	Newly added
6741009	Select Specialty Hospital - Dallas Downtown	Dallas	TX	Newly added
6741011	Select Specialty Hospital - Dallas Garland	Garland	TX	Newly added
6741017	Little River Cameron Hospital	Cameron	TX	Newly added
6741019	Woodlands Specialty Hospital	The Woodlands	TX	Newly added

Nonregistered Additions

The following records have been added to the 2015 Annual Survevy file of **nonregistered** hospitals.

ID	NAME	CITY	STATE	REASON FOR ADDITION
6741023	Rock Prairie Behavioral Health	College Station	TX	Newly added
6741026	Haven Behavioral Hospital of Frisco	Frisco	TX	Newly added
6741027	Georgetown Behavioral Health Institute	Georgetown	TX	Newly added
6741028	Pearland Medical Center	Pearland	TX	Newly added
6741037	Children's Medical Center Plano	Plano	TX	Newly added
6741038	Medical Center Alliance	Fort Worth	TX	Newly added
6741042	Emerus Community Hospital	Tomball	TX	Newly added
6741043	Weatherford Rehabilitation Hospital	Weatherford	TX	Newly added
6741047	Oceans Behavioral Hospital Katy	Katy	TX	Newly added
6741048	Oceans Behavioral Hospital Fort Worth	Fort Worth	TX	Newly added
6741052	Texas Rehabilitation Hospital of Arlington	Arlington	TX	Newly added
6741053	Laredo Rehabilitation Hospital	Laredo	TX	Newly added
6741054	Weimar Medical Center	Weimar	TX	Newly added
6741735	Texas General Hospital - Van Zandt Regional Medical Center	Grand Saline	TX	Newly added
6840156	Select Specialty Hospital - Denver, Inc.	Denver	CO	Newly added
6840416	West Springs Hospital	Grand Junction	CO	Newly added
6840445	Banner Fort Collins Medical Center	Fort Collins	CO	Newly added
6860057	Restora Hospital of Mesa	Mesa	AZ	Newly added
6860058	Restora Hospital of Sun City	Sun City	AZ	Newly added
6860469	Dignity Health Arizona General Hospital	Laveen	AZ	Newly added
6860476	Oasis Behavioral Health - Chandler	Chandler	AZ	Newly added
6879349	Landmark Hospital of Salt Lake City	Murray	UT	Newly added
6930206	Loma Linda University Children's Hospital	Loma Linda	CA	Newly added
6930706	Martin Luther King, Jr. Community Hospital	Los Angeles	CA	Newly added
6932900	California Pacific Medical Center-Davies Campus	San Francisco	CA	Newly added
6933500	Sonoma West Medical Center	Sebastopol	CA	Newly added

Mergers and Acquisitions

ID	NAME	CITY	STATE	MERGER INFORMATION and Parent Organization
6210770	NYU Lutheran	Brooklyn	NY	Merged into 6212925 NYU Lagone Medical Center - New York, NY
6211614	(Long Island Jewish) Forest Hills Hospital	Forest Hills	NY	Merged into 6211680 Long Island Jewish Medical Center - New York, NY
6215155	(Long Island Jewish Valley Stream) Franklin Hospital	Valley Stream	NY	Merged into 6211680 Long Island Jewish Medical Center - New York, NY
6340325	Riverside Behavioral Health Center	Hampton	VA	Merged into 6340520 Riverside Regional Medical Center - Newport News, VA
6390495	Florida Medical Center - A Campus of North Shore	Fort Lauderdale	FL	Merged into 6390615 North Shore Medical Center - Miami, FL
6410150	Summa Barberton Citizens Hospital	Barberton	OH	Merged into 6410012 Summa Health System - Akron, OH
6440024	Mercy Health, Mercy Campus	Muskegon	MI	Merged into 6441880 Mercy Health Hackley Campus
6538099	Northport Medical Center	Northport	AL	Merged into 6530960 DCH Regional Medical Center - Tuscaloosa, AL
6660640	CHI Health Creighton University Medical Center	Omaha	NE	Merged into 6660720 CHI Health Bergan Mercy - Omaha, NE
6720168	Ouachita Community Hospital	West Monroe	LA	Merged into 6720891 Glenwood Regional Medical Center - West Monroe, LA
6720334	Regional Medical Center of Acadiana	Lafayette	LA	Merged into 6720340 Lafayette General Medical Center - Lafayette, LA
6740897	Forest Park Medical Center Frisco	Frisco	TX	Merged into 6742865 Medical Center of Plano - Plano, TX
6850029	Presbyterian Kaseman Hospital	Albuquerque	NM	Merged into 6850055 Presbyterian Hospital - Alberquerque, NM
6880035	Sierra Surgery Hospital	Carson City	NV	Merged into 6880025 Carson Tahoe Hospital - Tahoe, NV
6930123	Arroyo Grande Community Hospital	Arroyo Grande	CA	Merged into 6933440 Marian Regional Medical - Santa Maria, CA

2015 AHA Annual Survey
Health Forum, L.L.C.

HOSPITAL NAME:_____

CITY & STATE: _____

A. REPORTING PERIOD (please refer to the instructions and definitions at the end of this questionnaire)

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 patients:

- ☐ 10 General medical and surgical
- ☐ 11 Hospital unit of an institution (prison hospital, college infirmary)
- ☐ 12 Hospital unit within a facility for persons with intellectual disabilities
- ☐ 13 Surgical
- ☐ 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
- ☐ 62 Intellectual disabilities
- ☐ 80 Acute long-term care hospital
- ☐ 82 Alcoholism and other chemical dependency
- ☐ 49 Other - specify treatment area: _____

B. ORGANIZATIONAL STRUCTURE (continued)

3. OTHER

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

    b. Does the hospital itself operate subsidiary corporations? …………………………………………… YES ☐   NO ☐

    c. Is the hospital contract managed? If yes, please provide the name, city, and state of the organization.... YES ☐   NO ☐

        Name: _____   City: _____   State: _____

    d. Is the hospital a participant in a network? ……………………………………………………………………YES ☐   NO ☐
        If yes, please provide the name, city, state and telephone number of the network(s).

        Name: _____   City: _____   State: _____ Telephone_____

        Name: _____   City: _____   State: _____ Telephone_____

        Name: _____   City: _____   State: _____ Telephone_____

    e. Is your hospital owned in whole or in part by physicians or a physician group?... YES ☐   NO ☐

    f. If you checked 80 Acute long-term care hospital (LTCH) in Section B2 (Service), please indicate if you are a freestanding LTCH or a LTCH arranged within a general acute care hospital.
        ☐ Free standing LTCH   ☐ LTCH arranged in a general acute care hospital

        If you are arranged in a general acute care hospital, what is your host hospital's name?

        Name_____ City_____ State_____

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. If you check column (1) C1-19, please include the number of **staffed beds**. *The sum of the beds reported in 1-19 should equal Section D(1b), beds set up and staffed on page 9.*

	(1) Owned or provided by my hospital or its subsidiary	(2) Provided by my Health System (in my local community)	(3) Provided through a formal contractual arrangement or joint venture with another provider that is not in my system (in my local community)	(4) Do Not Provide
1. General medical-surgical care .... (#Beds_____)	☐	☐	☐	☐
2. Pediatric medical-surgical care .... (#Beds_____)	☐	☐	☐	☐
3. Obstetrics…………..[Hospital level of unit (1-3):(____)] (#Beds_____)	☐	☐	☐	☐
4. Medical-surgical intensive care .... (#Beds_____)	☐	☐	☐	☐
5. Cardiac intensive care .... (#Beds_____)	☐	☐	☐	☐
6. Neonatal intensive care .... (#Beds_____)	☐	☐	☐	☐
7. Neonatal intermediate care.. (#Beds_____)	☐	☐	☐	☐
8. Pediatric intensive care .... (#Beds_____)	☐	☐	☐	☐
9. Burn care .... (#Beds_____)	☐	☐	☐	☐
10. Other special care _____ .... (#Beds_____)	☐	☐	☐	☐
11. Other intensive care_____ .... (#Beds_____)	☐	☐	☐	☐
12. Physical rehabilitation... (#Beds_____)	☐	☐	☐	☐
13. Alcoholism-drug abuse or dependency care .... (#Beds_____)	☐	☐	☐	☐
14. Psychiatric care .... (#Beds_____)	☐	☐	☐	☐
15. Skilled nursing care .... (#Beds_____)	☐	☐	☐	☐
16. Intermediate nursing care .... (#Beds_____)	☐	☐	☐	☐
17. Acute long-term care .... (#Beds_____)	☐	☐	☐	☐
18. Other long-term care .... (#Beds_____)	☐	☐	☐	☐
19. Other care _____ .... (#Beds_____)	☐	☐	☐	☐
20. Adult day care program	☐	☐	☐	☐
21. Airborne infection isolation room…………………….. (#rooms _____)	☐	☐	☐	☐
22. Alcoholism-drug abuse or dependency outpatient services.............	☐	☐	☐	☐
23. Alzheimer Center...	☐	☐	☐	☐
24. Ambulance services	☐	☐	☐	☐
25. Ambulatory surgery center..	☐	☐	☐	☐
26. Arthritis treatment center	☐	☐	☐	☐
27. Assisted living..	☐	☐	☐	☐
28. Auxiliary...	☐	☐	☐	☐
29. Bariatric/weight control services..	☐	☐	☐	☐
30. Birthing room/LDR room/LDRP room...	☐	☐	☐	☐
31. Blood Donor Center..	☐	☐	☐	☐
32. Breast cancer screening/mammograms.......................................	☐	☐	☐	☐

C. FACILITIES AND SERVICES (continued)

	(1) Owned or provided by my hospital or its subsidiary	(2) Provided by my Health System (in my local community)	(3) Provided through a formal contractual arrangement or joint venture with another provider that is not in my system (in my local community)	(4) Do Not Provide
33. Cardiology and cardiac surgery services				
a. Adult cardiology services	☐	☐	☐	☐
b. Pediatric cardiology services	☐	☐	☐	☐
c. Adult diagnostic catheterization	☐	☐	☐	☐
d. Pediatric diagnostic catheterization	☐	☐	☐	☐
e. Adult interventional cardiac catheterization	☐	☐	☐	☐
f. Pediatric interventional cardiac catheterization	☐	☐	☐	☐
g. Adult cardiac surgery	☐	☐	☐	☐
h. Pediatric cardiac surgery	☐	☐	☐	☐
i. Adult cardiac electrophysiology	☐	☐	☐	☐
j. Pediatric cardiac electrophysiology	☐	☐	☐	☐
k. Cardiac rehabilitation	☐	☐	☐	☐
34. Case management	☐	☐	☐	☐
35. Chaplaincy/pastoral care services	☐	☐	☐	☐
36. Chemotherapy	☐	☐	☐	☐
37. Children's wellness program	☐	☐	☐	☐
38. Chiropractic services	☐	☐	☐	☐
39. Community outreach	☐	☐	☐	☐
40. Complementary and alternative medicine services	☐	☐	☐	☐
41. Computer assisted orthopedic surgery (CAOS)	☐	☐	☐	☐
42. Crisis prevention	☐	☐	☐	☐
43. Dental services	☐	☐	☐	☐
44. Emergency services				
a. Emergency department	☐	☐	☐	☐
b. Pediatric emergency department	☐	☐	☐	☐
c. Satellite emergency department	☐	☐	☐	☐
d. If you checked column 1 for Satellite ED (44c), is the department open 24 hours a day, 7 days a week? Yes ☐ No ☐				
e. Trauma center (certified) ….[Hospital level of unit (1-3) _____]	☐	☐	☐	☐
45. Enabling services	☐	☐	☐	☐
46. Endoscopic services				
a. Optical colonoscopy	☐	☐	☐	☐
b. Endoscopic ultrasound	☐	☐	☐	☐
c. Ablation of Barrett's esophagus	☐	☐	☐	☐
d. Esophageal impedance study	☐	☐	☐	☐
e. Endoscopic retrograde cholangiopancreatography (ERCP)	☐	☐	☐	☐
47. Enrollment (insurance) assistance services	☐	☐	☐	☐
48. Extracorporeal shock wave lithotripter (ESWL)	☐	☐	☐	☐
49. Fertility clinic	☐	☐	☐	☐
50. Fitness center	☐	☐	☐	☐
51. Freestanding outpatient care center	☐	☐	☐	☐
52. Geriatric services	☐	☐	☐	☐
53. Health fair	☐	☐	☐	☐

C. FACILITIES AND SERVICES (continued)

	(1) Owned or provided by my hospital or its subsidiary	(2) Provided by my Health System (in my local community)	(3) Provided through a formal contractual arrangement or joint venture with another provider that is not in my system (in my local community)	(4) Do Not Provide
54. Community health education	☐	☐	☐	☐
55. Genetic testing/counseling	☐	☐	☐	☐
56. Health screenings	☐	☐	☐	☐
57. Health research	☐	☐	☐	☐
58. Hemodialysis	☐	☐	☐	☐
59. HIV/AIDS services	☐	☐	☐	☐
60. Home health services	☐	☐	☐	☐
61. Hospice program	☐	☐	☐	☐
62. Hospital-based outpatient care center services	☐	☐	☐	☐
63. Immunization program	☐	☐	☐	☐
64. Indigent care clinic	☐	☐	☐	☐
65. Linguistic/translation services	☐	☐	☐	☐
66. Meals on wheels	☐	☐	☐	☐
67. Mobile health services	☐	☐	☐	☐
68. Neurological services	☐	☐	☐	☐
69. Nutrition program	☐	☐	☐	☐
70. Occupational health services	☐	☐	☐	☐
71. Oncology services	☐	☐	☐	☐
72. Orthopedic services	☐	☐	☐	☐
73. Outpatient surgery	☐	☐	☐	☐
74. Pain management program	☐	☐	☐	☐
75. Palliative care program	☐	☐	☐	☐
76. Palliative care inpatient unit	☐	☐	☐	☐
77. Patient controlled analgesia (PCA)	☐	☐	☐	☐
78. Patient education center	☐	☐	☐	☐
79. Patient representative services	☐	☐	☐	☐
80. Physical rehabilitation services				
a. Assistive technology center	☐	☐	☐	☐
b. Electrodiagnostic services	☐	☐	☐	☐
c. Physical rehabilitation outpatient services	☐	☐	☐	☐
d. Prosthetic and orthotic services	☐	☐	☐	☐
e. Robot-assisted walking therapy	☐	☐	☐	☐
f. Simulated rehabilitation environment	☐	☐	☐	☐
81. Primary care department	☐	☐	☐	☐
82. Psychiatric services				
a. Psychiatric child-adolescent services	☐	☐	☐	☐
b. Psychiatric consultation-liaison services	☐	☐	☐	☐
c. Psychiatric education services	☐	☐	☐	☐
d. Psychiatric emergency services	☐	☐	☐	☐
e. Psychiatric geriatric services	☐	☐	☐	☐
f. Psychiatric outpatient services	☐	☐	☐	☐
g. Psychiatric partial hospitalization services	☐	☐	☐	☐
h. Psychiatric residential treatment	☐	☐	☐	☐

