FISCAL YEAR
2016

AHA Annual Survey Database™

Organizational Structure

Services

Beds and Utilization

Expenses

Staffing

Affiliations

AHA Annual Survey Database™
Fiscal Year 2016

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‡ **Page numbers based on PDF format**

Introduction

AHA Annual Survey Database™ for Fiscal Year 2016 is a comprehensive hospital database for peer review benchmarking, market analysis, and health services research. It is produced 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 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. Survey participants are not required to be members of the American Hospital Association.

Hospitals report information on their organizational structure, service lines, utilization, finances, and staffing for a specific fiscal year. Consistent processes and standards in data collection have been used across time to facilitate time-series analyses when multiple years of the data are licensed. 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 (survey responses) in multiple formats (see *Technical Notes*).
- File layout in soft format and as part of this Documentation book.
- Documentation book with technical notes, file layout, survey questionnaire, and more.

Some items on the questionnaire, such as revenue are deemed confidential at the hospital-specific level and are not included in the Database. Many of these data are summarized at the national and state levels in *AHA Hospital Statistics*™.

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

Changes for Fiscal Year 2016

The following fields are new for the Fiscal Year 2016 Database:

Field label	Short Description
VWRKHOS	Workplace violence prevention program - hospital.
VWRKSYS	Workplace violence prevention program – system.
VWRKVEN	Workplace violence prevention program – joint venture.
VCMMHOS	Community violence prevention program – hospital.
VCCMSYS	Community violence prevention program – system.
VCMMVEN	Community violence prevention program – joint venture.
ACO	Hospital or system has established an Accountable Care Organization.
AMCDCD	Medicaid ACO patient population participants.
AMCDCR	Medicare ACO patient population participants.
APOINS	Privately insured ACO patient population participants.
APOHO	Other ACO patient population participants.
ACOPO	Other ACO patient population participant description.
PHREXA	Pharmacy expense.
FTRNLT	Total full-time nursing home unit/facility registered nurses.
PTRNLT	Total part-time nursing home unit/facility registered nurses.
ADJPDH	Adjusted patient days – hospital unit.
ADJADCH	Adjusted average daily census – hospital unit.
FTERNH	Full-time equivalent registered nurses – hospital unit.

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

Technical User Notes

The Annual Survey Database Fiscal Year 2016 is provided in ASCII, comma delimited, and Microsoft® Access formats for use in a statistical application or other applications.

The Database files are organized as follows:

/ACCESS

AS2016.accdb	MS Access Database

/COMMA

AS16dem.xlsx	MS Excel file - demographic
AS16svc1.xlsx	MS Excel file – service 1 of 3
AS16svc2.xlsx	MS Excel file – service 2 of 3
AS16svc3.xlsx	MS Excel file – service 3 of 3
AS16util1.xlsx	MS Excel file – utilization 1 of 2
AS16util2.xlsx	MS Excel file – utilization 2 of 2
AS2016FULLFILE.xlsx	MS Excel full file
ASPUB16.csv	Comma delimited file
ASPUB16DCTfile.dct	Dictionary file

/DOCUMENTATION

AS2016lay.xls	File layout
AS2016desc.xls	Data description file
SASLAYOUT2016.txt	SAS layout

/FLAT

PUBAS16.asc	The flat ascii fixed-length file

/NPI

NPI2016.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

PUBAS16.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.

ASPUBAS16.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.

AS2016.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:
AS16DEM — contains the demographic and descriptive fields for each facility
AS16SVC1 — contains facilities and services fields
AS16SVC2— contains facilities and services fields
AS16SVC3— contains facilities and services fields
AS16UTIL1— contains utilization, personnel and the financial fields
AS16UTIL2— 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:

AS2016Description.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.

AS2016Layout.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 2016.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?

AHA sends the Annual Survey to all hospitals identified as open and operating as a hospital. Both AHA member and non-member hospitals receive the Survey. The Annual Survey 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?

We achieve a response rate at or near 80%, despite the Survey being voluntary. 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.
- Many utilization and staffing values, such as admissions, have 'estimation flags' to signal whether a value was reported or estimated.

See the File Layout for a complete list of "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, and the File Layout for the **CBSATYPE** field.*

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

Unit hospitals (also referred to as 'subsidiary hospitals') are not included within the hospital Database. **There is a separate cross-reference file**, **FUNIT_ID.xls, delivered with the Database** to identify units and their affiliated parent hospital. Learn more about 'Unit' hospitals in the 'Technical User Notes'.

7. Are Health Care Systems included in the Database?

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.

Where applicable the affiliated health care system is identified as part of the hospital record. They system fields available include,
- System ID
- System name
- System address
- System city
- System state
- System zip code
- System telephone
- System primary contact/title.

See the file layout for SYSNAME.

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 expresses 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 2016 Database?

Each AHA Annual Survey Database represents the population of hospitals recognized by American Hospital Association as open and operating in a specific fiscal year. The *Summary of Changes* identifies the AHA IDs added or removed from the Fiscal Year 2016 Database, and the reason for the change.

11. Why do some hospitals have a 'Days covered' value of zero (0)?

Non-responding hospitals are assigned a 'days covered' value of zero.

12. What fields must be present for a hospital to be considered a respondent?

- Reporting period
- Control
- Primary service
- Facilities and services
- Staffed beds
- Admissions
- Inpatient days

13.   What is the difference between licensed beds and staffed beds?

Licensed beds are the number of beds authorized by a state licensing (certifying) agency.

Staffed beds are the number of beds regularly available (those set-up and staffed) at the end of the reporting period.

14.   What is a community hospital and how can I find it in the Database?

Community hospitals are non-federal, short-term, general, and other specialty hospitals. See the file layout for 'CHC'.

15.   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 our surveys, contact us at ahadatainfo@aha.org.

AHA Hospital Listing Requirements

An institution is considered a hospital by the American Hospital Association if it is licensed as general or specialty hospital by the appropriate state agency, and accredited as a hospital by one of the following organizations: The Joint Commission; Healthcare Facilities Accreditation Program (HFAP); DNV Healthcare; Center for Improvement in Healthcare Quality; or Medicare certified as a provider of acute service under Title 18 of the Social Security Act.

TYPES OF HOSPITALS

Hospitals are listed as one of four types of hospitals: general, special, rehabilitation and chronic disease, or psychiatric. The following definitions of function by type of hospital and special requirements are:

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 service with facilities and staff for a variety of procedures and with anatomical pathology services regularly and conveniently available,
- operating room service with facilities and staff

Special

The primary function of the institution 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 listing of an institution.

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* 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 2016 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**		

	Database Description Document	
	FY 2016 Edition	
C.1.	General medical and surgical care (adult), and # beds	
C.2.	General medical and surgical care (pediatric), and # beds	
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	
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	
C.34.	Case management	
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	

	Database Description Document	
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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.	Violence preventioni programs	
C.98.a.	For the workplace	
C.98.b.	For the community	
C.99.	Virtual colonoscopy	
C.100.	Volunteer services department	
C.101.	Women's health center/services	
C.102.	Wound management services	
Type of physician arrangement is asked for the **hospital**, the **health system**, and the **health network**		
C.103.a.	Independent practice association	Number of physicians
C.103.b.	Group practice without walls	Number of physicians
C.103.c.	Open physician-hospital organization (PHO)	Number of physicians
C.103.d.	Closed physician-hospital organization (PHO)	Number of physicians
C.103.e.	Management service organization (MSO)	Number of physicians
C.103.f.	Integrated salary model	Number of physicians
C.103.g.	Equity model	Number of physicians
C.103.h.	Foundation	Number of physicians
C.103.i.	Other, please specify	Number of physicians

	Database Description Document	
	FY 2016 Edition	
C.104.	Looking across all the relationships identified in question 103, 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.105.a.	Does your hospital participate in any joint venture arrangements with physicians or physician groups?	1=yes, 0=no
C.105.b.1.	Limited service hospital	1=yes, 0=no
C.105.b.2.	Ambulatory surgical centers	1=yes, 0=no
C.105.b.3.	Imaging centers	1=yes, 0=no
C.105.b.4.	Other	1=yes, 0=no
C.105.b.4.	Other (description text)	literal value
C.105.c.	If you selected 'a. Limited Service Hospital', please tell us what type(s) of services are provided	
C.105.c.1.	Cardiac	1=yes, 0=no
C.105.c.2.	Orthopedic	1=yes, 0=no
C.105.c.3.	Surgical	1=yes, 0=no
C.105.c.4.	Other	1=yes, 0=no
C.105.c.4.	Other (description text)	
C.105.d.	Does you hospital participate in joint venture arrangements with organizations other than physician groups	1=yes, 0=no
C.106.a.	Has your hospital or health care system established an accountable care organization (ACO)?	1=yes, 0=no
C.106.b.	If yes, please indicate the patient population that participates in the ACO (Check all that apply)	
C.106.b.1.	Medicaid	
C.106.b.2.	Medicare	
C.106.b.3.	Privately insured	
C.106.b.4.	Other	
C.106.b.4.	Please specify	
C.107.	Does your hospital have an established medical home program?	1=yes, 0=no
C.108.	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 109 is asked for the **hospital**, the **health system**, the **network**, and **joint venture with insurer**		

C.109.	Does your hospital have equity interest in any of following insurance products?	1=yes, 0=no
C.109.a.	Health Maintenance Organization	
c.109.b.	Preferred Provider Organization	
c.109.c.	Indemnity Fee for Service Plan	
C.110.	Does your hospital have formal written contract that specifies obligations of each party with:	1=yes, 0=no
C.110.a.	HMO	1=yes, 0=no
C.110.b.	If yes, how many contracts	
C.110.c.	PPO	1=yes, 0=no
C.110.d.	If yes, how many contracts	
C.111.	What percentage of net patient revenue is paid on capitated basis?	0=does not participate
C.112.	What percentage of net patient revenue is paid on shared risk basis?	
C.113.	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.114.	If hospital arranges to care for specified group of enrollees in exchange for capitated payment, how many lives are covered?	
C.115.	[2]Does your hospital have contracts with commercial payers where payment is tied to performance on quality/safety metrics?	1 = yes, 0 = no
C.116.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.116.b.	[2]If yes please indicate the response rate for the most recent survey [%].	
C.116.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	

	Database Description Document	
	FY 2016 Edition	
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	
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	

Database Description Document		
FY 2016 Edition		
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.	Pharmacy expense	
D.3.k.	Supply expense	
D.3.l.	All other expenses	
D.3.m.	Total facility total expenses	

D.3.m.	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
*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	

	Database Description Document	
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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	
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	

	Database Description Document	
	FY 2016 Edition	
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 RN FTEs 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
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
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	

	Database Description Document	
	FY 2016 Edition	
	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
	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
	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	