C. FACILITIES AND SERVICES (continued)

	(1) Owned or provided by my hospital or its subsidiary	(2) Provided by my Health System (in my local community)	(3) Provided through a formal contractual arrangement or joint venture with another provider that is not in my system (in my local community)	(4) Do Not Provide
83. Radiology, diagnostic				
a. CT Scanner	☐	☐	☐	☐
b. Diagnostic radioisotope facility	☐	☐	☐	☐
c. Electron beam computed tomography (EBCT)	☐	☐	☐	☐
d. Full-field digital mammography (FFDM)	☐	☐	☐	☐
e. Magnetic resonance imaging (MRI)	☐	☐	☐	☐
f. Intraoperative magnetic resonance imaging	☐	☐	☐	☐
g. Magnetoencephalography (MEG)	☐	☐	☐	☐
h. Multi-slice spiral computed tomography (<64+ slice CT)	☐	☐	☐	☐
i. Multi-slice spiral computed tomography (64+ slice CT)	☐	☐	☐	☐
j. Positron emission tomography (PET)	☐	☐	☐	☐
k. Positron emission tomography/CT (PET/CT)	☐	☐	☐	☐
l. Single photon emission computerized tomography (SPECT)	☐	☐	☐	☐
m. Ultrasound	☐	☐	☐	☐
84. Radiology, therapeutic				
a. Image-guided radiation therapy (IGRT)	☐	☐	☐	☐
b. Intensity-modulated radiation therapy (IMRT)	☐	☐	☐	☐
c. Proton beam therapy	☐	☐	☐	☐
d. Shaped beam radiation system	☐	☐	☐	☐
e. Stereotactic radiosurgery	☐	☐	☐	☐
85. Retirement housing	☐	☐	☐	☐
86. Robotic surgery	☐	☐	☐	☐
87. Rural health clinic	☐	☐	☐	☐
88. Sleep center	☐	☐	☐	☐
89. Social work services	☐	☐	☐	☐
90. Sports medicine	☐	☐	☐	☐
91. Support groups	☐	☐	☐	☐
92. Swing bed services	☐	☐	☐	☐
93. Teen outreach services	☐	☐	☐	☐
94. Tobacco treatment/cessation program	☐	☐	☐	☐
95. Transplant services				
a. Bone marrow	☐	☐	☐	☐
b. Heart	☐	☐	☐	☐
c. Kidney	☐	☐	☐	☐
d. Liver	☐	☐	☐	☐
e. Lung	☐	☐	☐	☐
f. Tissue	☐	☐	☐	☐
g. Other	☐	☐	☐	☐
96. Transportation to health services	☐	☐	☐	☐
97. Urgent care center	☐	☐	☐	☐
98. Virtual colonoscopy	☐	☐	☐	☐
99. Volunteer services department	☐	☐	☐	☐
100. Women's health center/services	☐	☐	☐	☐
101. Wound management services	☐	☐	☐	☐

C. FACILITIES AND SERVICES (continued)

102a. In which of the following physician arrangements does your hospital or system/network participate? Column 3 refers to the networks that were identified in section B, question 3d. For hospital level physician arrangements that are reported in column 1, please report the number of physicians involved.

		(1) My Hospital	(2) My Health System	(3) My Health Network	(4) Do Not Provide
a. Independent Practice Association (IPA)	(# of physicians _____)	☐	☐	☐	☐
b. Group practice without walls	(# of physicians _____)	☐	☐	☐	☐
c. Open Physician-Hospital Organization (PHO)	(# of physicians _____)	☐	☐	☐	☐
d. Closed Physician-Hospital Organization (PHO)	(# of physicians _____)	☐	☐	☐	☐
e. Management Service Organization (MSO)	(# of physicians _____)	☐	☐	☐	☐
f. Integrated Salary Model	(# of physicians _____)	☐	☐	☐	☐
g. Equity Model	(# of physicians _____)	☐	☐	☐	☐
h. Foundation	(# of physicians _____)	☐	☐	☐	☐
i. Other, please specify _____	(# of physicians _____)	☐	☐	☐	☐

102b. Looking across all the relationships identified in question 102a, what is the total number of physicians (count each physician only once) that are engaged in an arrangement with your hospital that allows for joint contracting with payors or shared responsibility for financial risk or clinical performance between the hospital and physician? (arrangement may be at the hospital, system or network level)   # of physicians _____

103a. Does your hospital participate in any joint venture arrangements with physicians or physician groups?   YES ☐   NO ☐

103b. If your hospital participates in any joint ventures with physicians or physician groups, please indicate which types of services are involved in those joint ventures. (Check all that apply)

    a. ☐ Limited service hospital

    b. ☐ Ambulatory surgical centers

    c. ☐ Imaging centers

    d. ☐ Other _____

103c. If you selected 'a. Limited Service Hospital', please tell us what type(s) of services are provided. (Check all that apply)

    a. ☐ Cardiac

    b. ☐ Orthopedic

    c. ☐ Surgical

    d. ☐ Other _____

103d. Does your hospital participate in joint venture arrangements with organizations other than physician groups?   YES ☐   NO ☐

104a. Has your hospital or health care system established an accountable care organization (ACO)?   YES ☐   NO ☐

104b. If yes, please indicate the patient population that participates in the ACO. (Check all that apply)

    a. ☐ Medicaid

    b. ☐ Medicare

    c. ☐ Privately insured

    d. ☐ Other, please specify_____

105. Does your hospital have an established medical home program?   YES ☐   NO ☐

106. Does your hospital participate in a bundled payment program involving inpatient, physician, and/or post acute care services where the hospital receives a single payment from a payor for a package of services and then distributes payments to participating providers of care (such as a single fee for hospital and physician services for a specific procedure, e.g., hip replacement, CABG)?   YES ☐   NO ☐

C. FACILITIES AND SERVICES (continued)

107. Does your hospital, health system or health network have an equity interest in any of the following insurance products? (Check all that apply) Contractual relationships with HMOs and PPOs should not be reported here but in Question 108. Column 3 refers to the networks that were identified in section B, question 3d.

		(1) My Hospital	(2) My Health System	(3) My Health Network	(4) Joint Venture with Insurer	(5) Do Not Provide
a.	Health Maintenance Organization	☐	☐	☐	☐	☐
b.	Preferred Provider Organization..............	☐	☐	☐	☐	☐
c.	Indemnity Fee for Service Plan	☐	☐	☐	☐	☐

108. 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? _____

109. 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"   _____ %

110. What percentage of the hospital's net patient revenue is paid on a shared risk basis?   _____ %

111. 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 ☐

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

113. Does your hospital have contracts with commercial payors where payment is tied to performance on quality/safety metrics?   YES ☐   NO ☐

114a. Does your hospital conduct an internal survey of the hospital's quality/safety culture at least every 18 months?   YES ☐   NO ☐

114b. If yes, please indicate the response rate for the most recent survey.   _____ %

114c. If yes, are valid results available at the level of individual units (e.g., medical ICUs, cardiothoracic surgery)?   YES ☐   NO ☐

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

Please report beds, utilization, financial, and staffing data for the 12-month period that is consistent with the period reported on page 1. Report financial data for reporting period only. Include within your operations all activities that are wholly owned by the hospital, including subsidiary corporations regardless of where the activity is physically located. Please do not include within your operations distinct and separate divisions that may be owned by your hospital's parent corporation. If final figures are not available, please estimate. Round to the nearest dollar. Report all personnel who were on the payroll and whose payroll expenses are reported in D3f. (Please refer to specific definitions on pages 21-23.)

	(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

	(1) Total Facility	(2) Nursing Home Unit/Facility
a. Total licensed beds………………………………………………………..	_____	_____
b. Beds set up and staffed for use at the end of the reporting period ……………………	_____	_____
c. Bassinets set up and staffed for use at the end of the reporting period ……………	_____	
d. Births (exclude fetal deaths) ………………………………………………..	_____	
e. Admissions (exclude newborns; include neonatal & swing admissions) ……………..	_____	_____
f. Inpatient days (exclude newborns; include neonatal & swing days) ………………....	_____	_____
g. Emergency department visits……………………………………………..	_____	
h. Total outpatient visits (include emergency department visits & outpatient surgeries)....	_____	
i. Inpatient surgical operations ………………………………………………..	_____	
j. Number of operating rooms ……………………………………...............	_____	
k. Outpatient surgical operations...…………………………………………...	_____	

2. MEDICARE/MEDICAID UTILIZATION (exclude newborns; include neonatal & swing days and deaths)

	(1) Total Facility	(2) Nursing Home Unit/Facility
a1. Total Medicare (Title XVIII) inpatient discharges (including Medicare Managed Care) ………………………………………………………	_____	_____
a2. How many Medicare inpatient discharges were Medicare Managed Care?…………	_____	_____
b1. Total Medicare (Title XVIII) inpatient days (including Medicare Managed Care) ………………………………………………………	_____	_____
b2. How many Medicare inpatient days were Medicare Managed Care?………………..	_____	_____
c1. Total Medicaid (Title XIX) inpatient discharges (including Medicaid Managed Care) ………………………………………………………	_____	_____
c2. How many Medicaid inpatient discharges were Medicaid Managed Care?…………	_____	_____
d1. Total Medicaid (Title XIX) inpatient days (including Medicaid Managed Care) …….	_____	_____
d2. How many Medicaid inpatient days were Medicaid Managed Care?…………………	_____	_____

3. FINANCIAL

	(1) Total Facility	(2) Nursing Home Unit/Facility
*a. Net patient revenue **(treat bad debt as a deduction from gross 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. Depreciation expense (for reporting period only) …………………………………..	_____.00	
i. Interest expense ……………………………………………………………..	_____.00	
j. Supply expense...	_____.00	
k. All other expenses..	_____.00	
l. TOTAL EXPENSES (add 3f thru 3k. Exclude bad debt) ……………………………	_____.00	_____.00

4. REVENUE BY TYPE

	(1) Total Facility
*a. Total gross inpatient revenue……………………………………….……..	_____.00
*b. Total gross outpatient revenue …………………………………………..	_____.00
*c. Total gross patient revenue ……………………………………………….	_____.00

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

*5. UNCOMPENSATED CARE & PROVIDER TAXES

a. Bad debt (Revenue forgone at full established rates. Include in gross revenue) …………………………………………….. _____ .00

b. Financial Assistance (includes Charity Care) (Revenue forgone at full-established rates. Include in gross revenue.)…….. _____ .00

c. Is your bad debt (5a) reported on the basis of full charges? YES ☐ NO ☐

d. Does your state have a provider Medicaid tax/assessment program? YES ☐ NO ☐

e. If yes, please report the total gross amount paid into the program.. _____ .00

f. Due to differing accounting standards, please indicate whether the provider tax/assessment amount is included in:

    1. Total expenses YES ☐ NO ☐

    2. Deductions from net patient revenue YES ☐ NO ☐

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

	(1) Gross	(2) Net
*a. GOVERNMENT (1) Medicare:		
a) Fee for service patient revenue ……………………….	_____ .00	_____ .00
b) Managed care revenue ………………………….............	_____ .00	_____ .00
c) Total (a + b) …………………………...…….……...	_____ **.00**	_____ **.00**
(2) Medicaid:		
a) Fee for service patient revenue…...............................	_____ .00	_____ .00
b) Managed care revenue ……...............………………..	_____ .00	_____ .00
c) Medicaid Disproportionate Share Hospital Payments (DSH)		_____ .00
d) Medicaid supplemental payments: not including Medicaid Disproportionate Share Hospital Payments (DSH)		_____ .00
e) Total (a + b + c + d) ………………………………	_____ **.00**	_____ **.00**
(3) Other government ………………………….........……	_____ .00	_____ .00
*b. NONGOVERNMENT (1) Self-pay……………………………..	_____ .00	_____ .00
(2) Third-party payors:		
a) Managed care (includes HMO and PPO) ……	_____ .00	_____ .00
b) Other third-party payors ………………………	_____ .00	_____ .00
c) Total third-party payors (a + b) ……………	_____ **.00**	_____ **.00**
(3) All Other nongovernment………………………….	_____ .00	_____ .00
*c. TOTAL ……………………………………………………………………………	_____ **.00**	_____ **.00**

(Total gross should equal 4c on page 9. Total net should equal 3a on page 9.)

Are the financial data on pages 9 and 10 from your audited financial statement? ……………………………. YES ☐ NO ☐

7. FIXED ASSETS

a. Property, plant and equipment at <u>cost</u> ……………………………………………… _____ .00

b. Accumulated <u>depreciation</u> ……………………………………………………… _____ .00

c. Net property, plant and equipment (a-b) …………………………………………… _____ .00

d. Total gross square feet of your physical plant used for or in support of your healthcare activities………………………………………………………….. _____

8. TOTAL CAPITAL EXPENSES

Include all expenses used to acquire assets, including buildings, remodeling projects, equipment, or property. _____ .00

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

9. INFORMATION TECHNOLOGY

*a. IT operating expense……………………………………………………………………………._____.00

*b. IT capital expense..………………………….. ………………………………………….._____.00

*c. Number of employed IT staff (in FTEs) ………………………………………………………...._____

*d. Number of outsourced IT staff (in FTEs)………………………………………………... _____

e. Does your hospital have an electronic health record? (see definition)
☐ Yes, fully implemented   ☐ Yes, partially implemented   ☐ No

10. STAFFING

Report full-time (35 hours or more) and part-time (less than 35 hours) personnel who were on the hospital/facility **payroll at the end of your reporting period.** 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. FTE is the total number of hours worked by all employees over the full (12 month) reporting period divided by the normal number of hours worked by a full-time employee for that same time period. For example, if your hospital considers a normal workweek for a full-time employee to be 40 hours, a total of 2,080 would be worked over a full year (52 weeks). If the total number of hours worked by all employees on the payroll is 208,000, then the number of Full-Time Equivalents (FTE) is 100 (employees). The FTE calculation for a specific occupational category such as registered nurses is exactly the same. The calculation for each occupational category should be based on the number of hours worked by staff employed in that specific category.

For each occupational category, please report the number of staff vacancies as of the last day of your reporting period. A vacancy is defined as a budgeted staff position which is unfilled as of the last day of the reporting period and for which the hospital is actively seeking either a full-time or part-time permanent replacement. Personnel who work in more than one area should be included only in the category of their primary responsibility and should be counted only once.

	(1) Full-Time (35 hr/wk or more) On Payroll	(2) Part-Time (Less than 35hr/wk) On Payroll	(3) FTE	(4) Vacancies
a. Physicians	_____	_____	_____	_____
b. Dentists	_____	_____	_____	_____
c. Medical and dental residents/interns	_____	_____	_____	_____
d. Other trainees	_____	_____	_____	_____
e. Registered nurses	_____	_____	_____	_____
f. Licensed practical (vocational) nurses	_____	_____	_____	_____
g. Nursing assistive personnel	_____	_____	_____	_____
h. Radiology technicians	_____	_____	_____	_____
i. Laboratory technicians	_____	_____	_____	_____
j. Pharmacists, licensed	_____	_____	_____	_____
k. Pharmacy technicians	_____	_____	_____	_____
l. Respiratory therapists	_____	_____	_____	_____
m. All other personnel	_____	_____	_____	_____
n. Total facility personnel (add 10a through 10m)	_____	_____	_____	_____

(Total facility personnel (a-n) should include hospital plus nursing home type unit/facility personnel also reported separately in 10o and 10p.)

o. Nursing home type unit/facility registered nurses	_____	_____	_____	_____
p. Total nursing home type unit/facility personnel	_____	_____	_____	_____

q. For your employed RN FTEs reported above (D.10.e, column 3), please report the number of full time equivalents who are involved in direct patient care.

_____ Number of direct patient care FTEs

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

11. PRIVILEGED PHYSICIANS

Report the total number of physicians with privileges at your hospital by type of relationship with the hospital. The sum of the physicians reported in 11a-11f should equal the total number of privileged physicians (11g) in the hospital.

	(1) Total Employed	(2) Total Individual Contract	(3) Total Group Contract	(4) Not Employed or Under Contract	(5) Total Privileged (add columns 1-4)
a. Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics)	_____	_____	_____	_____	_____
b. Emergency medicine	_____	_____	_____	_____	_____
c. Hospitalist	_____	_____	_____	_____	_____
d. Intensivist	_____	_____	_____	_____	_____
e. Radiologist/pathologist/anesthesiologist	_____	_____	_____	_____	_____
f. Other specialist	_____	_____	_____	_____	_____
g. Total (add 11a-11f)	_____	_____	_____	_____	_____

12. HOSPITALISTS

a. Do hospitalists provide care for patients in your hospital? (if no, please skip to 13).............. YES ☐   NO ☐ **(if yes, please report in D.11c.)**

b. If yes, please report the total number of full-time equivalents (FTE) hospitalists.....................FTE _____

13. INTENSIVISTS

a. Do intensivists provide care for patients in your hospital? (If no, please skip to 14) YES ☐   NO ☐ **(if yes, please report in D.11d.)**

b. If yes, please report the total number of FTE intensivists and assign them to the following areas. Please indicate whether the intensive care area is closed to intensivists. (Meaning that only intensivists are authorized to care for ICU patients.)

		FTE	Closed to Intensivists
1.	Medical-surgical intensive care	_____	☐
2.	Cardiac intensive care	_____	☐
3.	Neonatal intensive care	_____	☐
4.	Pediatric intensive care	_____	☐
5.	Other intensive care	_____	☐
6.	**Total**	_____	

14. ADVANCED PRACTICE REGISTERED NURSES/PHYSICIAN ASSISTANTS

a. Do advanced practice nurses/physician assistants provide care for patients in your hospital? .... YES ☐   NO ☐
(if no, please skip to 15)

b. If yes, please report the number of full time, part time and FTE advanced practice nurses and physician assistants who provide care for patients in your hospital.

Advanced Practice Registered Nurses   Full-time _____ Part-time _____ FTE

Physician Assistants   Full-time _____ Part-time _____ FTE

c. If yes, please indicate the type of service provided. (check all that apply)

☐ Primary care   ☐ Anesthesia services (Certified registered nurse anesthetist)   ☐ Emergency department care

☐ Other specialty care   ☐ Patient education   ☐ Case management   ☐ Other

15. FOREIGN EDUCATED NURSES

a. Did your facility hire more foreign-educated nurses (including contract or agency nurses) to help fill RN vacancies in 2015 vs. 2014?

More ☐   Less ☐   Same ☐   Did not hire foreign nurses ☐

b. From which countries/continents are you recruiting foreign-educated nurses? (check all that apply)

Africa ☐   South Korea ☐   Canada ☐   Philippines ☐   China ☐   India ☐   Other ☐

E. SUPPLEMENTAL INFORMATION

1. Does your hospital provide services through one or more satellite facilities?   YES ☐   NO ☐

2. Does the hospital participate in a group purchasing arrangement?   YES ☐   NO ☐

If yes, please provide the name, city, and state of the group purchasing organization(s).

Name: _____   City: _____ State: _____

Name: _____   City: _____ State: _____

Name: _____   City: _____ State: _____

3. Does the hospital purchase medical/surgical supplies directly through a distributor?   YES ☐   NO ☐
If yes, please provide the name of the distributor(s).

Name: _____

Name: _____

Name: _____

4. If your hospital hired RNs during the reporting period, how many were new graduates from nursing schools?   _____

5. Describe the extent of your hospital's current partnerships with the following types of organizations for community or population health improvement initiatives.

		Not involved	Collaboration	Formal Alliance
a.	Health care providers outside your system	☐	☐	☐
b.	Local or state public health organizations	☐	☐	☐
c.	Local or state human/social service organizations	☐	☐	☐
d.	Other local or state government	☐	☐	☐
e.	Non-profit organizations	☐	☐	☐
f.	Faith-based organizations	☐	☐	☐
g.	Health insurance companies	☐	☐	☐
h.	Schools	☐	☐	☐
i.	Local businesses or chambers of commerce	☐	☐	☐
j.	Other (list)_____	☐	☐	☐

Use this space for comments or to elaborate on any information supplied on this survey. Refer to the response by page, section and item name.

_____

_____

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As declared previously, hospital specific revenue data are treated as confidential. AHA's policy is not to release these data without written permission from your institution. The AHA will however, share these data with your respective state hospital association and if requested with your appropriate metropolitan/regional association.

On occasion, the AHA is asked to provide these data to external organizations, both public and private, for their use in analyzing crucial health care policy or research issues. The AHA is requesting your permission to allow us to release your confidential data to those requests that we consider legitimate and worthwhile. In every instance of disclosure, the receiving organization will be prohibited from releasing hospital specific information.

Please indicate below whether or not you agree to these types of disclosure:

[ ] I hereby grant AHA permission to release my hospital's revenue data to external users that the AHA determines have a legitimate and worthwhile need to gain access to these data subject to the user's agreement with the AHA not to release hospital specific information.

_____
Chief Executive Officer   Date

[ ] I do not grant AHA permission to release my confidential data.

_____
Chief Executive Officer   Date

Does your hospital or health system have an Internet or Homepage address?   Yes ☐ No ☐

If yes, please provide the address: http:// _____

Thank you for your cooperation in completing this survey. If there are any questions about your responses to this survey, who should be contacted?

_____   (____)_____
Name (please print)   Title   (Area Code) Telephone Number

_____/_____/_____   _____   (____)_____
Date of Completion   Chief Executive Officer   Hospital's Main Fax Number

Contact Email address: _____

NOTE: PLEASE PHOTOCOPY THE INFORMATION FOR YOUR HOSPITAL FILE BEFORE RETURNING THE ORIGINAL FORM TO THE AMERICAN HOSPITAL ASSOCIATION. ALSO, PLEASE FORWARD A PHOTOCOPY OF THE COMPLETED QUESTIONNAIRE TO YOUR STATE HOSPITAL ASSOCIATION.

THANK YOU

SECTION A
REPORTING PERIOD
Instructions

INSTRUCTIONS AND DEFINITIONS FOR THE 2015 ANNUAL SURVEY OF HOSPITALS.
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.

1. **Reporting period used (beginning and ending date**): Record the beginning and ending dates of the reporting period in an eight-digit number: for example, January 1, 2015 should be shown as 01/01/2015. 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.
2. **Were you in operation 12 full months at the end of your reporting period?** If you are reporting for less than 365 days, utilization and finances should be presented for days reported only.
3. **Number of days open during reporting period**: Number of days should equal the time span between the two dates that the hospital was open.

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. 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. Controlled on a for profit basis by an individual, partnership, or a profit making corporation.
   Government, federal. 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 patients.
   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 a facility for persons with intellectual disabilities. Provides diagnostic and therapeutic services to persons with intellectual disabilities.
   Surgical. An acute care specialty hospital where 2/3 or more of its inpatient claims are for surgical/diagnosis related groups.
   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.
   Cancer. Provides medical care to patients for whom the primary diagnosis is cancer.
   Heart. Provides diagnosis and treatment of heart disease.
   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 people with disabilities 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.
   Intellectual Disabilities Provides health-related care on a regular basis to patients with developmental or intellectual disabilities who cannot be treated in a skilled nursing unit.
   Acute long term care hospital. Provides high acuity interdisciplinary services to medically complex patients that require more intensive recuperation and care than can be provided in a typical nursing facility.
   Alcoholism and other chemical dependency. Provides diagnostic and therapeutic services to patients with alcoholism or other drug dependencies.

3. **OTHER**
   a. **Children admissions.** A hospital whose primary focus is the health and treatment of children and adolescents.
   b. **Subsidiary.** A company that is wholly controlled by another or one that is more than 50% owned by another organization.
   c. **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.
   d. **Network.** A group of hospitals, physicians, other providers, insurers and/or community agencies that voluntarily work together to coordinate and deliver health services.

Owned/provided by the hospital or its subsidiary. All patient revenues, expenses and utilization related to the provision of the service are reflected in the hospital's statistics reported elsewhere in this survey.

Provided by my Health System (in my local community). Another health care provider in the same system as your hospital provides the service and patient revenue, expenses, and utilization related to the provision of the service are recorded at the point where the service was provided and would not be reflected in your hospital's statistics reported elsewhere in this survey. (A system is a corporate body that owns, leases, religiously sponsors and/or manages health providers)

Provided through a formal contractual arrangement or joint venture with another provider that is not in my system. All patient revenues and utilization related to the provision of the service are recorded at the site where the service was provided and would not be reflected in your hospital statistics reported elsewhere in this survey. (A joint venture is a contractual arrangement between two or more parties forming an unincorporated business. The participants in the arrangement remain independent and separate outside of the venture's purpose.)

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.** For service owned or provided by the hospital, level should be designated: (1) unit provides services for uncomplicated maternity and newborn cases; (2) unit provides services for uncomplicated cases, the majority of complicated problems, and special neonatal services; and (3) 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. **Other intensive care.** A specially staffed, specialty equipped, separate section of a hospital dedicated to the observation, care, and treatment of patients with life threatening illnesses, injuries, or complications from which recovery is possible. It provides special expertise and facilities for the support of vital function and utilizes the skill of medical nursing and other staff experienced in the management of these problems.
12. **Physical rehabilitation.** Provides care encompassing a comprehensive array of restoration services for people with disabilities and all support services necessary to help patients attain their maximum functional capacity.
13. **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.
14. **Psychiatric care.** Provides acute or long-term care to patients with mental or emotional disorders, including patients admitted for diagnosis and those admitted for treatment of psychiatric disorders, on the basis of physicians' orders and approved nursing care plans. Long-term care may include intensive supervision to persons with chronic/severe mental illness.
15. **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.
16. **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.
17. **Acute long-term care.** Provides specialized acute hospital care to medically complex patients who are critically ill, have multisystem complications and/or failure, and require hospitalization averaging 25 days, in a facility offering specialized treatment programs and therapeutic intervention on a 24-hour/7 day a week basis.
18. **Other long-term care.** Provision of long-term care other than skilled nursing care or intermediate care for those who do not require daily medical or nursing services, but may requires some assistance in the activities of daily living. This can include residential care, elderly care, or care facilities for those with developmental or intellectual disabilities.
19. **Other care.** (specify) Any type of care other than those listed above.
    The sum of the beds reported in Section C 1-19 should equal what you have reported in Section D(1b) for beds set up and staffed.
20. **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.
21. **Airborne infection isolation room.** A single-occupancy room for patient care where environmental factors are controlled in an effort to minimize the transmission of those infectious agents, usually spread person to person by droplet nuclei associated with coughing and inhalation. Such rooms typically have specific ventilation requirements for controlled ventilation, air pressure and filtration.
22. **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.

23. **Alzheimer center.** Facility that offers care to persons with Alzheimer's disease and their families through an integrated program of clinical services, research, and education.
24. **Ambulance services.** Provision of ambulance service to the ill and injured who require medical attention on a scheduled and unscheduled basis.
25. **Ambulatory surgery center.** Facility that provides care to patients requiring surgery that are admitted and discharged on the same day. Ambulatory surgery centers are distinct from same day surgical units within the hospital outpatient departments for purposes of Medicare payment.
26. **Arthritis treatment center.** Specifically equipped and staffed center for the diagnosis and treatment of arthritis and other joint disorders.
27. **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.
28. **Auxiliary.** A volunteer community organization formed to assist the hospital in carrying out its purpose and to serve as a link between the institution and the community.
29. **Bariatric/weight control services.** The medical practice of weight reduction.
30. **Birthing 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.
31. **Blood donor center.** A facility that performs, or is responsible for the collection, processing, testing or distribution of blood and components.
32. **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.
33. **Cardiology and cardiac surgery services.** Services which include the diagnosis and treatment of diseases and disorders involving the heart and circulatory system.
    a-b. Cardiology services. An organized clinical service offering diagnostic and interventional procedures to manage the full range of heart conditions.
    c-d. Diagnostic catheterization. (also called coronary angiography or coronary arteriography) is used to assist in diagnosing complex heart conditions. Cardiac angiography involves the insertion of a tiny catheter into the artery in the groin then carefully threading the catheter up into the aorta where the coronary arteries originate. Once the catheter is in place, a dye is injected which allows the cardiologist to see the size, shape, and distribution of the coronary arteries. These images are used to diagnose heart disease and to determine, among other things, whether or not surgery is indicated.
    e-f. Interventional cardiac catheterization. Nonsurgical procedure that utilizes the same basic principles as diagnostic catheterization and then uses advanced techniques to improve the heart's function. It can be a less invasive alternative to heart surgery.
    g-h. Cardiac surgery. Includes minimally invasive procedures that include surgery done with only a small incision or no incision at all, such as through a laparoscope or an endoscope and more invasive major surgical procedures that include open chest and open heart surgery.
    i-j. Cardiac electrophysiology. Evaluation and management of patients with complex rhythm or conduction abnormalities, including diagnostic testing, treatment of arrhythmias by catheter ablation or drug therapy, and pacemaker/defibrillator implantation and follow-up.
    k. Cardiac rehabilitation. A medically supervised program to help heart patients recover quickly and improve their overall physical and mental functioning. The goal is to reduce risk of another cardiac event or to keep an already present heart condition from getting worse. Cardiac rehabilitation programs include: counseling to patients, an exercise program, helping patients modify risk factors such as smoking and high blood pressure, providing vocational guidance to enable the patient to return to work, supplying information on physical limitations and lending emotional support.
34. **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.
35. **Chaplaincy/pastoral care services.** A service ministering religious activities and providing pastoral counseling to patients, their families, and staff of a health care organization.
36. **Chemotherapy.** An organized program for the treatment of cancer by the use of drugs or chemicals.
37. **Children's wellness program.** A program that encourages improved health status and a healthful lifestyle of children through health education, exercise, nutrition and health promotion.
38. **Chiropractic services.** An organized clinical service including spinal manipulation or adjustment and related diagnostic and therapeutic services.
39. **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.
40. **Complementary and alternative medicine services.** Organized hospital services or formal arrangements to providers that provide care or treatment not based solely on traditional western allopathic medical teachings as instructed in most U.S. medical schools. Includes any of the following: acupuncture, chiropractic, homeopathy, osteopathy, diet and lifestyle changes, herbal medicine, massage therapy, etc.
41. **Computer assisted orthopedic surgery (CAOS).** Orthopedic surgery using computer technology, enabling three-dimensional graphic models to visualize a patient's anatomy.
42. **Crisis prevention.** Services provided in order to promote physical and mental wellbeing and the early identification of disease and ill health prior to the onset and recognition of symptoms so as to permit early treatment.
43. **Dental Services.** An organized dental service or dentists on staff, not necessarily involving special facilities, providing dental or oral services to inpatients or outpatients.
44. **Emergency services**. Health services that are provided after the onset of a medical condition that manifests itself by symptoms of sufficient severity, including severe pain, that the absence of immediate medical attention could reasonably be expected by a prudent layperson, who possesses an average knowledge of health and medicine, to result in placing the patient's health in serious jeopardy.
    a-b. Emergency department. Hospital facilities for the provision of unscheduled outpatient services to patients whose conditions require immediate care.
    c. Satellite Emergency Department. A facility owned and operated by the hospital but physically separate from the hospital for the provision of unscheduled outpatient services to patients whose conditions require immediate care. A freestanding ED is not physically connected to a hospital, but has all necessary emergency staffing and equipment on-site.
    e.Trauma center (certified). A facility to provide emergency and specialized intensive care to critically ill and injured patients. For service owned or provided by the hospital, please specify trauma level. 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 13 if necessary.
45. **Enabling services.** A program that is designed to help the patient access health care services by offering any of the following: transportation services and/or referrals to local social services agencies.