File Layout and Code Descriptions
FY 2016

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
1	ID	NA	7	1	7	AHA Identification Number		as16dem	
	REG	NA	1	2	2	AHA Region Code		as16dem	
	STCD	NA	2	2	3	AHA State Code		as16dem	See Appendix C - Census Divisions and State Codes
	HOSPN	NA	4	4	7	AHA Hospital Number		as16dem	
2	DTBEG	N	10	8	17	Beginning of reporting period	A.1.	as16dem	MM/DD/YYYY
	DBEGM	N	2	8	9	Reporting Period Beginning Month		as16dem	
	DBEGD	N	2	11	12	Reporting Period Beginning Day		as16dem	
	DBEGY	N	4	14	17	Reporting Period Beginning Year		as16dem	
3	DTEND	N	10	18	27	End of reporting period	A.1.	as16dem	MM/DD/YYYY
	DENDM	N	2	18	19	Reporting Period End Month		as16dem	
	DENDD	N	2	21	22	Reporting Period End Day		as16dem	
	DENDY	N	4	24	27	Reporting Period End Year		as16dem	
4	DCOV	NA	3	28	30	Days open during reporting period	A.2.b.	as16dem	0 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.	as16dem	1=yes, 2=less than a full year
6	FISYR	N	10	32	41	Beginning date of fiscal year	A.3.	as16dem	MM/DD/YYYY
	FISM	N	2	32	33	Fiscal Year Beginning Month		as16dem	
	FISD	N	2	35	36	Fiscal Year Beginning Day		as16dem	
	FISY	N	4	38	41	Fiscal Year Beginning Year		as16dem	
7	CNTRL	NA	2	42	43	Control Code – type of authority responsible for establishing policy concerning overall operation of the hospital	B.1.	as16dem	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.	as16dem	See Appendix B - Primary Service Code Descriptions
9	SERVOTH	N	100	46	145	Special service description		as16dem	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.	as16dem	1=yes, 0=no
11	HSACODE	NA	5	147	151	Health Service Area Code - Dartmouth		as16dem	
12	HSANAME	NA	30	152	181	Health Service Area Name - Dartmouth		as16dem	
13	HRRCODE	NA	3	182	184	Health Referral Region Code - Dartmouth		as16dem	
14	HRRNAME	NA	30	185	214	Health Referral Region Name - Dartmouth		as16dem	
15	MTYPE	NA	2	215	216	Hospital type code		as16dem	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		as16dem	1=short-term, 2=long-term, Source: AHA Membership
17	MNAME	NA	100	218	317	Hospital name		as16dem	Source: AHA Membership
18	MADMIN	NA	160	318	477	Name of chief administrator		as16dem	Source: AHA Membership
19	MLOCADDR	NA	60	478	537	Street address		as16dem	Source: AHA Membership
20	MLOCCITY	NA	30	538	567	City		as16dem	Source: AHA Membership
21	MLOCSTCD	NA	2	568	569	State Code		as16dem	See Appendix C - Census Divisions and State Codes
22	MLOCZIP	NA	10	570	579	ZIP code		as16dem	Source: AHA Membership
23	MSTATE	NA	2	580	581	Hospital, 2-letter state abbreviation		as16dem	Source: AHA Membership
24	AREA	NA	3	582	584	Area code		as16dem	Source: AHA Membership
25	TELNO	NA	7	585	591	Local telephone number		as16dem	Source: AHA Membership
26	RESP	NA	1	592	592	Response code		as16dem	1=yes, 2=no
27	CHC	NA	1	593	593	Community hospital code (as defined by AHA membership)		as16dem	1=community hospital, 2=not a community hospital
28	BSC	NA	1	594	594	Bed size code		as16dem	See Appendix D - Bed Size Codes
29	MHSMEMB	N	1	595	595	System member		as16dem	If SYSID is not blank then MHSMEMB = 1
30	SUBS	N	1	596	596	Does the hospital itself operate subsidiary corporations?	B.3.b.	as16dem	1=yes, 0=no
31	MNGT	N	1	597	597	Is the hospital contract managed?	B.3.c.	as16dem	1=yes, 0=no
32	MNGTNAME	NA	100	598	697	Management organization name	B.3.c.	as16dem	
33	MNGTCITY	NA	30	698	727	Management organization city	B.3.c.	as16dem	
34	MNGTSTCD	NA	2	728	729	Management organization state abbreviation	B.3.c.	as16dem	
35	NETWRK	N	1	730	730	Is the hospital a participant in a network?	B.3.d.	as16dem	1=yes, 0=no
36	NETNAME	NA	100	731	830	Network name	B.3.d.	as16dem	
37	NETCT	NA	30	831	860	Network city	B.3.d.	as16dem	
38	NETSC	NA	2	861	862	Network state	B.3.d.	as16dem	
39	NETPHONE	NA	10	863	872	Network, concatenated phone	B.3.d.	as16dem	
40	GROUP	N	1	873	873	Does the hospital participate in a group purchasing agreement?	E.2.	as16dem	1=yes, 0=no
41	GPONAME	N	100	874	973	Group purchasing organization name	E.2.	as16dem	
42	GPOCITY	N	30	974	1003	Group purchasing organization city	E.2.	as16dem	
43	GPOST	N	2	1004	1005	Group purchasing organization state	E.2.	as16dem	
44	SUPLY	N	1	1006	1006	Supplies purchased directly through distributor	E.3.	as16dem	1=yes, 0=no
45	SUPNM	N	100	1007	1106	Distributor's name	E.3.	as16dem	Literal Description
46	PHYGP	N	1	1107	1107	Is hospital owned in whole or in part by physicians or a physician group?	B.3.e.	as16dem	1=yes, 0=no
47	LTCHF	N	1	1108	1108	Freestanding LTCH	B.3.f.	as16dem	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
48	LTCHC	N	1	1109	1109	LTCH arranged within a general acute care hospital	B.3.f.	as16dem	1=yes, 0=no
49	LTNM	N	100	1110	1209	If arranged in a general acute care hospital, what is host hospital's name?	B.3.f.	as16dem	Literal Description
50	LTCT	N	30	1210	1239	Host hospital's city	B.3.f.	as16dem	
51	LTST	N	2	1240	1241	Host hospital's state	B.3.f.	as16dem	
52	NPINUM	N	10	1242	1251	10 Digit NPI number		as16dem	
53	CLUSTER	NA	1	1252	1252	AHA System Cluster Code		as16dem	See Appendix G - Cluster Codes
54	SYSID	NA	4	1253	1256	Health care system ID		as16dem	AHA Health Care System Identifier unique values (last four digits)
55	SYSNAME	NA	100	1257	1356	System name		as16dem	Source: AHA Membership
56	SYSADDR	NA	60	1357	1416	System address		as16dem	Source: AHA Membership
57	SYSCITY	NA	30	1417	1446	System city		as16dem	Source: AHA Membership
58	SYSST	NA	2	1447	1448	System state		as16dem	Source: AHA Membership
59	SYSZIP	NA	10	1449	1458	System ZIP code		as16dem	Source: AHA Membership
60	SYSAREA	NA	3	1459	1461	System area code		as16dem	Source: AHA Membership
61	SYSTELN	NA	8	1462	1469	System telephone number		as16dem	Source: AHA Membership
62	SYSTEM_PRIMARY_CONTACT		30	1470	1499	System primary contact		as16dem	Source: AHA Membership
63	SYSTITLE	NA	100	1500	1599	System contact's title		as16dem	Source: AHA Membership
64	COMMTY	NA	1	1600	1600	Community Hospital flag - to foot to *AHA Hospital Statistics™*		as16dem	Y=community hospital as defined in *AHA Hospital Statistics™*, N=not a community hospital
65	MCRNUM	NA	6	1601	1606	Medicare Provider ID		as16dem	Sources: Centers for Medicare and Medicaid and AHA Membership
66	LAT	NA	10	1607	1616	Hospital, Latitude		as16dem	Source: Federal Emergency Management Agency
67	LONG	NA	10	1617	1626	Hospital, Longitude		as16dem	Source: Federal Emergency Management Agency
68	CNTYNAME	NA	60	1627	1686	County Name, State Abbreviation		as16dem	
69	CBSANAME	NA	60	1687	1746	Core-Based Statistical Area Name, State Abbreviation		as16dem	Source: U.S. Census Bureau
70	CBSATYPE	NA	8	1747	1754	Core-Based Statistical Area Type		as16dem	Metro, Micro, Rural; Source: U.S. Census Bureau (*see 'Census Division Name'* for Census Bureau Division names*)*
71	CBSACODE	NA	5	1755	1759	Core-Based Statistical Area Code		as16dem	Source: U.S. Census Bureau (*see 'Census Division Code'* for Census Bureau Division codes)
72	DIVNAME	NA	60	1760	1819	Metropolitan Division name		as16dem	Source: U.S. Census Bureau
73	DIVCODE	NA	5	1820	1824	Metropolitan Division code		as16dem	Source: U.S. Census Bureau
74	CSANAME	NA	60	1825	1884	Combined Statistical Area name		as16dem	Source: U.S. Census Bureau
75	CSACODE	NA	3	1885	1887	Combined Statistical Area code		as16dem	Source: U.S. Census Bureau

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
76	MCNTYCD	NA	3	1888	1890	Modified FIPS County Code		as16dem	AHA derived code
77	FCOUNTY	NA	5	1891	1895	FIPS State and County Code		as16dem	Source: U.S. Census Bureau
78	FSTCD	NA	2	1896	1897	FIPS State code		as16dem	Source: U.S. Census Bureau
79	FCNTYCD	NA	3	1898	1900	FIPS County code		as16dem	Source: U.S. Census Bureau
80	CITYRK	NA	3	1901	1903	Ranking of 100 largest cities		as16dem	See Appendix F - City Rank Code
81	MAPP1	NA	1	1904	1904	Accreditation by The Joint Commission		as16dem	1=yes, 2=no; Source: The Joint Commission
82	MAPP2	NA	1	1905	1905	Cancer program approved by American College of Surgeons		as16dem	1=yes, 2=no; Source: American College of Surgeons, Commission on Cancer
83	MAPP3	NA	1	1906	1906	Participating site recognized for one or more Accreditation Council for Graduate Medical Education accredited programs		as16dem	1=yes, 2=no; Source: Accreditation Council of Graduate Medical Education (ACGME)
84	MAPP5	NA	1	1907	1907	Medical school affiliation reported to American Medical Association		as16dem	1=yes, 2=no; Source: American Medical Association
85	MAPP7	NA	1	1908	1908	Accreditation by Commission on Accreditation of Rehabilitation Facilities (CARF)		as16dem	1=yes, 2=no; Source: Commission on Accreditation of Rehabilitation Facilities
86	MAPP8	NA	1	1909	1909	Member of Council of Teaching Hospital of the Association of American Medical Colleges (COTH)		as16dem	1=yes, 2=no; Source: Association of American Medical Colleges
87	MAPP10	NA	1	1910	1910	Medicare certification by the U.S. Department of Health and Human Services		as16dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
88	MAPP11	NA	1	1911	1911	Accreditation by Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Association.		as16dem	1=yes, 2=no; Source: Healthcare Facilities Accreditation Program
89	MAPP12	NA	1	1912	1912	Internship approved by American Osteopathic Association		as16dem	1=yes, 2=no; Source: American Osteopathic Association
90	MAPP13	NA	1	1913	1913	Residency approved by American Osteopathic Association		as16dem	1=yes, 2=no; Source: American Osteopathic Association
91	MAPP16	NA	1	1914	1914	Catholic church operated		as16dem	1=yes, 2=no
92	MAPP18	NA	1	1915	1915	Critical Access Hospital		as16dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
93	MAPP19	NA	1	1916	1916	Rural Referral Center		as16dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
94	MAPP20	NA	1	1917	1917	Sole Community Provider		as16dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
95	MAPP21	NA	1	1918	1918	DNV Healthcare Accreditation		as16dem	1=yes, 2=no; Source: DNV Healthcare
96	MAPP22	NA	1	1919	1919	Center for Improvement in Healthcare Quality accreditation		as16dem	1=yes, 2=no; Source: Center for Improvement in Healthcare Quality
97	AHAMBR	NA	1	1920	1920	AHA Membership Flag		as16dem	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
98	SNT	N	1	1921	1921	Does your hospital provide services through one or more satellite facilities?	E.1.	as16dem	1=yes, 0=no
99	SUNITS	N	1	1922	1922	Does the hospital maintain a separate nursing home type of long-term care unit?		as16dem	1=yes, 0=no
100	IPAHOS	N	1	1923	1923	Independent practice association - hospital	C.103.a.	as16dem	1=yes, 0=no
101	IPASYS	N	1	1924	1924	Independent practice association - health system	C.103.a.	as16dem	1=yes, 0=no
102	IPANET	N	1	1925	1925	Independent practice association - network	C.103.a.	as16dem	1=yes, 0=no
103	GPWWHOS	N	1	1926	1926	Group practice without walls - hospital	C.103.b.	as16dem	1=yes, 0=no
104	GPWWSYS	N	1	1927	1927	Group practice without walls - health system	C.103.b.	as16dem	1=yes, 0=no
105	GPWWNET	N	1	1928	1928	Group practice without walls - network	C.103.b.	as16dem	1=yes, 0=no
106	OPHOHOS	N	1	1929	1929	Open physician-hospital organization - hospital	C.103.c.	as16dem	1=yes, 0=no
107	OPHOSYS	N	1	1930	1930	Open physician-hospital organization - health system	C.103.c.	as16dem	1=yes, 0=no
108	OPHONET	N	1	1931	1931	Open physician-hospital organization - network	C.103.c.	as16dem	1=yes, 0=no
109	CPHOHOS	N	1	1932	1932	Closed physician-hospital organization - hospital	C.103.d.	as16dem	1=yes, 0=no
110	CPHOSYS	N	1	1933	1933	Closed physician-hospital organization - health system	C.103.d.	as16dem	1=yes, 0=no
111	CPHONET	N	1	1934	1934	Closed physician-hospital organization - network	C.103.d.	as16dem	1=yes, 0=no
112	MSOHOS	N	1	1935	1935	Management service organization - hospital	C.103.e.	as16dem	1=yes, 0=no
113	MSOSYS	N	1	1936	1936	Management service organization - health system	C.103.e.	as16dem	1=yes, 0=no
114	MSONET	N	1	1937	1937	Management service organization - network	C.103.e.	as16dem	1=yes, 0=no
115	ISMHOS	N	1	1938	1938	Integrated salary model - hospital	C.103.f.	as16dem	1=yes, 0=no
116	ISMSYS	N	1	1939	1939	Integrated salary model - health system	C.103.f.	as16dem	1=yes, 0=no
117	ISMNET	N	1	1940	1940	Integrated salary model - network	C.103.f.	as16dem	1=yes, 0=no
118	EQMODHOS	N	1	1941	1941	Equity model - hospital	C.103.g.	as16dem	1=yes, 0=no
119	EQMODSYS	N	1	1942	1942	Equity model - health system	C.103.g.	as16dem	1=yes, 0=no
120	EQMODNET	N	1	1943	1943	Equity model - network	C.103.g.	as16dem	1=yes, 0=no
121	FOUNDHOS	N	1	1944	1944	Foundation - hospital	C.103.h.	as16dem	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
122	FOUNDSYS	N	1	1945	1945	Foundation - health system	C.103.h.	as16dem	1=yes, 0=no
123	FOUNDNET	N	1	1946	1946	Foundation - network	C.103.h.	as16dem	1=yes, 0=no
124	PHYOTH	N	100	1947	2046	Other, please specify	C.103.i.	as16dem	Literal Description
125	PHYHOS	N	1	2047	2047	Other - hospital	C.103.i.	as16dem	1=yes, 0=no
126	PHYSYS	N	1	2048	2048	Other - health system	C.103.i.	as16dem	1=yes, 0=no
127	PHYNET	N	1	2049	2049	Other - network	C.103.i.	as16dem	1=yes, 0=no
128	IPHMOHOS	N	1	2050	2050	Health maintenance organization (HMO) - hospital	C.109.a.	as16dem	1=yes, 0=no
129	IPHMOSYS	N	1	2051	2051	Health maintenance organization (HMO) - health system	C.109.a.	as16dem	1=yes, 0=no
130	IPHMONET	N	1	2052	2052	Health maintenance organization (HMO) - network	C.109.a.	as16dem	1=yes, 0=no
131	IPHMOVEN	N	1	2053	2053	Health maintenance organization (HMO) - joint venture	C.109.a.	as16dem	1=yes, 0=no
132	IPPPOHOS	N	1	2054	2054	Preferred provider organization (PPO) - hospital	C.109.b.	as16dem	1=yes, 0=no
133	IPPPOSYS	N	1	2055	2055	Preferred provider organization (PPO) - health system	C.109.b.	as16dem	1=yes, 0=no
134	IPPPONET	N	1	2056	2056	Preferred provider organization (PPO) - network	C.109.b.	as16dem	1=yes, 0=no
135	IPPPOVEN	N	1	2057	2057	Preferred provider organization (PPO) - joint venture	C.109.b.	as16dem	1=yes, 0=no
136	IPFEEHOS	N	1	2058	2058	Indemnity fee for service plan - hospital	C.109.c.	as16dem	1=yes, 0=no
137	IPFEESYS	N	1	2059	2059	Indemnity fee for service plan - health system	C.109.c.	as16dem	1=yes, 0=no
138	IPFEENET	N	1	2060	2060	Indemnity fee for service plan - network	C.109.c.	as16dem	1=yes, 0=no
139	IPFEEVEN	N	1	2061	2061	Indemnity fee for service plan - joint venture	C.109.c.	as16dem	1=yes, 0=no
140	HMO86	N	1	2062	2062	Does the hospital have a formal written contract with an HMO?	C.110.a.	as16dem	1=yes, 0=no
141	HMOCON	N	4	2063	2066	Number of HMO contracts	C.110.b.	as16dem	
142	PPO86	N	1	2067	2067	Does the hospital have a formal written contract with a PPO?	C.110.c.	as16dem	1=yes, 0=no
143	PPOCON	N	4	2068	2071	Number of PPO contracts	C.110.d.	as16dem	
144	CAPCON94	N	1	2072	2072	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.	as16dem	1=yes, 0=no
145	CAPCOV	N	8	2073	2080	Number of lives covered on a capitated basis	C.112.	as16dem	

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
146	IPAP	N	8	2081	2088	Number of physicians, Independent Practice Association	C.103.a.	as16dem	
147	GPWP	N	8	2089	2096	Number of physicians, Group Practice without walls	C.103.b.	as16dem	
148	OPHP	N	8	2097	2104	Number of physicians, Open Physician-Hospital Organization (PHO)	C.103.c.	as16dem	
149	CPHP	N	8	2105	2112	Number of physicians, Closed Physician-Hospital Organization (PHO)	C.103.d.	as16dem	
150	MSOP	N	8	2113	2120	Number of physicians, Management Service Organization (MSO)	C.103.e.	as16dem	
151	ISMP	N	8	2121	2128	Number of physicians, Integrated Salary Model	C.103.f.	as16dem	
152	EQMP	N	8	2129	2136	Number of physicians, Equity Model	C.103.g.	as16dem	
153	FNDP	N	8	2137	2144	Number of physicians, Foundation	C.103.h.	as16dem	
154	PHYP	N	8	2145	2152	Number of physicians, Other	C.103.i.	as16dem	
155	FTMT	N	8	2153	2160	Total physicians engaged in arrangement with hospital	C.104.	as16dem	Number of physicians
156	JNTPH	N	1	2161	2161	Does your hospital participate in any joint venture arrangements with physicians or physician groups?	C.105.a.	as16dem	1=yes, 0=no
157	JNLS	N	1	2162	2162	Limited Service Hospital	C.105.b.a.	as16dem	1=yes, 0=no
158	JNTAMB	N	1	2163	2163	Ambulatory Surgical Centers	C.105.b.b.	as16dem	1=yes, 0=no
159	JNTCTR	N	1	2164	2164	Imaging Centers	C.105.b.c.	as16dem	1=yes, 0=no
160	JNTOTH	N	1	2165	2165	Other	C.105.b.d.	as16dem	1=yes, 0=no
161	LSHTXT	N	100	2166	2265	Joint other description	C.105.b.d. other	as16dem	Literal Description
162	JNTLSC	N	1	2266	2266	Cardiac - Limited Service Hospital	C.105.c.a.	as16dem	1=yes, 0=no
163	JNTLSO	N	1	2267	2267	Orthopedic - Limited Service Hospital	C.105.c.b.	as16dem	1=yes, 0=no
164	JNTLSS	N	1	2268	2268	Surgical - Limited Service Hospital	C.105.c.c.	as16dem	1=yes, 0=no
165	JNTLST	N	1	2269	2269	Other - Limited Service Hospital	C.105.c.d.	as16dem	1=yes, 0=no
166	JNTTXT	N	100	2270	2369	Limited Service Hospital other description	C.105.c.d other	as16dem	Literal Description
167	JNTMD	N	1	2370	2370	Does hospital participate in joint venture arrangements with organizations other than physician groups?	C.105.d.	as16dem	1=yes, 0=no
168	ACO	N	1	2371	2371	Has your hospital or health care system established an accountable care organization (ACO)?	C.106.a.	as16dem	1=yes, 0=no
169	AMCDCD	N	1	2372	2372	ACO patient population - Medicaid	C.106.b.1.	as16dem	1=yes, 0=no
170	AMCDCR	N	1	2373	2373	ACO patient population - Medicare	C.106.b.2.	as16dem	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
171	APOINS	N	1	2374	2374	ACO patient population - Privately insured	C.106.b.3.	as16dem	1=yes, 0=no
172	APOHO	N	1	2375	2375	ACO patient population - Other	C.106.b.4.	as16dem	1=yes, 0=no
173	ACOPO	N	100	2376	2475	ACO patient population - Other description	C.106.b.4.	as16dem	Literal Description
174	MEDHME	N	1	2476	2476	Does your hospital have an established medical home program?	C.107.	as16dem	1=yes, 0=no
175	BNDPAY	N	1	2477	2477	Does your hospital participate in a bundled payment program?	C.108.	as16dem	1=yes, 0=no
176	EHLTH	N	1	2478	2478	Does your hospital have an electronic health record?	D.9.e.	as16dem	0=No; 1=Yes, partially implemented; 2=Yes, fully implemented
177	GENBD	N	4	2479	2482	General medical and surgical (adult) beds	C.1.	as16svc1	
178	PEDBD	N	4	2483	2486	General medical and surgical (pediatric) beds	C.2.	as16svc1	
179	OBLEV	N	1	2487	2487	Obstetric unit care level	C.3.	as16svc1	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
180	OBBD	N	4	2488	2491	Obstetric care beds	C.3.	as16svc1	
181	MSICBD	N	4	2492	2495	Medical/surgical intensive care beds	C.4.	as16svc1	
182	CICBD	N	4	2496	2499	Cardiac intensive care beds	C.5.	as16svc1	
183	NICBD	N	4	2500	2503	Neonatal intensive care beds	C.6.	as16svc1	
184	NINTBD	N	4	2504	2507	Neonatal intermediate care beds	C.7.	as16svc1	
185	PEDICBD	N	4	2508	2511	Pediatric intensive care beds	C.8.	as16svc1	
186	BRNBD	N	4	2512	2515	Burn care beds	C.9.	as16svc1	
187	SPCICBD	N	4	2516	2519	Other special care beds	C.10.	as16svc1	
188	OSPOTH	N	100	2520	2619	Other special care beds, description	C.10.	as16svc1	Literal Description
189	OTHICBD	N	4	2620	2623	Other intensive care beds	C.11.	as16svc1	
190	OTHIC	N	100	2624	2723	Other intensive care beds, description	C.11.	as16svc1	Literal Description
191	REHABBD	N	4	2724	2727	Physical rehabilitation care beds	C.12.	as16svc1	
192	ALCHBD	N	4	2728	2731	Alcohol/drug abuse or dependency inpatient care beds	C.13.	as16svc1	
193	PSYBD	N	4	2732	2735	Psychiatric care beds	C.14.	as16svc1	
194	SNBD88	N	4	2736	2739	Skilled nursing care beds	C.15.	as16svc1	
195	ICFBD88	N	4	2740	2743	Intermediate nursing care beds	C.16.	as16svc1	
196	ACULTBD	N	4	2744	2747	Acute long-term care beds	C.17.	as16svc1	
197	OTHLBD94	N	4	2748	2751	Other long-term care beds	C.18.	as16svc1	
198	OTHBD94	N	4	2752	2755	Other care beds	C.19.	as16svc1	
199	OTHOTH	N	100	2756	2855	Other care beds, description	C.19.	as16svc1	Literal Description