46. **Endoscopic services.**
   a. **Optical colonoscopy.** An examination of the interior of the colon using a long, flexible, lighted tube with a small built-in camera.
   b. **Endoscopic ultrasound.** Specially designed endoscope that incorporates an ultrasound transducer used to obtain detailed images of organs in the chest and abdomen. The endoscope can be passed through the mouth or the anus. When combined with needle biopsy the procedure can assist in diagnosis of disease and staging of cancer.
   c. **Ablation of Barrett's esophagus.** Premalignant condition that can lead to adenocarcinoma of the esophagus. The nonsurgical ablation of premalignant tissue in Barrett's esophagus by the application of thermal energy or light through an endoscope passed from the mouth into the esophagus.
   d. **Esophageal impedance study.** A test in which a catheter is placed through the nose into the esophagus to measure whether gas or liquids are passing from the stomach into the esophagus and causing symptoms.
   e. **Endoscopic retrograde cholangiopancreatography (ERCP).** A procedure in which a catheter is introduced through an endoscope into the bile ducts and pancreatic ducts. Injection of contrast material permits detailed x-ray of these structures. The procedure is used diagnostically as well as therapeutically to relieve obstruction or remove stones.
47. **Enrollment (insurance) assistance services.** A program that provides enrollment assistance for patients who are potentially eligible for public health insurance programs such as Medicaid, State Children's Health Insurance, or local/state indigent care programs. The specific services offered could include explanation of benefits, assist applicants in completing the application and locating all relevant documents, conduct eligibility interviews, and/or forward applications and documentation to state/local social service or health agency.
48. **Extracorporeal shock wave lithotripter (ESWL).** A medical device used for treating stones in the kidney or urethra. The device disintegrates kidney stones noninvasively through the transmission of acoustic shock waves directed at the stones.
49. **Fertility clinic.** A specialized program set in an infertility center that provides counseling and education as well as advanced reproductive techniques such as: injectable therapy, reproductive surgeries, treatment for endometriosis, male factor infertility, tubal reversals, in vitro fertilization (IVF), donor eggs, and other such services to help patients achieve successful pregnancies.
50. **Fitness center.** Provides exercise, testing, or evaluation programs and fitness activities to the community and hospital employees.
51. **Freestanding outpatient care center.** A facility owned and operated by the hospital, that is physically separate from the hospital and provides various medical treatments and diagnostic services on an outpatient basis only. Laboratory and radiology services are usually available.
52. **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.
53. **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.
54. **Community health education.** Education that provides health information to individuals and populations as well as support for personal, family and community health decisions with the objective of improving health status.
55. **Genetic testing/counseling.** A service equipped with adequate laboratory facilities and directed by a qualified physician to advise patients on potential genetic diagnosis of vulnerabilities to inherited diseases. A genetic test is the analysis of human DNA, RNA, chromosomes, proteins, and certain metabolites in order to detect heritable disease-related genotypes, mutations, phenotypes, or karyotypes for clinical purposes. Genetic tests can have diverse purposes, including the diagnosis of genetic diseases in newborns, children, and adults; the identification of future health risks; the prediction of drug responses; and the assessment of risks to future children.
56. **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.
57. **Health research.** Organized hospital research program in any of the following areas: basic research, clinical research, community health research, and/or research on innovative health care delivery.
58. **Hemodialysis.** Provision of equipment and personnel for the treatment of renal insufficiency on an inpatient or outpatient basis.
59. **HIV/AIDS services**. Diagnosis, treatment, continuing care planning, and counseling services for HIV/AIDS patients and their families. Could include: HIV/AIDS unit, special unit or designated team, general inpatient care, or specialized outpatient program.
60. **Home health services.** Service providing nursing, therapy, and health-related homemaker or social services in the patient's home.
61. **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.
62. **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.
63. **Immunization program.** Program that plans, coordinates and conducts immunization services in the community.
64. **Indigent care clinic.** Health care services for uninsured and underinsured persons where care is free of charge or charged on a sliding scale. This would include "free clinics" staffed by volunteer practitioners, but could also be staffed by employees with the sponsoring health care organization subsidizing the cost of service.
65. **Linguistic/translation services.** Services provided by the hospital designed to make health care more accessible to non-English speaking patients and their physicians.
66. **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.
67. **Mobile health services.** Vans and other vehicles used for delivery to primary care services.
68. **Neurological services.** Services provided by the hospital dealing with the operative and nonoperative management of disorders of the central, peripheral, and autonomic nervous systems.
69. **Nutrition programs**. Services within a health care facility which are designed to provide inexpensive, nutritionally sound meals to patients.
70. **Occupational health services.** Includes services designed to protect the safety of employees from hazards in the work environment.
71. **Oncology services.** Inpatient and outpatient services for patients with cancer, including comprehensive care, support and guidance in addition to patient education and prevention, chemotherapy, counseling and other treatment methods.
72. **Orthopedic services.** Services provided for the prevention or correction of injuries or disorders of the skeletal system and associated muscles, joints and ligaments.
73. **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.
74. **Pain management program.** A recognized clinical service or program providing specialized medical care, drugs or therapies for the management of acute or chronic pain and other distressing symptoms, administered by specially trained physicians and other clinicians, to patients suffering from acute illnesses of diverse causes.
75. **Palliative care program.** An organized program providing specialized medical care, drugs or therapies for the management of acute or chronic pain and/or the control of symptoms administered by specially trained physicians and other clinicians; and supportive care services, such as counseling on advanced directives, spiritual care, and social services, to patients with advanced diseases and their families.

76. **Palliative care inpatient unit.** An inpatient palliative care ward is a physically discreet, inpatient nursing unit where the focus is palliative care. The patient care focus is on symptom relief for complex patients who may be continuing to undergo primary treatment. Care is delivered by palliative medicine specialists.
77. **Patient controlled analgesia (PCA).** Intravenously administered pain medicine under the patient's control. The patient has a button on the end of a cord than can be pushed at will, whenever more pain medicine is desired. This button will only deliver more pain medicine at predetermined intervals, as programmed by the doctor's order.
78. **Patient education center.** Written goals and objectives for the patient and/or family related to therapeutic regimens, medical procedures, and self-care.
79. **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.
80. **Physical rehabilitation services.** Program providing medical, health-related, therapy, social, and/or vocational services to help people with disabilities attain or retain their maximum functional capacity.
    a. **Assistive technology center.** A program providing access to specialized hardware and software with adaptations allowing individuals greater independence with mobility, dexterity, or increased communication options.
    b. **Electrodiagnostic services.** Diagnostic testing services for nerve and muscle function such as nerve conduction studies and needle electromyography.
    c. **Physical rehabilitation outpatient services.** Outpatient program providing medical, health-related, therapy, social, and/or vocational services to help people with disabilities attain or retain their maximum functional capacity.
    d. **Prosthetic and orthotic services.** Services providing comprehensive prosthetic and orthotic evaluation, fitting, and training.
    e. **Robot-assisted walking therapy.** A form of physical therapy that uses a robotic device to assist patients who are relearning how to walk.
    f. **Simulated rehabilitation environment.** Rehabilitation focused on retraining functional skills in a contextually appropriate environment (simulated home and community settings) or in a traditional setting (gymnasium) using motor learning principles.
81. **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.
82. **Psychiatric services.** Services provided by the hospital that offer immediate initial evaluation and treatment to patients with mental or emotional disorders.
    a. **Psychiatric child-adolescent services.** Provides care to children and adolescents with mental or emotional disorders, 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 of 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 elderly patients with mental or emotional disorders, 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 providing intensive day/evening outpatient services of three hours or more duration, distinguished from other outpatient visits of one hour.
    h. **Psychiatric residential treatment.** Overnight psychiatric care in conjunction with an intensive treatment program in a setting other than a hospital.
83. **Radiology, diagnostic.** The branch of radiology that deals with the utilization of all modalities of radiant energy in medical diagnoses and therapeutic procedures using radiologic guidance. This includes, but is not restricted to, imaging techniques and methodologies utilizing radiation emitted by x-ray tubes, radionuclides, and ultrasonographic devices and the radiofrequency electromagnetic radiation emitted by atoms.
    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. **Electron beam computed tomography (EBCT).** A high tech computed tomography scan used to detect coronary artery disease by measuring coronary calcifications. This imaging procedure uses electron beams which are magnetically steered to produce a visual of the coronary artery and the images are produced faster than conventional CT scans.
    d. **Full-field digital mammography (FFDM).** Combines the x-ray generators and tubes used in analog screen-film mammography (SFM) with a detector plate that converts the x-rays into a digital signal.
    e. **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.
    f. **Intraoperative magnetic resonance imaging.** An integrated surgery system which provides an MRI system in an operating room. The system allows for immediate evaluation of the degree to tumor resection while the patient is undergoing a surgical resection. Intraoperative MRI exists when a MRI (low-field or high-field) is placed in the operating theater and is used during surgical resection without moving the patient from the operating room to the diagnostic imaging suite.
    g. **Magnetoencephalography (MEG).** A noninvasive neurophysiological measurement tool used to study magnetic fields generated by neuronal activity of the brain. MEG provides direct information about the dynamics of evoked and spontaneous neural activity and its location in the brain. The primary uses of MEG include assisting surgeons in localizing the source of epilepsy, sensory mapping, and the study of brain function. When it is combined with structural imaging, it is known as *magnetic source imaging* (MSI).
    h. **Multi-slice spiral computed tomography (<64+slice CT).** A specialized computed tomography procedure that provides three-dimensional processing and allows narrower and multiple slices with increased spatial resolution and faster scanning times as compared to a regular computed tomography scan.
    i. **Multi-slice spiral computed tomography (64+ slice CT).** Involves the acquisition of volumetric tomographic x-ray absorption data expressed in Hounsfield units using multiple rows of detectors. 64+ systems reconstruct the equivalent of 64 or more slices to cover the imaged volume.
    j. **Positron emission tomography (PET).** A nuclear medicine imaging technology which uses radioactive (positron emitting) isotopes created in a cyclotron or generator and computers to compose pictures of the brain and heart at work. PET scanning produces sectional images depicting metabolic activity or blood flow rather than anatomy.
    k. **Positron emission tomography/CT (PET/CT).** Provides metabolic functional information for the monitoring of chemotherapy, radiotherapy and surgical planning.
    l. **Single photon emission computerized tomography (SPECT).** A nuclear medicine imaging technology that combines existing technology of gamma camera imaging with computed tomographic imaging technology to provide a clearer and more precise image.

    m. Ultrasound. The use of acoustic waves above the range of 20,000 cycles per second to visualize internal body structures.

84. **Radiology, therapeutic.** 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.

    a. **Image-guided radiation therapy (IGRT).** Automated system for image-guided radiation therapy that enables clinicians to obtain high-resolution x-ray images to pinpoint tumor sites, adjust patient positioning when necessary, and complete a treatment, all within the standard treatment time slot, allowing for more effective cancer treatments.

    b. **Intensity-Modulated Radiation Therapy (IMRT).** A type of three-dimensional radiation therapy which improves treatment delivery by targeting a tumor in a way that is likely to decrease damage to normal tissues and allows for varying intensities.

    c. **Proton beam therapy.** A form of radiation therapy which administers proton beams. While producing the same biologic effects as x-ray beams, the energy distribution of protons differs from conventional x-ray beams: proton beams can be more precisely focused in tissue volumes in a three-dimensional pattern, resulting in less surrounding tissue damage than conventional radiation therapy, permitting administration of higher doses.

    d. **Shaped beam radiation system.** A precise, noninvasive treatment that involves targeted beams of radiation that mirror the exact size and shape of a tumor at a specific area to shrink or destroy cancerous cells. This procedure delivers a therapeutic dose of radiation that conforms precisely to the shape of the tumor, thus minimizing the risk to nearby tissues.

    e. **Stereotactic radiosurgery.** A radiotherapy modality that delivers a high dosage of radiation to a discrete treatment area in as few as one treatment session. Includes Gamma Knife, Cyberknife, etc.

85. **Retirement housing.** A facility that 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.

86. **Robotic surgery.** The use of mechanical guidance devices to remotely manipulate surgical instrumentation.

87. **Rural health clinic.** A clinic located in a rural, medically under-served area in the United States that has a separate reimbursement structure from the standard medical office under the Medicare and Medicaid programs.

88. **Sleep center.** Specially equipped and staffed center for the diagnosis and treatment of sleep disorders.

89. **Social work services**. Could include: organized 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.

90. **Sports medicine.** Provision of diagnostic screening, assessment, clinical and rehabilitation services for the prevention and treatment of sports-related injuries.

91. **Support groups.** A hospital sponsored program that allows a group of individuals with common experiences or issues who meet periodically to share experiences, problems, and solutions in order to support each other.