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
200	HOSPBD	N	4	2856	2859	Total hospital beds (calculated)		as16svc1	Calculated Field: Sum of all individual bed counts
201	GENHOS	N	1	2860	2860	General medical and surgical care (adult) - hospital	C.1.	as16svc1	1=yes, 0=no
202	GENSYS	N	1	2861	2861	General medical and surgical care (adult) - health system	C.1.	as16svc1	1=yes, 0=no
203	GENVEN	N	1	2862	2862	General medical and surgical care (adult) - joint venture	C.1.	as16svc1	1=yes, 0=no
204	PEDHOS	N	1	2863	2863	General medical and surgical care (pediatric) - hospital	C.2.	as16svc1	1=yes, 0=no
205	PEDSYS	N	1	2864	2864	General medical and surgical care (pediatric) - health system	C.2.	as16svc1	1=yes, 0=no
206	PEDVEN	N	1	2865	2865	General medical and surgical care (pediatric) - joint venture	C.2.	as16svc1	1=yes, 0=no
207	OBHOS	N	1	2866	2866	Obstetrics care - hospital	C.3.	as16svc1	1=yes, 0=no
208	OBSYS	N	1	2867	2867	Obstetrics care - health system	C.3.	as16svc1	1=yes, 0=no
209	OBVEN	N	1	2868	2868	Obstetrics care - joint venture	C.3.	as16svc1	1=yes, 0=no
210	MSICHOS	N	1	2869	2869	Medical/surgical intensive care - hospital	C.4.	as16svc1	1=yes, 0=no
211	MSICSYS	N	1	2870	2870	Medical/surgical intensive care - health system	C.4.	as16svc1	1=yes, 0=no
212	MSICVEN	N	1	2871	2871	Medical/surgical intensive care - joint venture	C.4.	as16svc1	1=yes, 0=no
213	CICHOS	N	1	2872	2872	Cardiac intensive care - hospital	C.5.	as16svc1	1=yes, 0=no
214	CICSYS	N	1	2873	2873	Cardiac intensive care - health system	C.5.	as16svc1	1=yes, 0=no
215	CICVEN	N	1	2874	2874	Cardiac intensive care - joint venture	C.5.	as16svc1	1=yes, 0=no
216	NICHOS	N	1	2875	2875	Neonatal intensive care - hospital	C.6.	as16svc1	1=yes, 0=no
217	NICSYS	N	1	2876	2876	Neonatal intensive care - health system	C.6.	as16svc1	1=yes, 0=no
218	NICVEN	N	1	2877	2877	Neonatal intensive care - joint venture	C.6.	as16svc1	1=yes, 0=no
219	NINTHOS	N	1	2878	2878	Neonatal intermediate care - hospital	C.7.	as16svc1	1=yes, 0=no
220	NINTSYS	N	1	2879	2879	Neonatal intermediate care - health system	C.7.	as16svc1	1=yes, 0=no
221	NINTVEN	N	1	2880	2880	Neonatal intermediate care - joint venture	C.7.	as16svc1	1=yes, 0=no
222	PEDICHOS	N	1	2881	2881	Pediatric intensive care - hospital	C.8.	as16svc1	1=yes, 0=no
223	PEDICSYS	N	1	2882	2882	Pediatric intensive care - health system	C.8.	as16svc1	1=yes, 0=no
224	PEDICVEN	N	1	2883	2883	Pediatric intensive care - joint venture	C.8.	as16svc1	1=yes, 0=no
225	BRNHOS	N	1	2884	2884	Burn care - hospital	C.9.	as16svc1	1=yes, 0=no
226	BRNSYS	N	1	2885	2885	Burn care - health system	C.9.	as16svc1	1=yes, 0=no
227	BRNVEN	N	1	2886	2886	Burn care - joint venture	C.9.	as16svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
228	SPCICHOS	N	1	2887	2887	Other special care - hospital	C.10.	as16svc1	1=yes, 0=no
229	SPCICSYS	N	1	2888	2888	Other special care - health system	C.10.	as16svc1	1=yes, 0=no
230	SPCICVEN	N	1	2889	2889	Other special care - joint venture	C.10.	as16svc1	1=yes, 0=no
231	OTHIHOS	N	1	2890	2890	Other intensive care - hospital	C.11.	as16svc1	1=yes, 0=no
232	OTHISYS	N	1	2891	2891	Other intensive care - health system	C.11.	as16svc1	1=yes, 0=no
233	OTHIVEN	N	1	2892	2892	Other intensive care - joint venture	C.11.	as16svc1	1=yes, 0=no
234	REHABHOS	N	1	2893	2893	Physical rehabilitation care - hospital	C.12.	as16svc1	1=yes, 0=no
235	REHABSYS	N	1	2894	2894	Physical rehabilitation care - health system	C.12.	as16svc1	1=yes, 0=no
236	REHABVEN	N	1	2895	2895	Physical rehabilitation care - joint venture	C.12.	as16svc1	1=yes, 0=no
237	ALCHHOS	N	1	2896	2896	Alcohol/drug abuse or dependency inpatient care - hospital	C.13.	as16svc1	1=yes, 0=no
238	ALCHSYS	N	1	2897	2897	Alcohol/drug abuse or dependency inpatient care - health system	C.13.	as16svc1	1=yes, 0=no
239	ALCHVEN	N	1	2898	2898	Alcohol/drug abuse or dependency inpatient care - joint venture	C.13.	as16svc1	1=yes, 0=no
240	PSYHOS	N	1	2899	2899	Psychiatric care - hospital	C.14.	as16svc1	1=yes, 0=no
241	PSYSYS	N	1	2900	2900	Psychiatric care - health system	C.14.	as16svc1	1=yes, 0=no
242	PSYVEN	N	1	2901	2901	Psychiatric care - joint venture	C.14.	as16svc1	1=yes, 0=no
243	SNHOS	N	1	2902	2902	Skilled nursing care - hospital	C.15.	as16svc1	1=yes, 0=no
244	SNSYS	N	1	2903	2903	Skilled nursing care - health system	C.15.	as16svc1	1=yes, 0=no
245	SNVEN	N	1	2904	2904	Skilled nursing care - joint venture	C.15.	as16svc1	1=yes, 0=no
246	ICFHOS	N	1	2905	2905	Intermediate nursing care - hospital	C.16.	as16svc1	1=yes, 0=no
247	ICFSYS	N	1	2906	2906	Intermediate nursing care - health system	C.16.	as16svc1	1=yes, 0=no
248	ICFVEN	N	1	2907	2907	Intermediate nursing care - joint venture	C.16.	as16svc1	1=yes, 0=no
249	ACUHOS	N	1	2908	2908	Acute long-term care - hospital	C.17.	as16svc1	1=yes, 0=no
250	ACUSYS	N	1	2909	2909	Acute long-term care - health system	C.17.	as16svc1	1=yes, 0=no
251	ACUVEN	N	1	2910	2910	Acute long-term care - joint venture	C.17.	as16svc1	1=yes, 0=no
252	OTHLTHOS	N	1	2911	2911	Other long-term care - hospital	C.18.	as16svc1	1=yes, 0=no
253	OTHLTSYS	N	1	2912	2912	Other long-term care - health system	C.18.	as16svc1	1=yes, 0=no
254	OTHLTVEN	N	1	2913	2913	Other long-term care - joint venture	C.18.	as16svc1	1=yes, 0=no
255	OTHCRHOS	N	1	2914	2914	Other care - hospital	C.19.	as16svc1	1=yes, 0=no
256	OTHCRSYS	N	1	2915	2915	Other care - health system	C.19.	as16svc1	1=yes, 0=no
257	OTHCRVEN	N	1	2916	2916	Other care - joint venture	C.19.	as16svc1	1=yes, 0=no
258	ADULTHOS	N	1	2917	2917	Adult day care program - hospital	C.20.	as16svc1	1=yes, 0=no
259	ADULTSYS	N	1	2918	2918	Adult day care program - health system	C.20.	as16svc1	1=yes, 0=no
260	ADULTVEN	N	1	2919	2919	Adult day care program - joint venture	C.20.	as16svc1	1=yes, 0=no
261	AIRBHOS	N	1	2920	2920	Airborne infection isolation room - hospital	C.21.	as16svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
262	AIRBSYS	N	1	2921	2921	Airborne infection isolation room - health system	C.21.	as16svc1	1=yes, 0=no
263	AIRBVEN	N	1	2922	2922	Airborne infection isolation room - joint venture	C.21.	as16svc1	1=yes, 0=no
264	AIRBROOM	N	4	2923	2926	Number of airborne infection isolation rooms	C.21.	as16svc1	Number of rooms
265	ALCOPHOS	N	1	2927	2927	Alcohol/drug abuse or dependency outpatient services - hospital	C.22.	as16svc1	1=yes, 0=no
266	ALCOPSYS	N	1	2928	2928	Alcohol/drug abuse or dependency outpatient services - health system	C.22.	as16svc1	1=yes, 0=no
267	ALCOPVEN	N	1	2929	2929	Alcohol/drug abuse or dependency outpatient services - joint venture	C.22.	as16svc1	1=yes, 0=no
268	ALZHOS	N	1	2930	2930	Alzheimer Center - hospital	C.23.	as16svc1	1=yes, 0=no
269	ALZSYS	N	1	2931	2931	Alzheimer Center - health system	C.23.	as16svc1	1=yes, 0=no
270	ALZVEN	N	1	2932	2932	Alzheimer Center - joint venture	C.23.	as16svc1	1=yes, 0=no
271	AMBHOS	N	1	2933	2933	Ambulance services - hospital	C.24.	as16svc1	1=yes, 0=no
272	AMBSYS	N	1	2934	2934	Ambulance services - health system	C.24.	as16svc1	1=yes, 0=no
273	AMBVEN	N	1	2935	2935	Ambulance services - joint venture	C.24.	as16svc1	1=yes, 0=no
274	AMBSHOS	N	1	2936	2936	Ambulatory surgery center - hospital	C.25.	as16svc1	1=yes, 0=no
275	AMBSSYS	N	1	2937	2937	Ambulatory surgery center - health system	C.25.	as16svc1	1=yes, 0=no
276	AMBSVEN	N	1	2938	2938	Ambulatory surgery center - joint venture	C.25.	as16svc1	1=yes, 0=no
277	ARTHCHOS	N	1	2939	2939	Arthritis treatment center - hospital	C.26.	as16svc1	1=yes, 0=no
278	ARTHCSYS	N	1	2940	2940	Arthritis treatment center - health system	C.26.	as16svc1	1=yes, 0=no
279	ARTHCVEN	N	1	2941	2941	Arthritis treatment center - joint venture	C.26.	as16svc1	1=yes, 0=no
280	ASSTLHOS	N	1	2942	2942	Assisted living services - hospital	C.27.	as16svc1	1=yes, 0=no
281	ASSTLSYS	N	1	2943	2943	Assisted living services - health system	C.27.	as16svc1	1=yes, 0=no
282	ASSTLVEN	N	1	2944	2944	Assisted living services - joint venture	C.27.	as16svc1	1=yes, 0=no
283	AUXHOS	N	1	2945	2945	Auxiliary - hospital	C.28.	as16svc1	1=yes, 0=no
284	AUXSYS	N	1	2946	2946	Auxiliary - health system	C.28.	as16svc1	1=yes, 0=no
285	AUXVEN	N	1	2947	2947	Auxiliary - joint venture	C.28.	as16svc1	1=yes, 0=no
286	BWHTHOS	N	1	2948	2948	Bariatric/weight control services - hospital	C.29.	as16svc1	1=yes, 0=no
287	BWHTSYS	N	1	2949	2949	Bariatric/weight control services - health system	C.29.	as16svc1	1=yes, 0=no
288	BWHTVEN	N	1	2950	2950	Bariatric/weight control services - joint venture	C.29.	as16svc1	1=yes, 0=no
289	BROOMHOS	N	1	2951	2951	Birthing room/LDR room/LDRP room - hospital	C.30.	as16svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
290	BROOMSYS	N	1	2952	2952	Birthing room/LDR room/LDRP room - health system	C.30.	as16svc1	1=yes, 0=no
291	BROOMVEN	N	1	2953	2953	Birthing room/LDR room/LDRP room - joint venture	C.30.	as16svc1	1=yes, 0=no
292	BLDOHOS	N	1	2954	2954	Blood Donor Center - hospital	C.31.	as16svc1	1=yes, 0=no
293	BLDOSYS	N	1	2955	2955	Blood Donor Center - health system	C.31.	as16svc1	1=yes, 0=no
294	BLDOVEN	N	1	2956	2956	Blood Donor Center - joint venture	C.31.	as16svc1	1=yes, 0=no
295	MAMMSHOS	N	1	2957	2957	Breast cancer screening/mammograms - hospital	C.32.	as16svc1	1=yes, 0=no
296	MAMMSSYS	N	1	2958	2958	Breast cancer screening/mammograms - health system	C.32.	as16svc1	1=yes, 0=no
297	MAMMSVEN	N	1	2959	2959	Breast cancer screening/mammograms - joint venture	C.32.	as16svc1	1=yes, 0=no
298	ACARDHOS	N	1	2960	2960	Adult cardiology services - hospital	C.33.a.	as16svc1	1=yes, 0=no
299	ACARDSYS	N	1	2961	2961	Adult cardiology services - health system	C.33.a.	as16svc1	1=yes, 0=no
300	ACARDVEN	N	1	2962	2962	Adult cardiology services - joint venture	C.33.a.	as16svc1	1=yes, 0=no
301	PCARDHOS	N	1	2963	2963	Pediatric cardiology services - hospital	C.33.b.	as16svc1	1=yes, 0=no
302	PCARDSYS	N	1	2964	2964	Pediatric cardiology services - health system	C.33.b.	as16svc1	1=yes, 0=no
303	PCARDVEN	N	1	2965	2965	Pediatric cardiology services - joint venture	C.33.b.	as16svc1	1=yes, 0=no
304	ACLABHOS	N	1	2966	2966	Adult diagnostic catheterization - hospital	C.33.c.	as16svc1	1=yes, 0=no
305	ACLABSYS	N	1	2967	2967	Adult diagnostic catheterization - health system	C.33.c.	as16svc1	1=yes, 0=no
306	ACLABVEN	N	1	2968	2968	Adult diagnostic catheterization - joint venture	C.33.c.	as16svc1	1=yes, 0=no
307	PCLABHOS	N	1	2969	2969	Pediatric diagnostic catheterization - hospital	C.33.d.	as16svc1	1=yes, 0=no
308	PCLABSYS	N	1	2970	2970	Pediatric diagnostic catheterization - health system	C.33.d.	as16svc1	1=yes, 0=no
309	PCLABVEN	N	1	2971	2971	Pediatric diagnostic catheterization - joint venture	C.33.d.	as16svc1	1=yes, 0=no
310	ICLABHOS	N	1	2972	2972	Adult interventional cardiac catheterization - hospital	C.33.e.	as16svc1	1=yes, 0=no
311	ICLABSYS	N	1	2973	2973	Adult interventional cardiac catheterization - health system	C.33.e.	as16svc1	1=yes, 0=no
312	ICLABVEN	N	1	2974	2974	Adult interventional cardiac catheterization - joint venture	C.33.e.	as16svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
313	PELABHOS	N	1	2975	2975	Pediatric interventional cardiac catheterization - hospital	C.33.f.	as16svc1	1=yes, 0=no
314	PELABSYS	N	1	2976	2976	Pediatric interventional cardiac catheterization - health system	C.33.f.	as16svc1	1=yes, 0=no
315	PELABVEN	N	1	2977	2977	Pediatric interventional cardiac catheterization - joint venture	C.33.f.	as16svc1	1=yes, 0=no
316	ADTCHOS	N	1	2978	2978	Adult cardiac surgery - hospital	C.33.g.	as16svc1	1=yes, 0=no
317	ADTCSYS	N	1	2979	2979	Adult cardiac surgery - health system	C.33.g.	as16svc1	1=yes, 0=no
318	ADTCVEN	N	1	2980	2980	Adult cardiac surgery - joint venture	C.33.g.	as16svc1	1=yes, 0=no
319	PEDCSHOS	N	1	2981	2981	Pediatric cardiac surgery - hospital	C.33.h.	as16svc1	1=yes, 0=no
320	PEDCSSYS	N	1	2982	2982	Pediatric cardiac surgery - health system	C.33.h.	as16svc1	1=yes, 0=no
321	PEDCSVEN	N	1	2983	2983	Pediatric cardiac surgery - joint venture	C.33.h.	as16svc1	1=yes, 0=no
322	ADTEHOS	N	1	2984	2984	Adult cardiac electrophysiology-hospital	C.33.i.	as16svc1	1=yes, 0=no
323	ADTESYS	N	1	2985	2985	Adult cardiac electrophysiology-health system	C.33.i.	as16svc1	1=yes, 0=no
324	ADTEVEN	N	1	2986	2986	Adult cardiac electrophysiology-joint venture	C.33.i.	as16svc1	1=yes, 0=no
325	PEDEHOS	N	1	2987	2987	Pediatric cardiac electrophysiology-hospital	C.33.j.	as16svc1	1=yes, 0=no
326	PEDESYS	N	1	2988	2988	Pediatric cardiac electrophysiology-health system	C.33.j.	as16svc1	1=yes, 0=no
327	PEDEVEN	N	1	2989	2989	Pediatric cardiac electrophysiology-joint venture	C.33.j.	as16svc1	1=yes, 0=no
328	CHABHOS	N	1	2990	2990	Cardiac Rehabilitation - hospital	C.33.k.	as16svc1	1=yes, 0=no
329	CHABSYS	N	1	2991	2991	Cardiac Rehabilitation - health system	C.33.k.	as16svc1	1=yes, 0=no
330	CHABVEN	N	1	2992	2992	Cardiac Rehabilitation - joint venture	C.33.k.	as16svc1	1=yes, 0=no
331	CMNGTHOS	N	1	2993	2993	Case Management - hospital	C.34.	as16svc1	1=yes, 0=no
332	CMNGTSYS	N	1	2994	2994	Case Management - health system	C.34.	as16svc1	1=yes, 0=no
333	CMNGTVEN	N	1	2995	2995	Case Management - joint venture	C.34.	as16svc1	1=yes, 0=no
334	CHAPHOS	N	1	2996	2996	Chaplaincy/pastoral care services - hospital	C.35.	as16svc1	1=yes, 0=no
335	CHAPSYS	N	1	2997	2997	Chaplaincy/pastoral care services - health system	C.35.	as16svc1	1=yes, 0=no
336	CHAPVEN	N	1	2998	2998	Chaplaincy/pastoral care services - joint venture	C.35.	as16svc1	1=yes, 0=no
337	CHTHHOS	N	1	2999	2999	Chemotherapy - hospital	C.36.	as16svc1	1=yes, 0=no
338	CHTHSYS	N	1	3000	3000	Chemotherapy - health system	C.36.	as16svc1	1=yes, 0=no
339	CHTHVEN	N	1	3001	3001	Chemotherapy - joint venture	C.36.	as16svc1	1=yes, 0=no
340	CWELLHOS	N	1	3002	3002	Children's wellness program - hospital	C.37.	as16svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
341	CWELLSYS	N	1	3003	3003	Children's wellness program - health system	C.37.	as16svc1	1=yes, 0=no
342	CWELLVEN	N	1	3004	3004	Children's wellness program - joint venture	C.37.	as16svc1	1=yes, 0=no
343	CHIHOS	N	1	3005	3005	Chiropractic services - hospital	C.38.	as16svc1	1=yes, 0=no
344	CHISYS	N	1	3006	3006	Chiropractic services - health system	C.38.	as16svc1	1=yes, 0=no
345	CHIVEN	N	1	3007	3007	Chiropractic services - joint venture	C.38.	as16svc1	1=yes, 0=no
346	COUTRHOS	N	1	3008	3008	Community outreach - hospital	C.39.	as16svc1	1=yes, 0=no
347	COUTRSYS	N	1	3009	3009	Community outreach - health system	C.39.	as16svc1	1=yes, 0=no
348	COUTRVEN	N	1	3010	3010	Community outreach - joint venture	C.39.	as16svc1	1=yes, 0=no
349	COMPHOS	N	1	3011	3011	Complementary and alternative medicine services - hospital	C.40.	as16svc1	1=yes, 0=no
350	COMPSYS	N	1	3012	3012	Complementary and alternative medicine services - health system	C.40.	as16svc1	1=yes, 0=no
351	COMPVEN	N	1	3013	3013	Complementary and alternative medicine services - joint venture	C.40.	as16svc1	1=yes, 0=no
352	CAOSHOS	N	1	3014	3014	Computer assisted orthopedic surgery - hospital	C.41.	as16svc1	1=yes, 0=no
353	CAOSSYS	N	1	3015	3015	Computer assisted orthopedic surgery - health system	C.41.	as16svc1	1=yes, 0=no
354	CAOSVEN	N	1	3016	3016	Computer assisted orthopedic surgery - joint venture	C.41.	as16svc1	1=yes, 0=no
355	CPREVHOS	N	1	3017	3017	Crisis prevention - hospital	C.42.	as16svc1	1=yes, 0=no
356	CPREVSYS	N	1	3018	3018	Crisis prevention - health system	C.42.	as16svc1	1=yes, 0=no
357	CPREVVEN	N	1	3019	3019	Crisis prevention - joint venture	C.42.	as16svc1	1=yes, 0=no
358	DENTSHOS	N	1	3020	3020	Dental services - hospital	C.43.	as16svc1	1=yes, 0=no
359	DENTSSYS	N	1	3021	3021	Dental services - health system	C.43.	as16svc1	1=yes, 0=no
360	DENTSVEN	N	1	3022	3022	Dental services - joint venture	C.43.	as16svc1	1=yes, 0=no
361	EMDEPHOS	N	1	3023	3023	Emergency department - hospital	C.44.a.	as16svc1	1=yes, 0=no
362	EMDEPSYS	N	1	3024	3024	Emergency department - health system	C.44.a.	as16svc1	1=yes, 0=no
363	EMDEPVEN	N	1	3025	3025	Emergency department - joint venture	C.44.a.	as16svc1	1=yes, 0=no
364	PEMERHOS	N	1	3026	3026	Pediatric emergency department - hospital	C.44.b.	as16svc1	1=yes, 0=no
365	PEMERSYS	N	1	3027	3027	Pediatric emergency department - health system	C.44.b.	as16svc1	1=yes, 0=no
366	PEMERVEN	N	1	3028	3028	Pediatric emergency department - joint venture	C.44.b.	as16svc1	1=yes, 0=no
367	FSERHOS	N	1	3029	3029	Freestanding/satellite emergency department - hospital	C.44.c.	as16svc1	1=yes, 0=no
368	FSERSYS	N	1	3030	3030	Freestanding/satellite emergency department - health system	C.44.c.	as16svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
369	FSERVEN	N	1	3031	3031	Freestanding/satellite emergency department - joint venture	C.44.c.	as16svc1	1=yes, 0=no
370	FSERYN	N	1	3032	3032	Is the freestanding/satellite emergency department open 24 hours a day, 7 days a week?	C.44.d.	as16svc1	1=yes, 0=no
371	TRAUMHOS	N	1	3033	3033	Certified trauma center - hospital	C.44.e.	as16svc2	1=yes, 0=no
372	TRAUMSYS	N	1	3034	3034	Certified trauma center - health system	C.44.e.	as16svc2	1=yes, 0=no
373	TRAUMVEN	N	1	3035	3035	Certified trauma center - joint venture	C.44.e.	as16svc2	1=yes, 0=no
374	TRAUML90	N	1	3036	3036	Level of trauma center	C.44.e.	as16svc2	1=regional resource trauma center, 2=community trauma center, 3=rural trauma center, 4 or greater=other (specific to some states)