92. **Swing bed services.** A hospital bed that can be used to provide either acute or long-term care depending on community or patient needs. To be eligible a hospital must have a Medicare provider agreement in place, have fewer than 100 beds, be located in a rural area, not have a 24-hour nursing service waiver in effect, have not been terminated from the program in the prior two years, and meet various service conditions.

93. **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.

94. **Tobacco treatment/cessation program.** Organized hospital services with the purpose of ending tobacco-use habits of patients addicted to tobacco/nicotine.

95. **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; heart, lung, kidney, intestine, or tissue transplant. Please include heart/lung or other multi-transplant surgeries in 'other'.

96. **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 people with disabilities; others offer subsidies for public transport systems or operate mini-bus services exclusively for use by senior citizens.

97. **Urgent care center.** A facility that provides care and treatment for problems that are not life threatening but require attention over the short term.

98. **Virtual colonoscopy.** Noninvasive screening procedure used to visualize, analyze and detect cancerous or potentially cancerous polyps in the colon.

99. **Volunteer services department.** An organized hospital department responsible for coordinating the services of volunteers working within the institution.

100. **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.

101. **Wound management services**. Services for patients with chronic wounds and nonhealing wounds often resulting from diabetes, poor circulation, improper seating and immunocompromising conditions. The goals are to progress chronic wounds through stages of healing, reduce and eliminate infections, increase physical function to minimize complications from current wounds and prevent future chronic wounds. Wound management services are provided on an inpatient or outpatient basis, depending on the intensity of service needed.

102a. **Physician arrangements.** An integrated healthcare delivery program implementing physician compensation and incentive systems for managed care services.

    a. **Independent practice association (IPA).** 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-service or capitated basis. The purpose of an IPA is to assist solo physicians in obtaining managed care contracts.

    b. **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.

    c. **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.

    d. **Closed physician-hospital organization (PHO).** A PHO that restricts physician membership to those practitioners who meet criteria for cost effectiveness and/or high quality.

    e. **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.

    f. **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.

    g. **Equity model.** Allows established practitioners to become shareholders in a professional corporation in exchange for tangible and intangible assets of their existing practices.

    h.   **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.

102b. Of all physician arrangements listed in question 102a (a-i), indicate the total number of physicians (count each physician only once) that are engaged in an arrangement with your hospital that allows for joint contracting with payors or shared responsibility for financial risk or clinical performance between the hospital and physician (arrangement may be at the hospital, system or network level). *Joint contracting* does not include contracting between physicians participating in an independent practice.

103. Joint venture. A contractual arrangement between two or more parties forming an unincorporated business. The participants in the arrangement remain independent and separate outside of the venture's purpose.

104a. Accountable Care Organization (ACO) Contract. An ACO contract has two essential elements: (1) accountability for the total costs of care for the population of patients attributed to the primary care physicians in the organization; (2) financial incentives that link the magnitude of bonus payments to performance on quality measures (which could include technical quality, patient experience and/or health outcome measures) This will generally involve a contract where the payor establishes a target budget for one or more years for the total costs of care for the agreed-upon patient population, the payor tracks actual spending and performance on quality; and the provider receives bonus payments that could include a share of savings that are (or are not) contingent on meeting quality targets, with (or without) additional bonuses related to performance on those quality measures.

105. Patient-Centered Medical Home. The medical home concept refers to the provision of comprehensive primary care services that facilitates communication and shared decision-making between the patient, his/her primary care providers, other providers, and the patient's family.

106. Bundling. Bundling is a payment mechanism whereby a provider entity receives a single payment for services provided across one or parts of the care continuum. For example, an entity might receive a single payment for the hospital and physician services provided as part of an inpatient stay or might receive a single payment for the post-acute care services involved in a single episode of care. The entity then has responsibility for compensating each of the individual providers involved in the episode of care.

109. 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 enrollees 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.

110. Shared risk payments. A payment arrangement in which a hospital and a managed care organization share the risk of adverse claims experience. Methods for sharing risk could include: capitation with partial refunds or supplements if billed hospital charges or costs differ from capitated payments, and service or discharge-based payments with withholds and bonus payouts that depend on expenditure targets.

114. Quality/Safety Survey. Examples of a patient safety culture survey are the Safety Attitudes Questionnaire and the AHRQ Hospital Survey on Patient Safety Culture. Impromptu surveys of only certain staff or units, and other narrowly based initiatives do not qualify as quality/safety surveys for the purpose of this question.

SECTION D
TOTAL FACILITY BEDS, UTILIZATION, FINANCES, AND STAFFING
Instructions and Definitions

For the purposes of this survey, a nursing home type unit/facility provides **long-term care for the elderly or other patients requiring chronic care** in a non-acute setting in any of the following categories: *Skilled nursing care *Intermediate care *Other long-term care (*see page 16) The nursing home type unit/facility is 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.

1   **a.**   **Total licensed beds.** Report the total number of beds authorized by the state licensing (certifying) agency.

    b.   **Beds set up and staffed.** 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 that have no other bed facilities, such as pediatric bassinets, isolation units and quiet rooms. 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, post anesthesia, or postoperative recovery room beds, psychiatric holding beds, observation beds, and beds that are used only as holding facilities for patients prior to their transfer to another hospital.

    c.   **Bassinets set up and staffed.** 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.

    d.   **Births.** Total births should exclude fetal deaths.

    e.   **Admissions.** Include the number of adult and pediatric admissions (exclude births). This figure should include all patients admitted during the reporting period, including neonatal and swing admissions.

    f.   **Inpatient days.** 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. An inpatient day of care (also commonly referred to as a <u>patient day</u> or a <u>census day</u>, or by some federal hospitals as an <u>occupied bed day</u>) 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.

    g.   **Emergency department 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.

    h.   **Total outpatient visits.** 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 (also reported on line D1k), home health service visits, and emergency department visits (also reported on line D1g).

        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. (e.g., alcoholism, dental, gynecology.) 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.

        Home health service visits are visits by home health personnel to a patient's residence.

i. **Inpatient surgical operations.** 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.

j. **Operating room.** A unit/room of a hospital or other health care facility in which surgical procedures requiring anesthesia are performed.

k. **Outpatient surgical operations.** 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. 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.

2a2. Managed Care Medicare Discharges. A discharge day where a Medicare Managed Care Plan is the source of payment.

2b2. Managed Care Medicare Inpatient Days. An inpatient day where a Medicare Managed Care Plan is the source of payment.

2c2. Managed Care Medicaid Discharges. A discharge day where a Medicaid Managed Care Plan is the source of payment.

2d2. Managed Care Medicaid Inpatient Days. An inpatient day where a Medicaid Managed Care Plan is the source of payment.

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.

3b. Tax appropriations. A predetermined amount set aside by the government from its taxing authority to support the operation of the hospital.

3c. Other operating revenue. 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.

3d. Nonoperating revenue. Includes investment income, extraordinary gains and other nonoperating gains.

3e. Total revenue. Add net patient revenue, tax appropriations, other operating revenue and nonoperating revenue.

3f. Payroll expenses. Include payroll for all personnel including medical and dental residents/interns and trainees.

3g. Employee benefits. Includes social security, group insurance, retirement benefits, workman's compensation, unemployment insurance, etc.

3h. Depreciation expense (for reporting period only). Report only the depreciation expense applicable to the reporting period. The amount should also be included in accumulated depreciation (D7b).

3i. Interest expense. Report interest expense for the reporting period only.

3j. Supply expense. The net cost of all tangible items that are expensed including freight, standard distribution cost, and sales and use tax minus rebates. This would exclude labor, labor-related expenses and services as well as some tangible items that are frequently provided as part of labor costs.

3k. All other expenses. Any total facility expenses not included in 3f-3j.

3l. Total expenses. Add 3f-3k. Includes all payroll and non-payroll expenses as well as any nonoperating losses (including extraordinary losses). **Treat bad debt as a deduction from gross patient revenue and not as an expense.**

4a. Total gross inpatient revenue. The hospital's full-established rates (charges) for all services rendered to inpatients.

4b. Total gross outpatient revenue. The hospital's full-established rates (charges) for all services rendered to outpatients.

4c. Total gross patient revenue. Add total gross inpatient revenue and total gross outpatient revenue.

5. **Uncompensated care.** Care for which no payment is expected or no charge is made. It is the sum of bad debt and charity care absorbed by a hospital or other health care organization in providing medical care for patients who are uninsured or are unable to pay.

5a. Bad debt. The provision for actual or expected uncollectibles resulting from the extension of credit. Report as a deduction from gross revenue. **For Question 6 (Revenue by payor), if you cannot break out your bad debt by payor, deduct the amount from self-pay.**

5b. Financial Assistance (Includes Charity care). Financial assistance and charity care refer to health services provided free of charge or at reduced rates 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.

5d. Medicaid Provider Tax, Fee or Assessment. Dollars paid as a result of a state law that authorizes collecting revenue from specified categories of providers. Federal matching funds may be received for the revenue collected from providers and some or all of the revenues may be returned directly or indirectly back to providers in the form of a Medicaid payment.

6. **REVENUE BY PAYOR**

6a1. Medicare. Should agree with the Medicare utilization reported in questions D2a1-D2b2.

6a1a. Fee for service patient revenue. Include traditional Medicare fee-for-service.

6a1c. Total. Medicare revenue (add Medicare fee for service patient revenue and Medicare managed care revenue).

6a2. Medicaid. Should agree with Medicaid utilization reported in questions D2c1-D2d2.

6a2a. Fee for service patient revenue. Do not include Medicaid disproportionate share payments (DSH) or other Medicaid supplemental payments.

6a2c. Medicaid disproportionate share payment (DSH). DSH minus associated provider taxes or assessments. Report in 'Net' column only.

6a2d. Medicaid supplemental payments. Supplemental payments the Medicaid program pays the hospital that are NOT Medicaid DSH, minus associated provider taxes or assessments. Report in 'Net' column only.

7a-c. Fixed Assets. Represent land and physical properties that are consumed or used in the creation of economic activity by the health care entity. The historical or acquisition costs are used in recording fixed assets. Net plant, property, and equipment represent the original costs of these items less accumulated depreciation and amortization.

7d. Gross Square Footage. Include all inpatient, outpatient, office, and support space used for or in support of your health care activities. Exclude exterior, roof, and garage space in the figure.

8. **Capital Expenses.** Expenses used to acquire assets, including buildings, remodeling projects, equipment, or property.

9. **Information Technology.**

a. **IT Operating expense.** Exclude department depreciation and operating dollars paid against capital leases.

b. **IT Capital expense.** Include IT capital expense for the current year only. Any capital expense that is carried forward from the previous year should be excluded from this figure. Include IT related capital included in the budget of other departments. (e.g., lab, radiology) if known or can be reasonably estimated. Include the total value of capital leases to be signed in the current year.

c. **Number of Employed IT staff (in FTEs).** Number of full-time equivalent (FTE) staff employed in the IT department/organization and on the hospital payroll.

d. **Total number of outsourced IT staff (in FTEs).** i.e., contracted staff.

e. **Electronic Health Record.** An electronic health record (EHR) integrates electronically originated and maintained patient-level clinical health information, derived from multiple sources, into one point of access. An EHR replaces the paper medical record as the primary source of patient information.

STAFFING

10. Full-Time Equivalent (FTE) is the total number of hours worked by all employees over the full 12-month reporting period, divided by the normal number of hours worked by a full-time employee for that same time period. For example, if your hospital considers a normal workweek for a full-time employee to be 40 hours, a total of 2,080 would be worked over a full year (52 weeks). If the total number of hours worked by all employees on the payroll is 208,000, then the number of full-time equivalents (FTE) is 100 (employees). The FTE calculation for a specific occupational category such as registered nurses is exactly the same. The calculation for each occupational category should be based on the number of hours worked by staff employed in that specific category.

a-b. 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. (10m)

d. 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 10c.

e. 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. (10m)

f. 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. Nursing assistive personnel. Certified nursing assistant or equivalent unlicensed staff who assist registered nurses in providing patient care related services as assigned by and under the supervision of a registered nurse.

h. Radiology technicians. Technical positions in imaging fields, including, but not limited to, radiology, sonography, nuclear medicine, radiation therapy, CT, MRI.

i. Laboratory technicians. Professional and technical positions in all areas of the laboratory, including, but not limited to, histology, phlebotomy, microbiology, pathology, chemistry, etc.

j. Pharmacists, licensed. Persons licensed within the state who are concerned with the preparation and distribution of medicinal products.

k. Pharmacy technicians. Persons who assist the pharmacist with selected activities, including medication profile reviews for drug incompatibilities, typing labels and prescription packaging, handling of purchase records and inventory control.

l. Respiratory Therapists. An allied health professional who specializes in scientific knowledge and theory of clinical problems of respiratory care. Duties include the collection and evaluation of patient data to determine an appropriate care plan, selection and assembly of equipment, conduction of therapeutic procedures, and modification of prescribed plans to achieve one or more specific objectives.

m. All other personnel. This should include all other personnel not already accounted for in other categories.

n. Total facility personnel. Add 10a-10m. Includes 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.)

o-p. Nursing home type unit/facility personnel. These lines 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 lines (10a-m), but cannot be broken out, please write "cannot break out" on this line.

q. Direct patient care RN. Registered nurses providing care directly to patients. Direct patient care responsibilities are patient-centered nursing activities carried out in the presence of the patient (such as admission, transfer/discharge, patient teaching, patient communication, treatments, counseling, and administration of medication.)

11. Privileged Physicians. Report the total number of physicians (by type) on the medical staff with privileges except those with courtesy, honorary and provisional privileges. Do not include residents or interns. Physicians that provide only non-clinical services (administrative services, medical director services, etc.) should be excluded.

Employed by your hospital. Physicians that are either direct hospital employees or employees of a hospital subsidiary corporation.

Individual contract. An independent physician under a formal contract to provide services at your hospital including at outpatient facilities, clinics and offices

Group contract. A physician that is part of a group (group practice, faculty practice plan or medical foundation) under a formal contract to provide services at your hospital including at inpatient and outpatient facilities, clinics and offices.

Not employed or under contract. Other physicians with privileges that have no employment or contractual relationship with the hospital to provide services.

The sum of the physicians reported in 11a-11f should equal the total number of privileged physicians in the hospital.

a. Primary care. A physician that provides primary care services including general practice, general internal medicine, family practice, general pediatrics, obstetrics/gynecology and geriatrics.

b. Emergency medicine. Physicians who provide care in the emergency department.

c. Hospitalist. Physicians whose primary professional focus is the care of hospitalized medical patients (through clinical, education, administrative and research activity).

d. Intensivist. A physician with special training to work with critically ill patients. Intensivists generally provided medical-surgical, cardiac, neonatal, pediatric and other types of intensive care.

e. Radiologist/pathologist/anesthesiologist. Radiologist. A physician who has specialized training in imaging, including but not limited to radiology, sonography, nuclear medicine, radiation therapy, CT, MRI. **Pathologist.** A physician who examines samples of body tissues for diagnostic purposes. **Anesthesiologist.** A physician who specializes in administering medications or other agents that prevent or relieve pain, especially during surgery.

f. Other specialist. Other physicians not included in the above categories that specialize in a specific type of medical care.