375	ENBHOS	N	1	3037	3037	Enabling Services - hospital	C.45.	as16svc2	1=yes, 0=no
376	ENBSYS	N	1	3038	3038	Enabling Services - health system	C.45.	as16svc2	1=yes, 0=no
377	ENBVEN	N	1	3039	3039	Enabling Services - joint venture	C.45.	as16svc2	1=yes, 0=no
378	ENDOCHOS	N	1	3040	3040	Optical Colonoscopy-hospital	C.46.a	as16svc2	1=yes, 0=no
379	ENDOCSYS	N	1	3041	3041	Optical Colonoscopy-health system	C.46.a	as16svc2	1=yes, 0=no
380	ENDOCVEN	N	1	3042	3042	Optical Colonoscopy-joint venture	C.46.a	as16svc2	1=yes, 0=no
381	ENDOUHOS	N	1	3043	3043	Endoscopic ultrasound - hospital	C.46.b.	as16svc2	1=yes, 0=no
382	ENDOUSYS	N	1	3044	3044	Endoscopic ultrasound - health system	C.46.b.	as16svc2	1=yes, 0=no
383	ENDOUVEN	N	1	3045	3045	Endoscopic ultrasound - joint venture	C.46.b.	as16svc2	1=yes, 0=no
384	ENDOAHOS	N	1	3046	3046	Ablation of Barrett's esophagus - hospital	C.46.c.	as16svc2	1=yes, 0=no
385	ENDOASYS	N	1	3047	3047	Ablation of Barrett's esophagus - health system	C.46.c.	as16svc2	1=yes, 0=no
386	ENDOAVEN	N	1	3048	3048	Ablation of Barrett's esophagus - joint venture	C.46.c.	as16svc2	1=yes, 0=no
387	ENDOEHOS	N	1	3049	3049	Esophageal impedance study - hospital	C.46.d.	as16svc2	1=yes, 0=no
388	ENDOESYS	N	1	3050	3050	Esophageal impedance study - health system	C.46.d.	as16svc2	1=yes, 0=no
389	ENDOEVEN	N	1	3051	3051	Esophageal impedance study - joint venture	C.46.d.	as16svc2	1=yes, 0=no
390	ENDORHOS	N	1	3052	3052	Endoscopic retrograde cholangiopancreatography (ERCP) - hospital	C.46.e.	as16svc2	1=yes, 0=no
391	ENDORSYS	N	1	3053	3053	Endoscopic retrograde cholangiopancreatography (ERCP) - health system	C.46.e.	as16svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
392	ENDORVEN	N	1	3054	3054	Endoscopic retrograde cholangiopancreatography (ERCP) - joint venture	C.46.e.	as16svc2	1=yes, 0=no
393	ENRHOS	N	1	3055	3055	Enrollment (insurance) assistance services - hospital	C.47.	as16svc2	1=yes, 0=no
394	ENRSYS	N	1	3056	3056	Enrollment (insurance) assistance services - health system	C.47.	as16svc2	1=yes, 0=no
395	ENRVEN	N	1	3057	3057	Enrollment (insurance) assistance services - joint venture	C.47.	as16svc2	1=yes, 0=no
396	ESWLHOS	N	1	3058	3058	Extracorporeal shock waved lithotripter (ESWL) - hospital	C.48.	as16svc2	1=yes, 0=no
397	ESWLSYS	N	1	3059	3059	Extracorporeal shock waved lithotripter (ESWL) - health system	C.48.	as16svc2	1=yes, 0=no
398	ESWLVEN	N	1	3060	3060	Extracorporeal shock waved lithotripter (ESWL) - joint venture	C.48.	as16svc2	1=yes, 0=no
399	FRTCHOS	N	1	3061	3061	Fertility clinic - hospital	C.49.	as16svc2	1=yes, 0=no
400	FRTCSYS	N	1	3062	3062	Fertility clinic - health system	C.49.	as16svc2	1=yes, 0=no
401	FRTCVEN	N	1	3063	3063	Fertility clinic - joint venture	C.49.	as16svc2	1=yes, 0=no
402	FITCHOS	N	1	3064	3064	Fitness center - hospital	C.50.	as16svc2	1=yes, 0=no
403	FITCSYS	N	1	3065	3065	Fitness center - health system	C.50.	as16svc2	1=yes, 0=no
404	FITCVEN	N	1	3066	3066	Fitness center - joint venture	C.50.	as16svc2	1=yes, 0=no
405	OPCENHOS	N	1	3067	3067	Freestanding outpatient center - hospital	C.51.	as16svc2	1=yes, 0=no
406	OPCENSYS	N	1	3068	3068	Freestanding outpatient center - health system	C.51.	as16svc2	1=yes, 0=no
407	OPCENVEN	N	1	3069	3069	Freestanding outpatient center - joint venture	C.51.	as16svc2	1=yes, 0=no
408	GERSVHOS	N	1	3070	3070	Geriatric services - hospital	C.52.	as16svc2	1=yes, 0=no
409	GERSVSYS	N	1	3071	3071	Geriatric services - health system	C.52.	as16svc2	1=yes, 0=no
410	GERSVVEN	N	1	3072	3072	Geriatric services - joint venture	C.52.	as16svc2	1=yes, 0=no
411	HLTHFHOS	N	1	3073	3073	Health fair - hospital	C.53.	as16svc2	1=yes, 0=no
412	HLTHFSYS	N	1	3074	3074	Health fair - health system	C.53.	as16svc2	1=yes, 0=no
413	HLTHFVEN	N	1	3075	3075	Health fair - joint venture	C.53.	as16svc2	1=yes, 0=no
414	HLTHCHOS	N	1	3076	3076	Community health education - hospital	C.54.	as16svc2	1=yes, 0=no
415	HLTHCSYS	N	1	3077	3077	Community health education - health system	C.54.	as16svc2	1=yes, 0=no
416	HLTHCVEN	N	1	3078	3078	Community health education - joint venture	C.54.	as16svc2	1=yes, 0=no
417	GNTCHOS	N	1	3079	3079	Genetic testing/counseling - hospital	C.55.	as16svc2	1=yes, 0=no
418	GNTCSYS	N	1	3080	3080	Genetic testing/counseling - health system	C.55.	as16svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
419	GNTCVEN	N	1	3081	3081	Genetic testing/counseling - joint venture	C.55.	as16svc2	1=yes, 0=no
420	HLTHSHOS	N	1	3082	3082	Health screenings - hospital	C.56.	as16svc2	1=yes, 0=no
421	HLTHSSYS	N	1	3083	3083	Health screenings - health system	C.56.	as16svc2	1=yes, 0=no
422	HLTHSVEN	N	1	3084	3084	Health screenings - joint venture	C.56.	as16svc2	1=yes, 0=no
423	HLTRHOS	N	1	3085	3085	Health research - hospital	C.57.	as16svc2	1=yes, 0=no
424	HLTRSYS	N	1	3086	3086	Health research - health system	C.57.	as16svc2	1=yes, 0=no
425	HLTRVEN	N	1	3087	3087	Health research - joint venture	C.57.	as16svc2	1=yes, 0=no
426	HEMOHOS	N	1	3088	3088	Hemodialysis - hospital	C.58.	as16svc2	1=yes, 0=no
427	HEMOSYS	N	1	3089	3089	Hemodialysis - health system	C.58.	as16svc2	1=yes, 0=no
428	HEMOVEN	N	1	3090	3090	Hemodialysis - joint venture	C.58.	as16svc2	1=yes, 0=no
429	AIDSSHOS	N	1	3091	3091	HIV-AIDS services - hospital	C.59.	as16svc2	1=yes, 0=no
430	AIDSSSYS	N	1	3092	3092	HIV-AIDS services - health system	C.59.	as16svc2	1=yes, 0=no
431	AIDSSVEN	N	1	3093	3093	HIV-AIDS services - joint venture	C.59.	as16svc2	1=yes, 0=no
432	HOMEHHOS	N	1	3094	3094	Home health services - hospital	C.60.	as16svc2	1=yes, 0=no
433	HOMEHSYS	N	1	3095	3095	Home health services - health system	C.60.	as16svc2	1=yes, 0=no
434	HOMEHVEN	N	1	3096	3096	Home health services - joint venture	C.60.	as16svc2	1=yes, 0=no
435	HOSPCHOS	N	1	3097	3097	Hospice program - hospital	C. 61.	as16svc2	1=yes, 0=no
436	HOSPCSYS	N	1	3098	3098	Hospice program - health system	C. 61.	as16svc2	1=yes, 0=no
437	HOSPCVEN	N	1	3099	3099	Hospice program - joint venture	C. 61.	as16svc2	1=yes, 0=no
438	OPHOSHOS	N	1	3100	3100	Hospital-based outpatient care center/services - hospital	C.62.	as16svc2	1=yes, 0=no
439	OPHOSSYS	N	1	3101	3101	Hospital-based outpatient care center/services - health system	C.62.	as16svc2	1=yes, 0=no
440	OPHOSVEN	N	1	3102	3102	Hospital-based outpatient care center/services - joint venture	C.62.	as16svc2	1=yes, 0=no
441	IMPRHOS	N	1	3103	3103	Immunization program - hospital	C.63.	as16svc2	1=yes, 0=no
442	IMPRSYS	N	1	3104	3104	Immunization program - health system	C.63.	as16svc2	1=yes, 0=no
443	IMPRVEN	N	1	3105	3105	Immunization program - joint venture	C.63.	as16svc2	1=yes, 0=no
444	ICARHOS	N	1	3106	3106	Indigent care clinic - hospital	C.64.	as16svc2	1=yes, 0=no
445	ICARSYS	N	1	3107	3107	Indigent care clinic - health system	C.64.	as16svc2	1=yes, 0=no
446	ICARVEN	N	1	3108	3108	Indigent care clinic - joint venture	C.64.	as16svc2	1=yes, 0=no
447	LINGHOS	N	1	3109	3109	Linguistic/translation services - hospital	C.65.	as16svc2	1=yes, 0=no
448	LINGSYS	N	1	3110	3110	Linguistic/translation services - health system	C.65.	as16svc2	1=yes, 0=no
449	LINGVEN	N	1	3111	3111	Linguistic/translation services - joint venture	C.65.	as16svc2	1=yes, 0=no
450	MEALSHOS	N	1	3112	3112	Meals on wheels - hospital	C.66.	as16svc2	1=yes, 0=no
451	MEALSSYS	N	1	3113	3113	Meals on wheels - health system	C.66.	as16svc2	1=yes, 0=no
452	MEALSVEN	N	1	3114	3114	Meals on wheels - joint venture	C.66.	as16svc2	1=yes, 0=no
453	MOHSHOS	N	1	3115	3115	Mobile health services - hospital	C.67.	as16svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
454	MOHSSYS	N	1	3116	3116	Mobile health services - health system	C.67.	as16svc2	1=yes, 0=no
455	MOHSVEN	N	1	3117	3117	Mobile health services - joint venture	C.67.	as16svc2	1=yes, 0=no
456	NEROHOS	N	1	3118	3118	Neurological services - hospital	C.68.	as16svc2	1=yes, 0=no
457	NEROSYS	N	1	3119	3119	Neurological services - health system	C.68.	as16svc2	1=yes, 0=no
458	NEROVEN	N	1	3120	3120	Neurological services - joint venture	C.68.	as16svc2	1=yes, 0=no
459	NUTRPHOS	N	1	3121	3121	Nutrition program - hospital	C.69.	as16svc2	1=yes, 0=no
460	NUTRPSYS	N	1	3122	3122	Nutrition program - health system	C.69.	as16svc2	1=yes, 0=no
461	NUTRPVEN	N	1	3123	3123	Nutrition program - joint venture	C.69.	as16svc2	1=yes, 0=no
462	OCCHSHOS	N	1	3124	3124	Occupational health services - hospital	C.70.	as16svc2	1=yes, 0=no
463	OCCHSSYS	N	1	3125	3125	Occupational health services - health system	C.70.	as16svc2	1=yes, 0=no
464	OCCHSVEN	N	1	3126	3126	Occupational health services - joint venture	C.70.	as16svc2	1=yes, 0=no
465	ONCOLHOS	N	1	3127	3127	Oncology services - hospital	C.71.	as16svc2	1=yes, 0=no
466	ONCOLSYS	N	1	3128	3128	Oncology services - health system	C.71.	as16svc2	1=yes, 0=no