14. Advanced Practice Registered Nurses. Registered nurses with advanced didactic and clinical education, knowledge, skills, and scope of practice. Includes: **Physician assistant.** A healthcare professional licensed to practice medicine with supervision of a licensed physician. **Nurse practitioner.** A registered nurse with at least a master's degree in nursing and advanced education in primary care, capable of independent practice in a variety of settings. **Clinical nurse specialist (CNS).** A registered nurse who, through a formal graduate degree (masters or doctorate) CNS education program, has expertise in a specialty area of nursing practice. CNSs are clinical experts in the diagnosis and treatment of illness, and the delivery of evidence-based nursing interventions.

14c. Primary care. Medical services including general practice, general internal medicine, family practice, general pediatrics, obstetrics/gynecology.

Emergency department care. The provision of unscheduled outpatient services to patients whose conditions require immediate care in the emergency department setting.

Other specialty care. A clinic that provides specialized medical care beyond the scope of primary care.

Patient education. Goals and objectives for the patient and/or family related to therapeutic regimens, medical procedures and self-care.

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.

Other. Any type of care other than those listed above.

15. Foreign-educated nurses. Individuals who are foreign born and received basic nursing education in a foreign country. In general many of these nurses come to the US on employment-based visas which allow them to obtain a green card.

SECTION E. SUPPLEMENTAL INFORMATION
DEFINITIONS

1. **Satellite facility.** Services are available at a facility geographically remote from the hospital campus.
2. **Group Purchasing Organization.** An organization whose primary function is to negotiate contracts for the purpose of purchasing for members of the group or has a central supply site for its members.
3. **Distributor.** An entity that typically does not manufacture most of its own products but purchases and re-sells these products. Such a business usually maintains an inventory of products for sales to hospitals and physician offices and others.
5. **Types of Partnerships:**
   a. Health care providers outside your system (Include other hospitals, health care systems, FQHCs, community clinics)
   b. Local or state public health organizations (Include public health departments, institutes, etc.)
   c. Local or state human/social service organizations (Include food, housing/rental assistance, energy assistance, transportation assistance)
   d. Local or state government (Include municipal, city or county government, including public safety and policy/legislative initiatives at a local level)
   e. Non-profit organizations (Include National health associations, United Way, YMCA, Service leagues, healthy communities coalitions)
   f. Faith-based organizations
   g. Health insurance companies
   h. Schools (Include childhood, primary and secondary schools and colleges/universities)
   i. Local businesses or chambers of commerce
   j. Other (list)

Scale of partnerships:

Not involved.   No current partnerships with this type of organization

Collaboration.   Exchange information and share resources for a similar mission to enhance the capacity of the other partner

Formal Alliance Formalized partnership (binding agreement) among multiple organizations with merged initiatives, common goals and metrics

A

Ablation of Barrett's esophagus:
Premalignant condition that can lead to adenocarcinoma of the esophagus. The nonsurgical ablation of premalignant tissue in Barrett's esophagus by the application of thermal energy or light through an endoscope passed from the mouth into the esophagus. [ENDOAHOS].

Accumulated depreciation: The total
amount of depreciation for land and physical properties consumed or used in the creation of economic activity by the health care entity. [ADEPRA].

Acute long term care: Provides specialized
acute hospital care to medically complex patients who are critically ill, have multisystem complications and/or failure, and require hospitalization averaging 25 days, in a facility offering specialized treatment programs and therapeutic intervention on a 24 hour/7 day a week basis. [ACUHOS].

Adjusted admissions: An aggregate
measure of workload reflecting the sum of admissions and equivalent admissions attributed to outpatient services. The number of equivalent admissions attributed to outpatient services is derived by multiplying admissions by the ratio of outpatient revenue to inpatient revenue. [ADJADM].

Admissions + (Admissions * (Outpatient Revenue/Inpatient Revenue))

Adjusted average daily census: An
estimate of the average number of patients (both inpatients and outpatients) receiving care each day during the reporting period, which is usually 12 months. The figure is derived by

dividing the number of inpatient day equivalents (also called adjusted inpatient days) by the number of days in the reporting period. [ADJADC].

Adjusted inpatient days: An aggregate
measure of workload reflecting the sum of inpatient days and equivalent patient days attributed to outpatient services. The number of equivalent patient days attributed to outpatient services is derived by multiplying inpatient days by the ratio of outpatient revenue to inpatient revenue. [ADJPD].

Inpatient Days + (Inpatient Days * (Outpatient Revenue/Inpatient Revenue))

Admissions: The number of patients, excluding
newborns, accepted for inpatient service during the reporting period; the number includes patients who visit the emergency room and are later admitted for inpatient service. [ADMTOT].

Adult cardiac electrophysiology:
Evaluation and management of patients with complex rhythm or conduction abnormalities, including diagnostic testing, treatment of arrhythmias by catheter ablation or drug therapy, and pacemaker/defibrillator implantation and follow-up. [ADTEHOS].

Adult cardiac surgery: Includes minimally
invasive procedures that include surgery done with only a small incision or no incision at all, such as through a laparoscope or an endoscope and more invasive major surgical procedures that include open chest and open heart surgery. [ADTCHOS].

Adult cardiology services: An organized
clinical service offering diagnostic and interventional procedures to manage the full range of adult heart conditions. [ACARDHOS].

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. [ADULTHOS].

Adult diagnostic catheterization: Also

called coronary angiography or coronary arteriography, is used to assist in diagnosing complex heart conditions. It involves the insertion of a tiny catheter into the artery in the groin then carefully threading the catheter up into the aorta where the coronary arteries originate. Once the catheter is in place, a dye is injected which allows the cardiologist to see the size, shape, and distribution of the coronary arteries. Images are used to diagnose heart disease and to determine, whether or not surgery is indicated. [ACLABHOS].

Adult interventional cardiac

catheterization: Non surgical procedure that utilizes the same basic principles as diagnostic catheterization and then uses advanced techniques to improve the heart's function. It can be a less-invasive alternative to heart surgery. [ICLABHOS].

Advanced practice nurses: Registered

nurses with advanced didactic and clinical education, knowledge, skills, and scope of practice. Includes: Physician assistant; nurse practitioner; clinical nurse specialist. [APRN] .

AHA ID: AHA Assigned unique identification

number. [ID].

Airborne infection isolation room: A

single-occupancy room for patient care where environmental factors are controlled in an effort to minimize the transmission of those infectious agents, usually spread person to person by droplet nuclei associated with coughing or inhalation. Such rooms typically have specific ventilation requirements for controlled ventilation, air pressure and filtration. [AIRBHOS].

Alcohol / drug abuse or dependency

inpatient 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. [ALCHHOS].

Alcohol / 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. [ALCOPHOS].

Alzheimer Center: Facility that offers care to

persons with Alzheimer's disease and their families through an integrated program of clinical services, research, and education. [ALZHOS].

Ambulance services: Provision of ambulance

services to the ill and injured who require medical attention on a scheduled or unscheduled basis. [AMBHOS].

Ambulatory surgery center: Facility that

provides care to patients requiring surgery who are admitted and discharged on the same day. Ambulatory surgery centers are distinct from same day surgical units within the hospital outpatient departments for purposes of Medicare payments. [AMBSHOS].

Arthritis treatment center: Specifically

equipped and staffed center for the diagnosis and treatment of arthritis and other joint disorders. [ARTHCHOS].

Assisted living services: 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. [ASSTLHOS].

Assistive technology center: A program providing access to specialized hardware and software with adaptations allowing individuals greater independence with mobility, dexterity, or increased communication options. [RASTHOS].

Auxiliary: A volunteer community organization formed to assist the hospital in carrying out its purpose and to serve as a link between the institution and the community. [AUXHOS].

Average daily census: The average number of people served on an inpatient basis on a single day during the reporting period; the figure is calculated by dividing the number of inpatient days by the number of days in the reporting period. [ADC].

B

Bad debt: The provision for actual or expected uncollectibles resulting from the extension of credit. Report as a deduction from revenue.

Bariatric / weight control services: Bariatrics is the medical practice of weight reduction. [BWHTHOS].

Bassinets set up and staffed: Beds for babies, either normal newborns or those receiving special care in a neonatal intensive or intermediate care unit. Bassinets for normal newborns are not counted as inpatient beds, but as a separate count. Bassinets in neonatal intensive and intermediate care units are counted as part of the hospital's overall staffed and/or licensed bed count. [BASSIN].

Bed-size code: Indicates which of eight (8) pre-defined bed size ranges the hospital fits. Bed size ranges are: 6-24, 25-49, 50-99, 100-199, 200-299, 300-399, 400-499, 500+ [BSC].

Beds (total facility): Number of beds regularly maintained (set up and staffed for use) for inpatients as of the close of the reporting period. If

the hospital owns and operates a nursing home type unit/facility then total facility beds is a combined total of hospital plus nursing home unit beds. Excludes newborn bassinets. [BDTOT].

Birthing 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 all four stages of the birth process—labor, delivery, recovery, and postpartum. [BROOMHOS].

Births: Total number of infants born in the hospital during the reporting period. Births do not include infants transferred from other institutions, and are excluded from admission and discharge figures. [BIRTHS].

Blood Donor Center Hospital: A facility that performs, or is responsible for the collection, processing, testing or distribution of blood and components. [BLDOHOS].

Bone Marrow transplant services: The branch of medicine that transfers healthy bone marrow from one person to another or from one part to another to replace a diseased structure or to restore function. [OTBONHOS].

Breast cancer screening / mammograms: Provides 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. [MAMMSHOS].

Bundled payment: Bundling is a payment mechanism whereby a provider entity receives a single payment for services provided across one or parts of the care continuum. For example, an entity might receive a single payment for the hospital and physician services provided as part of an inpatient

stay or might receive a single payment for the post-acute care services involved in a single episode of care. The entity then has the responsibility for compensating each of the individual providers involved in the episode of care. [BNDPAY].

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. [BRNHOS].

C

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.

Cardiac electrophysiology: Evaluation and management of patients with complex rhythm or conduction abnormalities, including diagnostic testing, treatment of arrhythmias by catheter ablation or drug therapy, and pacemaker/defibrillator implantation and follow-up. [ADTEHOS].

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 special 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. [CICHOS].

Cardiac Rehabilitation: A medically supervised program to help heart patients recover quickly and improve their overall physical and mental functioning. The goal is to reduce risk of another cardiac event or to keep an already present heart condition from getting worse. Cardiac rehabilitation programs include: counseling to patients, an exercise program, helping patients modify risk factors such as smoking and high blood pressure, providing vocational guidance to enable the patient to return to work, supplying information on physical limitations and lending emotional support. [CHABHOS].

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. [CMNGTHOS].

CBSA name: The term Core-Based Statistical Area (CBSA) is a collective term for both Metropolitan and Micropolitan areas. A metropolitan area has a population of more than 50,000; while a micropolitan area has a population between 10,000 and 50,000. [CBSANAME].

CBSA type: Type of Core-based statistical Area (CBSA). The Metro type designates a Metropolitan Statistical Area.The Micro type designates a Micropolitan Statistical Arera. *Also see Census Division Type.* [CBSATYPE].

Census Bureau codes: FIPS State and County Code. [FCOUNTY].

Certified trauma center: A facility certified to provide emergency and specialized intensive

care to critically ill and injured patients. [TRAUMHOS].

Chaplaincy / pastoral care services: A service ministering religious activities and providing pastoral counseling to patients, their families, and staff of a health care organization. [CHAPHOS].

Chemotherapy: An organized program for the treatment of cancer by the use of drugs or chemicals. [CHTHHOS].

Children's wellness program: A program that encourages improved health status and a healthful lifestyle of children through health education, exercise, nutrition and health promotion. [CWELLHOS].

Chiropractic services: An organized clinical service including spinal manipulation or adjustment and related diagnostic and therapeutic services. [CHIHOS].

Closed cardiac intensive care: Are only intensivists authorized to care for ICU patients in medical-surgical intensive care? [CLSCIC].

Closed medical surgical intensive care: Are only intensivists authorized to care for ICU patients in medical-surgical intensive care? [CLSMSI].

Closed neonatal intensive care: Are only intensivists authorized to care for patients in neonatal intensive care? [CLSNIC].

Closed other intensive care: Are only intensivists authorized to care for patients in other intensive care? [CLSOIC].

Closed pediatric intensive care: Are only intensivists authorized to care for patients in pediatric intensive care? [CLSPIC].

Closed physician-hospital organization (Closed PHO): A joint venture between the hospital and physicians who

have been selected on the basis of cost-effectiveness and/or high quality. 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. [CPHOHOS].

Combined Statistical Area name: The name of a Combined Statistical Area (CSA). A CSA is composed of adjacent Metropolitan and Micropolitan Statistical areas as defined by the U.S. Census Bureau. [CSANAME].

Combined Statistical Area code: The code for a Combined Statistical Area (CSA). A CSA is composed of adjacent Metropolitan and Micropolitan Statistical areas as defined by the U.S. Census Bureau. [CSACODE].

Community Health Education: Education that provides information to individuals and populations, support to personal, family and community health decisions with the objective of improving health status. [HLTHCHOS].

Community hospital designation: Community hospitals are designated as all nonfederal, short-term general, and special hospitals, including special childrens hospitals, whose facilities and services are available to the public. [CHC] [COMMTY].

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. [COUTRHOS].

Complementary and alternative medicine services: Organized hospital services or formal arrangements to providers that provide care or treatment not based solely on traditional western allopathic medical teachings as instructed in most U.S. medical schools. Includes any of the following: acupuncture, chiropractic,

homeopathy, osteopathy, diet and lifestyle changes, herbal medicine, massage therapy, etc. [COMPHOS].

Computed-tomography (CT) scanner:
Computed tomographic scanner for head or whole body scans. [CTSCNHOS].

Computer assisted orthopedic surgery:
Orthopedic surgery using computer technology, enabling three-dimensional graphic models to visualize a patient's anatomy. [CAOSHOS].

Contract managed hospital:
Indicates whether hospital is 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. [MNGT].

Control / Ownership Type:
The type of organization responsible for establishing policy concerning the overall operation of the hospital. [CNTRL].

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. [CPREVHOS].

D

Dental services:
An organized dental service or dentists on staff, not necessarily involving special facilities, providing dental or oral services to inpatients or outpatients. [DENTSHOS].

Depreciation expense:
The cost of wear and tear, inadequacy, obsolescence, etc. on buildings and equipment, expressed as an expense for a given reporting period. [DPEXA].

Diagnostic radioisotope facility:
The use of radioactive isotopes (radiopharmaceuticals) as tracers or indicators to detect an abnormal condition or disease. [DRADFHOS].