467	ONCOLVEN	N	1	3129	3129	Oncology services - joint venture	C.71.	as16svc2	1=yes, 0=no
468	ORTOHOS	N	1	3130	3130	Orthopedic services - hospital	C.72.	as16svc2	1=yes, 0=no
469	ORTOSYS	N	1	3131	3131	Orthopedic services - health system	C.72.	as16svc2	1=yes, 0=no
470	ORTOVEN	N	1	3132	3132	Orthopedic services - joint venture	C.72.	as16svc2	1=yes, 0=no
471	OPSRGHOS	N	1	3133	3133	Outpatient surgery - hospital	C.73.	as16svc2	1=yes, 0=no
472	OPSRGSYS	N	1	3134	3134	Outpatient surgery - health system	C.73.	as16svc2	1=yes, 0=no
473	OPSRGVEN	N	1	3135	3135	Outpatient surgery - joint venture	C.73.	as16svc2	1=yes, 0=no
474	PAINHOS	N	1	3136	3136	Pain management program - hospital	C.74.	as16svc2	1=yes, 0=no
475	PAINSYS	N	1	3137	3137	Pain management program - health system	C.74.	as16svc2	1=yes, 0=no
476	PAINVEN	N	1	3138	3138	Pain management program - joint venture	C.74.	as16svc2	1=yes, 0=no
477	PALHOS	N	1	3139	3139	Palliative care program - hospital	C.75.	as16svc2	1=yes, 0=no
478	PALSYS	N	1	3140	3140	Palliative care program - health system	C.75.	as16svc2	1=yes, 0=no
479	PALVEN	N	1	3141	3141	Palliative care program - joint venture	C.75.	as16svc2	1=yes, 0=no
480	IPALHOS	N	1	3142	3142	Inpatient palliative care unit - hospital	C.76.	as16svc2	1=yes, 0=no
481	IPALSYS	N	1	3143	3143	Inpatient palliative care unit - health system	C.76.	as16svc2	1=yes, 0=no
482	IPALVEN	N	1	3144	3144	Inpatient palliative care unit - joint venture	C.76.	as16svc2	1=yes, 0=no
483	PCAHOS	N	1	3145	3145	Patient controlled analgesia - hospital	C.77.	as16svc2	1=yes, 0=no
484	PCASYS	N	1	3146	3146	Patient controlled analgesia - health system	C.77.	as16svc2	1=yes, 0=no
485	PCAVEN	N	1	3147	3147	Patient controlled analgesia - joint venture	C.77.	as16svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
486	PATEDHOS	N	1	3148	3148	Patient education center - hospital	C.78.	as16svc2	1=yes, 0=no
487	PATEDSYS	N	1	3149	3149	Patient education center - health system	C.78.	as16svc2	1=yes, 0=no
488	PATEDVEN	N	1	3150	3150	Patient education center - joint venture	C.78.	as16svc2	1=yes, 0=no
489	PATRPHOS	N	1	3151	3151	Patient representative services - hospital	C.79.	as16svc2	1=yes, 0=no
490	PATRPSYS	N	1	3152	3152	Patient representative services - health system	C.79.	as16svc2	1=yes, 0=no
491	PATRPVEN	N	1	3153	3153	Patient representative services - joint venture	C.79.	as16svc2	1=yes, 0=no
492	RASTHOS	N	1	3154	3154	Assistive technology center - hospital	C.80.a.	as16svc2	1=yes, 0=no
493	RASTSYS	N	1	3155	3155	Assistive technology center - health system	C.80.a.	as16svc2	1=yes, 0=no
494	RASTVEN	N	1	3156	3156	Assistive technology center - joint venture	C.80.a.	as16svc2	1=yes, 0=no
495	REDSHOS	N	1	3157	3157	Electrodiagnostic services - hospital	C.80.b.	as16svc2	1=yes, 0=no
496	REDSSYS	N	1	3158	3158	Electrodiagnostic services - health system	C.80.b.	as16svc2	1=yes, 0=no
497	REDSVEN	N	1	3159	3159	Electrodiagnostic services - joint venture	C.80.b.	as16svc2	1=yes, 0=no
498	RHBOPHOS	N	1	3160	3160	Physical rehabilitation outpatient services - hospital	C.80.c.	as16svc2	1=yes, 0=no
499	RHBOPSYS	N	1	3161	3161	Physical rehabilitation outpatient services - health system	C.80.c.	as16svc2	1=yes, 0=no
500	RHBOPVEN	N	1	3162	3162	Physical rehabilitation outpatient services - joint venture	C.80.c.	as16svc2	1=yes, 0=no
501	RPRSHOS	N	1	3163	3163	Prosthetic and orthotic services - hospital	C.80.d.	as16svc2	1=yes, 0=no
502	RPRSSYS	N	1	3164	3164	Prosthetic and orthotic services - health system	C.80.d.	as16svc2	1=yes, 0=no
503	RPRSVEN	N	1	3165	3165	Prosthetic and orthotic services - joint venture	C.80.d.	as16svc2	1=yes, 0=no
504	RBOTHOS	N	1	3166	3166	Robot-assisted walking therapy - hospital	C.80.e.	as16svc2	1=yes, 0=no
505	RBOTSYS	N	1	3167	3167	Robot-assisted walking therapy - health system	C.80.e.	as16svc2	1=yes, 0=no
506	RBOTVEN	N	1	3168	3168	Robot-assisted walking therapy - joint venture	C.80.e.	as16svc2	1=yes, 0=no
507	RSIMHOS	N	1	3169	3169	Simulated rehabilitation environment - hospital	C.80.f.	as16svc2	1=yes, 0=no
508	RSIMSYS	N	1	3170	3170	Simulated rehabilitation environment - health system	C.80.f.	as16svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
509	RSIMVEN	N	1	3171	3171	Simulated rehabilitation environment - joint venture	C.80.f.	as16svc2	1=yes, 0=no
510	PCDEPHOS	N	1	3172	3172	Primary care department - hospital	C.81.	as16svc2	1=yes, 0=no
511	PCDEPSYS	N	1	3173	3173	Primary care department - health system	C.81.	as16svc2	1=yes, 0=no
512	PCDEPVEN	N	1	3174	3174	Primary care department - joint venture	C.81.	as16svc2	1=yes, 0=no
513	PSYCAHOS	N	1	3175	3175	Psychiatric child/adolescent services - hospital	C.82.a.	as16svc2	1=yes, 0=no
514	PSYCASYS	N	1	3176	3176	Psychiatric child/adolescent services - health system	C.82.a.	as16svc2	1=yes, 0=no
515	PSYCAVEN	N	1	3177	3177	Psychiatric child/adolescent services - joint venture	C.82.a.	as16svc2	1=yes, 0=no
516	PSYLSHOS	N	1	3178	3178	Psychiatric consultation/liaison services - hospital	C.82.b.	as16svc2	1=yes, 0=no
517	PSYLSSYS	N	1	3179	3179	Psychiatric consultation/liaison services - health system	C.82.b.	as16svc2	1=yes, 0=no
518	PSYLSVEN	N	1	3180	3180	Psychiatric consultation/liaison services - joint venture	C.82.b.	as16svc2	1=yes, 0=no
519	PSYEDHOS	N	1	3181	3181	Psychiatric education services - hospital	C.82.c.	as16svc2	1=yes, 0=no
520	PSYEDSYS	N	1	3182	3182	Psychiatric education services - health system	C.82.c.	as16svc2	1=yes, 0=no
521	PSYEDVEN	N	1	3183	3183	Psychiatric education services - joint venture	C.82.c.	as16svc2	1=yes, 0=no
522	PSYEMHOS	N	1	3184	3184	Psychiatric emergency services - hospital	C.82.d.	as16svc2	1=yes, 0=no
523	PSYEMSYS	N	1	3185	3185	Psychiatric emergency services - health system	C.82.d.	as16svc2	1=yes, 0=no
524	PSYEMVEN	N	1	3186	3186	Psychiatric emergency services - joint venture	C.82.d.	as16svc2	1=yes, 0=no
525	PSYGRHOS	N	1	3187	3187	Psychiatric geriatric services - hospital	C.82.e.	as16svc2	1=yes, 0=no
526	PSYGRSYS	N	1	3188	3188	Psychiatric geriatric services - health system	C.82.e.	as16svc2	1=yes, 0=no
527	PSYGRVEN	N	1	3189	3189	Psychiatric geriatric services - joint venture	C.82.e.	as16svc2	1=yes, 0=no
528	PSYOPHOS	N	1	3190	3190	Psychiatric outpatient services - hospital	C.82.f.	as16svc2	1=yes, 0=no
529	PSYOPSYS	N	1	3191	3191	Psychiatric outpatient services - health system	C.82.f.	as16svc2	1=yes, 0=no
530	PSYOPVEN	N	1	3192	3192	Psychiatric outpatient services - joint venture	C.82.f.	as16svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
531	PSYPHHOS	N	1	3193	3193	Psychiatric partial hospitalization program - hospital	C.82.g.	as16svc2	1=yes, 0=no
532	PSYPHSYS	N	1	3194	3194	Psychiatric partial hospitalization program - health system	C.82.g.	as16svc2	1=yes, 0=no
533	PSYPHVEN	N	1	3195	3195	Psychiatric partial hospitalization program - joint venture	C.82.g.	as16svc2	1=yes, 0=no
534	PSTRTHOS	N	1	3196	3196	Psychiatric residential treatment - hospital	C.82.h	as16svc2	1=yes, 0=no
535	PSTRTSYS	N	1	3197	3197	Psychiatric residential treatment - health system	C.82.h	as16svc2	1=yes, 0=no
536	PSTRTVEN	N	1	3198	3198	Psychiatric residential treatment - joint venture	C.82.h	as16svc2	1=yes, 0=no
537	CTSCNHOS	N	1	3199	3199	Computed-tomography (CT) scanner - hospital	C.83.a.	as16svc3	1=yes, 0=no
538	CTSCNSYS	N	1	3200	3200	Computed-tomography (CT) scanner - health system	C.83.a.	as16svc3	1=yes, 0=no
539	CTSCNVEN	N	1	3201	3201	Computed-tomography (CT) scanner - joint venture	C.83.a.	as16svc3	1=yes, 0=no
540	DRADFHOS	N	1	3202	3202	Diagnostic radioisotope facility - hospital	C.83.b.	as16svc3	1=yes, 0=no
541	DRADFSYS	N	1	3203	3203	Diagnostic radioisotope facility - health system	C.83.b.	as16svc3	1=yes, 0=no
542	DRADFVEN	N	1	3204	3204	Diagnostic radioisotope facility - joint venture	C.83.b.	as16svc3	1=yes, 0=no
543	EBCTHOS	N	1	3205	3205	Electron Beam Computed Tomography (EBCT) - hospital	C.83.c.	as16svc3	1=yes, 0=no
544	EBCTSYS	N	1	3206	3206	Electron Beam Computed Tomography (EBCT) - health system	C.83.c.	as16svc3	1=yes, 0=no
545	EBCTVEN	N	1	3207	3207	Electron Beam Computed Tomography (EBCT) - joint venture	C.83.c.	as16svc3	1=yes, 0=no
546	FFDMHOS	N	1	3208	3208	Full-field digital mammography - hospital	C.83.d.	as16svc3	1=yes, 0=no
547	FFDMSYS	N	1	3209	3209	Full-field digital mammography - health system	C.83.d.	as16svc3	1=yes, 0=no
548	FFDMVEN	N	1	3210	3210	Full-field digital mammography - joint venture	C.83.d.	as16svc3	1=yes, 0=no
549	MRIHOS	N	1	3211	3211	Magnetic resonance imaging (MRI) - hospital	C.83.e.	as16svc3	1=yes, 0=no
550	MRISYS	N	1	3212	3212	Magnetic resonance imaging (MRI) - health system	C.83.e.	as16svc3	1=yes, 0=no