Direct patient care RNs:
Registered nurses providing care directly to patients. Direct patient care responsibilities are patient-centered nursing activities carried out in the presence of the patient (such as admission, transfer/discharge, patient teaching, patient communication, treatments, counseling, and administration of medication). [ERNFTE].

Does the hospital have a formal written contract with an HMO?:
A health care organization that acts as both insurer and provider of comprehensive but specified medical services in return for prospective per capita (capitation) payments. [HMO86].

E

Electrodiagnostic services:
Diagnostic testing services for nerve and muscle function including services such as nerve conduction studies and needle electromyography. [REDSHOS].

Electron Beam Computed Tomography (EBCT):
A high tech computed tomography scan used to detect coronary artery disease by measuring coronary calcifications. This imaging procedure uses electron beams which are magnetically steered to produce a visual of the coronary artery and the images are produced faster than conventional CT scans. [EBCTHOS].

Emergency Department:
Hospital facilities for the provision of unscheduled outpatient services to patients whose conditions require immediate care. [EMDEPHOS].

Emergency room visits:
Number of emergency room visits reported by the hospital. An

emergency room visit is defined as a visit to the emergency unit. When an emergency outpatient is admitted to the inpatient area of the hospital, he or she is counted as an emergency room visit and subsequently, as inpatient admissions. [VEM].

Enabling Services: A program that is designed to help the patient access health care services by offering any of the following linguistic services, transportation services, and/or referrals to local social services agencies. [ENBHOS].

Endoscopic retrograde cholangiopancreatography (ERCP): A procedure in which a catheter is introduced through an endoscope into the bile ducts and pancreatic ducts. Injection of contrast material permits detailed x-ray of these structures. The procedure is used diagnostically as well as therapeutically to relieve obstruction or remove stones. [ENDORHOS].

Endoscopic ultrasound: Specially designed endoscope that incorporates an ultrasound transducer used to obtain detailed images of organs in the chest and abdomen. The endoscope can be passed through the mouth or the anus. When combined with needle biopsy the procedure can assist in diagnosis of disease and staging of cancer. [ENDOUHOS].

Enrollment assistance program: A program that provides enrollment assistance for patients who are potentially eligible for public health insurance programs such as Medicaid, State Children's Health Insurance, or local/state indigent care programs [ENRHOS].

Equity model participation: The hospital allows established practitioners to become shareholders in a professional corporation in exchange for tangible and intangible assets of their existing practices. [EQMODHOS].

Esophageal impedance study: A test in which a catheter is placed through the nose into the esophagus to measure whether gas or liquids are passing from the stomach into the esophagus and causing symptoms. [ENDOEHOS].

Extracorporeal shock waved lithotripter (ESWL): A medical device used for treating stones in the kidney or urethra. The device disintegrates kidney stones noninvasively through the transmission of acoustic shock waves directed at the stones. [ESWLHOS].

F

Fertility Clinic: A specialized program set in an infertility center that provides counseling and education as well as advanced reproductive techniques such as: injectable therapy, reproductive surgeries, treatment for endometriosis, male factor infertility, tubal reversals, in vitro fertilization (IVF), donor eggs, and other such services to help patients achieve successful pregnancies. [FRTCHOS].

Fitness center: Provides exercise, testing, or evaluation programs and fitness activities to the community and hospital employees. [FITCHOS].

Foundation participation: The hospital maintains 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. [FOUNDHOS].

Freestanding outpatient 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. [OPCENHOS].

Full-field digital mammography:
Combines the x-ray generators and tubes used in analog screen-film mammography (SFM) with a detector plate that converts the x-rays into a digital signal. [FFDMHOS].

Full time equivalent employees (FTE):
Full time personnel on payroll plus one half of the part-time personnel on payroll.

G

General medical / surgical adult care:
Provides acute care to adult patients in medical and surgical units on the basis of physicians' orders and approved nursing care plans. [GENHOS].

General medical / surgical pediatric

care: Provides acute care to pediatric patients on the basis of physicians' orders and approved nursing care plans. [PEDHOS].

Genetic testing / counseling: A service equipped with adequate laboratory facilities and directed by a qualified physician to advise parents and prospective parents on potential problems in cases of genetic defects. [GNTCHOS].

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. [GERSVHOS].

GPO: A Group Purchasing Organization negotiates purchasing contracts for members of the group or has a central supply site for its members. [GROUP].

Group practice without walls: Hospital sponsors the formation of, or provides capital to physicians to establish, a group to share

administrative expenses while remaining independent practitioners. [GPWWHOS].

H

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. [HLTHFHOS].

Health research: Organized hospital research program in any of the following areas: basic research, clinical research, community health research, and/or research on innovative health care delivery. [HLTRHOS].

Health screenings: 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. [HLTHSHOS].

Health system taxonomy: 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. [CLUSTER].

Heart transplant: The branch of medicine that transfers a heart organ or tissue from one person to another to replace a diseased structure or to restore function. [HARTHOS].

Hemodialysis: Provision of equipment and personnel for the treatment of renal insufficiency on an inpatient or outpatient basis. [HEMOHOS].

HIV-AIDS services: 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. [AIDSSHOS].

HMO: Hospital has an equity interest in a health care organization that acts as both insurer and provider of comprehensive but specified medical services in return for prospective per capita (capitation) payments. [IPHMOHOS].

Home health services: Service providing nursing, therapy, and health-related homemaker or social services in the patient's home. [HOMEHHOS].

Hospice Program: A recognized clinical program with specific eligibility criteria that provides palliative medical care focused on relief of pain and symptom control and other services that address the emotional, social, financial and spiritual needs of terminally ill patients and their families. Care can be provided in a variety of settings, both inpatient and at home. [HOSPCHOS].

Hospital Location: Indicates whether a hospital is in an urban or rural location. [LOCATION].

Hospital total expenses (including bad debt): Includes all payroll and non-payroll expenses (including bad debt) as well as any non-operating losses (including extraordinary losses). [EXPTHA].

Hospital Unit Beds: Only operating beds, not constructed bed capapcity. Includes all bed facilities that are set up and staffed for use by inpatients that 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, post anesthesia, 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. [BDH].

Hospital-base 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 non-emergency basis, and laboratory and other diagnostic testing as ordered by staff or outside physician referral. [OPHOSHOS].

Hospitalists Provide Care: Indicates whether hospitalists provide patient care in the hospital. [HSPTL].

I

Image-guided radiation therapy: Automated system for image-guided radiation therapy that enables clinicians to obtain high-resolution x-ray images to pinpoint tumor sites, adjust patient positioning when necessary, and complete a treatment, all within the standard treatment time slot, allowing for more effective cancer treatments. [IGRTHOS].

Immunization program: Program that plans, coordinates and conducts immunization services in the community. [IMPRHOS].

Indemnity fee for service plan: Hospital has an equity interest in the traditional type of health insurance, in which the insured is reimbursed for covered expenses without regard to choice of provider. Payment up to a stated limit may be made either to the individual incurring and claiming the expense, or directly to providers. [IPFEEHOS].

Independent practice association:
Hospital sponsors an independent practice association (IPA), 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. [IPAHOS].

Indigent care clinic: Health care services for uninsured and underinsured persons where care is free of charge or charged on a sliding scale. This would include free clinics staffed by volunteer practitioners, but could also be staffed by employees with the sponsoring health care organization subsidizing the cost of service. [ICARHOS].

Inpatient Days: The number of adult and pediatric days of care, excluding newborn days of care, rendered during the entire reporting period. [IPDTOT].

Inpatient days (hospital unit): The number of adult and pediatric days of care, excluding newborn days of care, rendered during the entire reporting period. [IPDH].

Inpatient palliative care unit: An inpatient palliative care ward is a physically discreet, inpatient nursing unit where the focus is palliative care. The patient care focus is on symptom relief for complex patients who may be continuing to undergo primary treatment. Care is delivered by palliative medicine specialists. [IPALHOS].

Integrated salary model: Hospital has an arrangement in place whereby physicians are salaried by the hospital or another entity of a health system to provide medical services for primary care and specialty care. [ISMHOS].

Intensity-Modulated Radiation Therapy (IMRT): A type of three-dimensional radiation therapy, which improves the targeting of treatment delivery in a way that is likely to decrease damage to normal tissues and allows varying intensities. [IMRTHOS].

Intensivists provide care: Intensivists are board-certified physicians who are additionally certified in the sub-specialty of critical care medicine; or physicians board-certified in emergency medicine who have completed a critical care fellowship in an ACGME accredited program; or physicians board-certified in Medicine, Anesthesiology, Pediatrics or Surgery who completed training prior to the availability of sub-specialty certification in critical care and who have provided at least six weeks of full-time ICU care annually since 1987. [INTCAR].

Interest expense: Interest payments made by the hospital on bank loans, notes, bonds, and mortgages. [INTEXA].

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. [ICFHOS].

Intraoperative magnetic resonance imaging: An integrated surgery system which provides an MRI system in an operating room. The system allows for immediate evaluation of the degree to tumor resection while the patient is undergoing a surgical resection. Intraoperative MRI exists when a MRI (low-field or high-field) is placed in the operating theater and is used during surgical resection without moving the patient from the operating room to the diagnostic imaging suite. [IMRIHOS].

J

Joint Venture: A contractual arrangement between two or more parties forming an unincorporated business. The participants in the

arrangements remain independent and separate outside of the venture purpose.

K

Kidney transplant: The branch of medicine that transfers a kidney organ or tissue from one person to another to replace a diseased structure or to restore function. [KDNYHOS].

L

Laboratory technicians: Number that represents the professional and technical positions in all areas of the laboratory, including, but not limited to, histology, phlebotomy, microbiology, pathology, chemistry, etc. [FTLAB] [PTLAB].

Latitude: Hospital's Latitude. [LAT].

Length of Stay: Length of Stay (LOS) refers to the average number of days a patient stays at the facility. Short-term hospitals are those where the average LOS is less than 30 days. Long-term hospitals are those where the average LOS is 30 days or more. [LOS].

Licensed Beds: Total number of beds authorized by the state licensing (certifying agency). [LBEDSA].

Licensed beds (long term unit): Total number of long term unit beds authorized by the state licensing (certifying agency). [LBEDLA].

Licensed practical or vocational nurses: Number that represents the nurses who graduated from an approved school of practical (vocational) nursing who work under the supervision of registered nurses and/or physicians. [FTLPNTF] [PTLPNTF].

Linguistic / translation services: Services provided by the hospital designed to make

health care more accessible to non-English speaking patients and their physicians. [LINGHOS].

Liver transplant: The branch of medicine that transfers a liver organ or tissue from one person to another to replace a diseased structure or to restore function. [LIVRHOS].

Longitude: Hospital's Longitude. [LONG].

Lung transplant: The branch of medicine that transfers a lung organ or tissue from one person to another to replace a diseased structure or to restore function. [LUNGHOS].

M

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. [MRIHOS].

Magnetoencephalography: A noninvasive neurophysiological measurement tool used to study magnetic fields generated by neuronal activity of the brain. MEG provides direct information about the dynamics of evoked and spontaneous neural activity and the location of their sources in the brain. The primary uses of MEG include assisting surgeons in localizing the source of epilepsy, sensory mapping, and the study of brain function. When it is combined with structural imaging, it is known as *magnetic source imaging (MSI).*

Management service organization: Hospital maintains a corporation, owned by the hospital or a physician/hospital joint venture, that provides management services to one or more medical group practices. The management services organization (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. [MSOHOS].

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. [MEALSHOS].

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. [MSICHOS].

Medicare Provider ID: A formal identification number issued by the Medicare program to identify hospitals that are eligible to participate in the Medicare program. [MCRNUM].

Metropolitan Division name: Defined by the U.S. Census Bureau. Metropolitan Divisions are small groups of counties within a Metropolitan Statistical Area that comprise a core population.

Metropolitan Division code: Code for an assigned Metropolitan Division as assigned by the U.S. Census Bureau.

Mobile Health Services: Vans and other vehicles used to deliver primary care services. [MOHSHOS].

Modified FIPS County Code: Three-digit Federal Information Processing Standards (FIPS) code assigned by the Census Bureau. 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. This is an AHA-derived code. [MCNTYCD].

More foreign-educated nurses hired to fill RN vacancies: The facility hired more foreign-educated nurses this year than last year to help fill RN vacancies. Foreign-educated nurses are individuals who are foreign born and received basic nursing education in a foreign country. [FORNRSA].

Multi-slice spiral computed tomography < 64 slice: A specialized computer tomography procedure that provides three-dimensional processing and allows narrower and mulitple slices with increased spatial resolution and faster scanning times as compared to a regular computerd tomography scan. [MSCTHOS].

Multi-slice spiral computed tomography 64 + slice: Involves the acquisition of volumetric tomographic x-ray absorption data expressed in Hounsfield units using multiple rows of detectors. 64+ systems reconstruct the equivalent of 64 or greater slices to cover the imaged volume. [MSCTGHOS].

N

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. [NICHOS].

Neonatal intermediate care: A unit that must be separate from the normal newborn nursery

and that provides intermediate and/or recover care and some specialized services, including immediate resuscitation, intravenous therapy, and capacity for prolonged oxygen therapy and monitoring. [NINTHOS].

Net property, plant and equipment: Original cost of fixed assets less accumulated depreciation and amortization. [ASSNET].

Network member: A group of hospitals, physicians, other providers, insurers and/or community agencies that voluntarily work together to coordinate and deliver health services. [NETWRK].

Neurological services: Services provided by the hospital dealing with the operative and nonoperative management of disorders of the central, peripheral, and autonomic nervous system. [NEROHOS].

NPI number: A 10-position, intelligence-free numeric identifier (10-digit number). [NPINUM].

Number of Airborne infection isolation rooms: Total number of single-occupancy rooms for patient care where environmental factors are controlled in an effort to minimize the transmission of those infectious agents, usually spread person to person by droplet nuclei associated with coughing or inhalation. Such rooms typically have specific ventilation requirements for controlled ventilation, air pressure and filtration. [AIRBROOM].

Nursing assistive personnel: Number that represents the certified nursing assistant or equivalent unlicensed staff assigned to patient care units and reporting to nursing. [FTAST] [PTAST].

Nutrition program: Those services within a health care facility which are designed to provide inexpensive, nutritionally sound meals to patients. [NUTRPHOS].

O

Obstetric unit care level: Levels should be designated: (1) unit provides services for uncomplicated maternity and newborn cases; (2) unit provides services for uncomplicated cases, the majority of complicated problems, and special neonatal services; and (3) unit provides services for all serious illnesses and abnormalities and is supervised by a full-time maternal/fetal specialist. [OBLEV].

Obstetrics care: Provides care, examination, treatment, and other services to women during pregnancy, labor, and the puerperium. [OBHOS].

Occupational health services: Includes services designed to protect the safety of employees from hazards in the work environment. [OCCHSHOS].

Oncology services: Inpatient and outpatient services for patients with cancer, including comprehensive care, support and guidance in addition to patient education and prevention, chemotherapy, counseling and other treatment methods. [ONCOLHOS].

Open physician-hospital organization: The hospital maintains a joint venture between the hospital and all members of the medical staff who wish to participate. The open physician-hospital organization (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. [OPHOHOS].

Optical Colonoscopy: An examination of the interior of the colon using a long, flexible, lighted tube with a small built-in camera. [ENDOCHOS].

Orthopedic services: Services provided for the prevention or correction of injuries or disorders of the skeletal system and associated muscles, joints and ligaments. [ORTOHOS].

Other care: Any type of care other than those previously listed. [OTHCRHOS].

Other intensive care: A specially staffed, specially equipped, separate section of a hospital dedicated to the observation, care, and treatment of patients with life threatening illnesses, injuries, or complications from which recovery is possible. It provides special expertise and facilities for the support of vital function and utilizes the skill of medical nursing and other staff experienced in the management of these problems. [OTHIHOS].

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. [OTHLTHOS].

Other outpatient visits (non ER): Visit by a patient who is not lodged in the hosptial while receiving medical, dental, or other services. [VOTH].

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. [SPCICHOS].

Other Transplant - hospital: Other transplant services includes heart/lung, or other multi-transplant surgeries. [OTOTHHOS].

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. [OPSRGHOS].

P

Paid on capitated basis: The percentage of the hospital's net patient revenue that is paid on a capitated base. Capitation is 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. [CPPCT].

Paid on shared risk basis: The percentage of the hospital's net patient revenue that is paid on a shared risk basis. A payment arrangement in which a hospital and a managed care organization share the risk of adverse claims experience. Methods for sharing risk could include: capitation with partial refunds or supplements if billed hospital charges or costs differ from capitated payments, and service or discharge-based payments with withholds and bonus payouts that depend on expenditure targets. [CAPRSK].

Pain Management Program: A recognized clinical service or program providing specialized medical care, drugs or therapies for the management of acute or chronic pain and other distressing symptoms, administered by specially trained physicians and other clinicians, to patients suffering from an acute illness of diverse causes. [PAINHOS].

Palliative Care Program: An organized program providing specialized medical care, drugs or therapies for the management of acute or chronic pain and/or the control of symptoms administered by specially trained physicians and other clinicians; and supportive care services, such as counseling on advanced directives, spiritual care, and social services, to patients with advanced disease and their families. [PALHOS].

Patient Controlled Analgesia: Patient-controlled Analgesia (PCA) is intravenously administered pain medicine under the patient's control. The patient has a button on the end of a cord than can be pushed at will, whenever more pain medicine is desired. This button will only deliver more pain medicine at pre-determined intervals, as programmed by the doctor's order. [PCAHOS].

Patient education center: Written goals and objectives for the patient and/or family related to therapeutic regimens, medical procedures, and self care. [PATEDHOS].

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. [PATRPHOS].

Pediatric cardiac electrophysiology: Evaluation and management of pediatric patients with complex rhythm or conduction abnormalities, including diagnostic testing, treatment of arrhythmias by catheter ablation or drug therapy, and pacemaker/defibrillator implantation and follow-up. [PEDEHOS].

Pediatric cardiac surgery - hospital: Includes minimally invasive procedures that include surgery done with only a small incision or no incision at all, such as through a laparoscope or an endoscope and more invasive major surgical procedures that include open chest and open heart surgery. [PEDCSHOS].

Pediatric cardiology services: An organized clinical service offering diagnostic and intervential procedures to manage the full range of pediatric heart conditions. [PCARDHOS].

Pediatric diagnostic catheterization: Cardiac angiography, also called coronary angiography or coronary arteriography, is used to assist in diagnosing complex heart conditions. It involves the insertion of a tiny catheter into the artery in the groin then carefully threading the catheter up into the aorta where the coronary arteries originate. Once the catheter is in place, a dye is injected which allows the cardiologist to see the size, shape, and distribution of the coronary arteries. Images are used to diagnose heart disease and to determine, whether or not surgery is indicated. [PCLABHOS].

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. [PEDICHOS].

Pediatric interventional cardiac catheterization: Non surgical procedure that utilizes the same basic principles as diagnostic catheterization and then uses advanced techniques to improve the heart's function. It can be a less-invasive alternative to heart surgery. [PELABHOS].

Pharmacists, licensed: Number that represents the persons licensed within the state who are concerned with the preparation and distribution of medicinal products. [FTPHR] [PTPHR].

Pharmacy technicians: Number that represents the persons who assist the pharmacist with selected activities, including medication profile reviews for drug incompatibilities, typing labels and prescription packaging, handling or purchase records and inventory control. [FTPHT] [PTPHT].

Physical Rehabilitation care: 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. [REHABHOS].

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. [RHBOPHOS].

Physicians and dentists: Number that represents the full-time employed physicians and dentists employed directly by the hospital. Includes only those physicians and dentists engaged in clinical practice and on the payroll. Those who hold administrative positions are reported as other personnel. The number excludes those physicians and dentists who are paid on a fee basis and should not be interpreted as representing the size of the hospital's medical staff. [FTMDTF] [PTMDTF].

Positron emission tomography (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. [PETHOS].

Positron emission tomography/CT (PET/CT): Provides metabolic functional information for the monitoring of chemotherapy, radiotherapy, and surgical planning. [PETCTHOS].

PPO: Hospital has an equity interest in a pre-set arrangement in which purchasers and providers agree to furnish specified health services to a group of employees/patients. [IPPPOHOS]

Has formal written contract with a PPO: A pre-set arrangement in which purchasers and providers agree to furnish specified health services to a group of employees/patients. [PPO86].

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. [PCDEPHOS].

Primary Service: The category best describing the hospital's type of service provided to the majority of admissions. [SERV].

Property, plant & equipment at cost: Represents land and physical properties that are consumed or used in the creation of economic activity by the health care entity. The historical or acquisition costs are used in recording fixed assets. [PLNTA].

Prosthetic and orthotic services: Services providing comprehensive prosthetic and orthotic evaluation, fitting, and training. [RPRSHOS].

Proton beam therapy: A form of radiation therapy which administers proton beams. While producing the same biologic effects as x-ray beams, the energy distribution of protons differs from conventional x-ray beams in that they can be more precisely focused in tissue volumes in a three-dimensional pattern resulting in less surrounding tissue damage than conventional radiation therapy permitting administration of higher doses. [PTONHOS].

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. [PSYHOS].

Psychiatric child/adolescent services: Provides care to emotionally disturbed children and adolescents, including those admitted for diagnosis and those admitted for treatment. [PSYCAHOS].

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. [PSYLSHOS].

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. [PSYEDHOS].

Psychiatric emergency services:
Services of 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. [PSYEMHOS].

Psychiatric geriatric services: Provides care to emotionally disturbed elderly patients, including those admitted for diagnosis and those admitted for treatment. [PSYGRHOS].

Psychiatric outpatient services:
Provides medical care in an outpatient setting, including diagnosis and treatment, of psychiatric outpatients. [PSYOPHOS].

Psychiatric partial hospitalization

program: Organized hospital services of intensive day/evening outpatient services of three hours of more duration, distinguished from other outpatient visits of one hour. [PSYPHHOS].

Psychiatric residential treatment:
Overnight psychiatric care in conjunction with an intensive treatment program in a setting other than a hospital. [PSTRTHOS].

R

Radiology technicians: Number that represents the technical positions in imaging fields, including, but not limited to, radiology, sonography, nuclear medicine, radiation therapy, CT, MRI. [FTRAD] [PTRAD].

Registered hospital: Indicates whether a hospital is Registered with the American Hospital Association. Membership is not a requirement. [MTYPE].

Registered nurses: Number that represents the registered nurses working for the hospital. Registered nurses are defined as 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. The number does not include private duty nurses, and nurses in administrative positions are reported as other personnel. [FTRNTF] [PTRNTF].

Retirement housing: A facility that 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. [RETIRHOS].

Robot-assisted walking therapy: A form of physical therapy that uses a robotic device to assist patiets who are relearning how to walk. [RBOTHOS].

Robotic surgery: The use of mechanical guidance devices to remotely manipulate surgical instrumentation. [ROBOHOS].

S

Satellite emergency department: A facility owned and operated by the hospital but physically separate from the hospital for the provision of unscheduled outpatient services to patients whose conditions require immediate care. A free-standing ED is not physically connected to a hospital, but has all necessary emergency staffing and equipment on-site. [FSERHOS].

Separate long-term nursing home: Hospital maintains a separate nursing-home type of long-term care unit. [SUNITS].

Shaped beam Radiation System: A precise, non-invasive treatment that involves targeting beams of radiation that mirror the exact size and shape of a tumor at a specific area of a tumor to shrink or destroy cancerous cells. This procedure delivers a therapeutic dose of radiation that conforms precisely to the shape of the tumor, thus minimizing the risk to nearby tissues. [BEAMHOS].

Simulated rehabilitation environment: Rehabilitation focused on retraining functional skills in a contextually appropriate environment (simulated home and community settings) or in a traditional setting (gymnasium) using motor learning principles. [RSIMHOS].

Single photon emission computerized tomography (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. [SPECTHOS].

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. [SNHOS].

Sleep Center: Specially equipped and staffed center for the diagnosis and treatment of sleep disorders. [SLEPHOS].

Social work services: Organized 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. [SOCWKHOS].

Sports medicine: Provision of diagnostic screening and assessment and clinical and rehabilitation services for the prevention and treatment of sports-related injuries. [SPORTHOS].

Stereotactic radiosurgery: Stereotactic radiosurgery (SRS) is a radiotherapy modality that delivers a high dosage of radiation to a discrete treatment area in as few as one treatment session. Includes gamma knife, cyberknife, etc. [SRADHOS].

Supplies purchased directly: Indicates whether supplies are purchased directly through distributor. [SUPLY].

Supply expense: The net cost of all tangible items that are expensed including freight, standard distribution cost, and sales and use tax minus rebates. This would exclude labor, labor-related expenses and services as well as some tangible items that are frequently provided as part of labor costs. [SUPEXA].

Support groups: A hospital-sponsored program that 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. [SUPPGHOS].

Surgical operations (inpatient): Those surgical operations, whether major or minor,

performed in the operating room(s). A surgical operation involving more than one surgical procedure is considered only one surgical operation. [SUROPIP].

Surgical operations (outpatient):
Scheduled surgical services provided to patients who do not remain in the hospital overnight. For the AHA Annual Survey, outpatient 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. [SUROPOP].

Swing bed services: A hospital bed that can be used to provide either acute or long-term care depending on community or patient needs. To be eligible a hospital must have a Medicare provider agreement in place, have fewer than 100 beds, be located in a rural area, not have a 24 hour nursing service waiver in effect, have not been terminated from the program in the prior two years, and meet various service conditions. [SWBDHOS].

System member: Indicates whether a hospital is affiliated with a healthcare system. A multihospital health care system is two or more hospitals owned, leased, sponsored, or contract managed by a central organization. [MHSMEMB].

T

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. [TEENSHOS].

Tissue transplant: The branch of medicine that transfers tissue from one person to another or from one part to another to replace a diseased structure or to restore function or to change appearance. [TISUHOS].

Tobacco Treatment Services: Organized hospital services with the purpose of ending tobacco-use habits of patients addicted to tobacco/nicotine. [TOBHOS].

Total Capital Expenditures: Expenses used to acquire assets, including buildings, remodeling projects, equipment, or property. [CEAMT].

Total facility employee benefits:
Includes social security, group insurance, retirement benefits, workman's compensation, unemployment insurance, etc. [NPAYBEN].

Total facility expenses (excluding bad debt): Includes all payroll and non-payroll expenses (excluding bad debt) as well as any non-operating losses (including extraordinary losses) for the entire reporting period. [EXPTOT].

Total facility payroll expenses: Dollar value of the facility's total payroll for all personnel, including medical/dental residents and interns and other trainees. The dollar value includes payroll for personnel working in the nursing home unit of a hospital that owns and operates a nursing home-type unit/facility. [PAYTOT].

Total gross square feet: Include all inpatient, outpatient, office, and support space used for or in support of health care activities; exclude exterior, roof, and garage space in the figure. [GFEET].

Total Medicaid days: Inpatient days where a Medicaid Managed Care Plan is the source of payment.

Total Medicaid discharges: Discharge days where a Medicaid Managed Care Plan is the source of payment. [MCDDC].

Total Medicare days: Inpatient days where Medicare Managed Care Plan is the source of payment.

Total Medicare discharges: Discharge days where a Medicare Managed Care Plan is the source of payment. [MCRDC].

Total outpatient visits: Number of outpatient visits reported by the hospital. An outpatient visit is defined as a visit by a patient who is not lodged in the hospital while receiving medical, dental, or other services. Each visit an outpatient makes to a discrete unit constitutes one visit regardless of the number of diagnostic and/or therapeutic treatments that the patient receives. Total outpatient visits include all clinic visits, referred visits, observation services, outpatient surgeries, and emergency room visits. [VTOT].

Total full-time personnel (FT): Sum of all categories of full-time personnel working for the hospital, including: physicians and dentists; medical/dental residents and interns; other trainees; registered nurses; licensed practical or vocational nurses; nursing assistive personnel; all other personnel. This number includes those personnel working in the nursing home unit of a hospital that owns and operates a nursing home-type unit/facility. Full-time personnel are defined as those personnel working a minimum of 35 hours a week. [FTTOT].

Total part-time personnel (PT): Sum of all categories of part-time personnel working for the hospital, including: physicians and dentists; medical/dental residents and interns; other trainees; registered nurses; licensed practical or vocational nurses; nursing assistive personnel; all other personnel. This number includes those personnel working in the nursing home unit of a hospital that owns and operates a nursing home-type unit/facility. [PTTOT].

Total surgical operations: Those surgical operations, whether major or minor, performed in the operating room(s). A surgical operation involving more than one surgical procedure is still considered only one surgical operation. [SUROPTOT].

Transportation to health services: 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. [TPORTHOS].

Trauma center certified level: 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. Level 4 or greater: Trauma centers are certified by the state in which they are located; sometimes, a hospital will supply the level designation assigned by the state, which may be different than the levels defined by AHA. [TRAUML90].

U

Ultrasound: The use of acoustic waves above the range of 20,000 cycles per second to visualize internal body structures. [ULTSNHOS].

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. [URGCCHOS].

V

Virtual colonoscopy: Noninvasive screening procedure used to visualize, analyze and detect cancerous or potentially cancerous polyps in the colon. [VRCSHOS].

Volunteer services department: An organized hospital department responsible for coordinating the services of volunteers working within the institution. [VOLSVHOS].

W

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 obstetrics. [WOMHCHOS].

Wound Management Services - hospital: Services for patients with chronic wounds and non-healing wounds often resulting from diabetes, poor circulation, improper seating and immunocompromising conditions. [WMGTHOS].