551	MRIVEN	N	1	3213	3213	Magnetic resonance imaging (MRI) - joint venture	C.83.e.	as16svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
552	IMRIHOS	N	1	3214	3214	Intraoperative magnetic resonance imaging - hospital	C.83.f.	as16svc3	1=yes, 0=no
553	IMRISYS	N	1	3215	3215	Intraoperative magnetic resonance imaging - health system	C.83.f.	as16svc3	1=yes, 0=no
554	IMRIVEN	N	1	3216	3216	Intraoperative magnetic resonance imaging - joint venture	C.83.f.	as16svc3	1=yes, 0=no
555	MEGHOS	N	1	3217	3217	Magnetoencephalography (MEG) - hospital	C.83.g.	as16svc3	1=yes, 0=no
556	MEGSYS	N	1	3218	3218	Magnetoencephalography (MEG) - health system	C.83.g.	as16svc3	1=yes, 0=no
557	MEGVEN	N	1	3219	3219	Magnetoencephalography (MEG) - joint venture	C.83.g.	as16svc3	1=yes, 0=no
558	MSCTHOS	N	1	3220	3220	Multislice spiral computed tomography < 64 slice - hospital	C.83.h.	as16svc3	1=yes, 0=no
559	MSCTSYS	N	1	3221	3221	Multislice spiral computed tomography < 64 slice - health system	C.83.h.	as16svc3	1=yes, 0=no
560	MSCTVEN	N	1	3222	3222	Multislice spiral computed tomography < 64 slice - joint venture	C.83.h.	as16svc3	1=yes, 0=no
561	MSCTGHOS	N	1	3223	3223	Multi-slice spiral computed tomography 64 + slice - hospital	C.83.i.	as16svc3	1=yes, 0=no
562	MSCTGSYS	N	1	3224	3224	Multi-slice spiral computed tomography 64 + slice - health system	C.83.i.	as16svc3	1=yes, 0=no
563	MSCTGVEN	N	1	3225	3225	Multi-slice spiral computed tomography 64 + slice - joint venture	C.83.i.	as16svc3	1=yes, 0=no
564	PETHOS	N	1	3226	3226	Positron emission tomography (PET) - hospital	C.83.j.	as16svc3	1=yes, 0=no
565	PETSYS	N	1	3227	3227	Positron emission tomography (PET) - health system	C.83.j.	as16svc3	1=yes, 0=no
566	PETVEN	N	1	3228	3228	Positron emission tomography (PET) - joint venture	C.83.j.	as16svc3	1=yes, 0=no
567	PETCTHOS	N	1	3229	3229	Positron emission tomography/CT (PET/CT) - hospital	C.83.k.	as16svc3	1=yes, 0=no
568	PETCTSYS	N	1	3230	3230	Positron emission tomography/CT (PET/CT) - health system	C.83.k.	as16svc3	1=yes, 0=no
569	PETCTVEN	N	1	3231	3231	Positron emission tomography/CT (PET/CT) - joint venture	C.83.k.	as16svc3	1=yes, 0=no
570	SPECTHOS	N	1	3232	3232	Single photon emission computerized tomography (SPECT) - hospital	C.83.l.	as16svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
571	SPECTSYS	N	1	3233	3233	Single photon emission computerized tomography (SPECT) - health system	C.83.l.	as16svc3	1=yes, 0=no
572	SPECTVEN	N	1	3234	3234	Single photon emission computerized tomography (SPECT) - joint venture	C.83.l.	as16svc3	1=yes, 0=no
573	ULTSNHOS	N	1	3235	3235	Ultrasound - hospital	C.83.m.	as16svc3	1=yes, 0=no
574	ULTSNSYS	N	1	3236	3236	Ultrasound - health system	C.83.m.	as16svc3	1=yes, 0=no
575	ULTSNVEN	N	1	3237	3237	Ultrasound - joint venture	C.83.m.	as16svc3	1=yes, 0=no
576	IGRTHOS	N	1	3238	3238	Image-guided radiation therapy - hospital	C.84.a.	as16svc3	1=yes, 0=no
577	IGRTSYS	N	1	3239	3239	Image-guided radiation therapy - health system	C.84.a.	as16svc3	1=yes, 0=no
578	IGRTVEN	N	1	3240	3240	Image-guided radiation therapy - joint venture	C.84.a.	as16svc3	1=yes, 0=no
579	IMRTHOS	N	1	3241	3241	Intensity-modulated radiation therapy (IMRT) - hospital	C.84.b	as16svc3	1=yes, 0=no
580	IMRTSYS	N	1	3242	3242	Intensity-modulated radiation therapy (IMRT) - health system	C.84.b	as16svc3	1=yes, 0=no
581	IMRTVEN	N	1	3243	3243	Intensity-modulated radiation therapy (IMRT) - joint venture	C.84.b	as16svc3	1=yes, 0=no
582	PTONHOS	N	1	3244	3244	Proton beam therapy - hospital	C.84.c	as16svc3	1=yes, 0=no
583	PTONSYS	N	1	3245	3245	Proton beam therapy - health system	C.84.c	as16svc3	1=yes, 0=no
584	PTONVEN	N	1	3246	3246	Proton beam therapy - joint venture	C.84.c	as16svc3	1=yes, 0=no
585	BEAMHOS	N	1	3247	3247	Shaped beam radiation system - hospital	C.84.d	as16svc3	1=yes, 0=no
586	BEAMSYS	N	1	3248	3248	Shaped beam radiation system - health system	C.84.d	as16svc3	1=yes, 0=no
587	BEAMVEN	N	1	3249	3249	Shaped beam radiation system - joint venture	C.84.d	as16svc3	1=yes, 0=no
588	SRADHOS	N	1	3250	3250	Stereotactic radiosurgery - hospital	C.84.e	as16svc3	1=yes, 0=no
589	SRADSYS	N	1	3251	3251	Stereotactic radiosurgery - health system	C.84.e	as16svc3	1=yes, 0=no
590	SRADVEN	N	1	3252	3252	Stereotactic radiosurgery - joint venture	C.84.e	as16svc3	1=yes, 0=no
591	RETIRHOS	N	1	3253	3253	Retirement housing - hospital	C.85.	as16svc3	1=yes, 0=no
592	RETIRSYS	N	1	3254	3254	Retirement housing - health system	C.85.	as16svc3	1=yes, 0=no
593	RETIRVEN	N	1	3255	3255	Retirement housing - joint venture	C.85.	as16svc3	1=yes, 0=no
594	ROBOHOS	N	1	3256	3256	Robotic surgery - hospital	C.86.	as16svc3	1=yes, 0=no
595	ROBOSYS	N	1	3257	3257	Robotic surgery - health system	C.86.	as16svc3	1=yes, 0=no
596	ROBOVEN	N	1	3258	3258	Robotic surgery - joint venture	C.86.	as16svc3	1=yes, 0=no
597	RURLHOS	N	1	3259	3259	Rural health clinic - hospital	C.87.	as16svc3	1=yes, 0=no
598	RURLSYS	N	1	3260	3260	Rural health clinic - health system	C.87.	as16svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
599	RURLVEN	N	1	3261	3261	Rural health clinic - joint venture	C.87.	as16svc3	1=yes, 0=no
600	SLEPHOS	N	1	3262	3262	Sleep center - hospital	C.88.	as16svc3	1=yes, 0=no
601	SLEPSYS	N	1	3263	3263	Sleep center - health system	C.88.	as16svc3	1=yes, 0=no
602	SLEPVEN	N	1	3264	3264	Sleep center - joint venture	C.88.	as16svc3	1=yes, 0=no
603	SOCWKHOS	N	1	3265	3265	Social work services - hospital	C.89.	as16svc3	1=yes, 0=no
604	SOCWKSYS	N	1	3266	3266	Social work services - health system	C.89.	as16svc3	1=yes, 0=no
605	SOCWKVEN	N	1	3267	3267	Social work services - joint venture	C.89.	as16svc3	1=yes, 0=no
606	SPORTHOS	N	1	3268	3268	Sports medicine - hospital	C.90.	as16svc3	1=yes, 0=no
607	SPORTSYS	N	1	3269	3269	Sports medicine - health system	C.90.	as16svc3	1=yes, 0=no
608	SPORTVEN	N	1	3270	3270	Sports medicine - joint venture	C.90.	as16svc3	1=yes, 0=no
609	SUPPGHOS	N	1	3271	3271	Support groups - hospital	C.91.	as16svc3	1=yes, 0=no
610	SUPPGSYS	N	1	3272	3272	Support groups - health system	C.91.	as16svc3	1=yes, 0=no
611	SUPPGVEN	N	1	3273	3273	Support groups - joint venture	C.91.	as16svc3	1=yes, 0=no
612	SWBDHOS	N	1	3274	3274	Swing bed services - hospital	C.92.	as16svc3	1=yes, 0=no
613	SWBDSYS	N	1	3275	3275	Swing bed services - health system	C.92.	as16svc3	1=yes, 0=no
614	SWBDVEN	N	1	3276	3276	Swing bed services - joint venture	C.92.	as16svc3	1=yes, 0=no
615	TEENSHOS	N	1	3277	3277	Teen outreach services - hospital	C.93.	as16svc3	1=yes, 0=no
616	TEENSSYS	N	1	3278	3278	Teen outreach services - health system	C.93.	as16svc3	1=yes, 0=no
617	TEENSVEN	N	1	3279	3279	Teen outreach services - joint venture	C.93.	as16svc3	1=yes, 0=no
618	TOBHOS	N	1	3280	3280	Tobacco treatment services - hospital	C.94.	as16svc3	1=yes, 0=no
619	TOBSYS	N	1	3281	3281	Tobacco treatment services - health system	C.94.	as16svc3	1=yes, 0=no
620	TOBVEN	N	1	3282	3282	Tobacco treatment services - joint venture	C.94.	as16svc3	1=yes, 0=no
621	OTBONHOS	N	1	3283	3283	Bone marrow transplant - hospital	C.95.a.	as16svc3	1=yes, 0=no
622	OTBONSYS	N	1	3284	3284	Bone marrow transplant - health system	C.95.a.	as16svc3	1=yes, 0=no
623	OTBONVEN	N	1	3285	3285	Bone marrow transplant - joint venture	C.95.a.	as16svc3	1=yes, 0=no
624	HARTHOS	N	1	3286	3286	Heart transplant - hospital	C.95.b.	as16svc3	1=yes, 0=no
625	HARTSYS	N	1	3287	3287	Heart transplant - health system	C.95.b.	as16svc3	1=yes, 0=no
626	HARTVEN	N	1	3288	3288	Heart transplant - joint venture	C.95.b.	as16svc3	1=yes, 0=no
627	KDNYHOS	N	1	3289	3289	Kidney transplant - hospital	C.95.c.	as16svc3	1=yes, 0=no
628	KDNYSYS	N	1	3290	3290	Kidney transplant -health system	C.95.c.	as16svc3	1=yes, 0=no
629	KDNYVEN	N	1	3291	3291	Kidney transplant - joint venture	C.95.c.	as16svc3	1=yes, 0=no
630	LIVRHOS	N	1	3292	3292	Liver transplant - hospital	C.95.d.	as16svc3	1=yes, 0=no
631	LIVRSYS	N	1	3293	3293	Liver transplant - health system	C.95.d.	as16svc3	1=yes, 0=no
632	LIVRVEN	N	1	3294	3294	Liver transplant - joint venture	C.95.d.	as16svc3	1=yes, 0=no
633	LUNGHOS	N	1	3295	3295	Lung transplant - hospital	C.95.e.	as16svc3	1=yes, 0=no
634	LUNGSYS	N	1	3296	3296	Lung transplant - health system	C.95.e.	as16svc3	1=yes, 0=no
635	LUNGVEN	N	1	3297	3297	Lung transplant - joint venture	C.95.e.	as16svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
636	TISUHOS	N	1	3298	3298	Tissue transplant - hospital	C.95.f.	as16svc3	1=yes, 0=no
637	TISUSYS	N	1	3299	3299	Tissue transplant - health system	C.95.f.	as16svc3	1=yes, 0=no
638	TISUVEN	N	1	3300	3300	Tissue transplant - joint venture	C.95.f.	as16svc3	1=yes, 0=no
639	OTOTHHOS	N	1	3301	3301	Other transplant - hospital	C.95.g.	as16svc3	1=yes, 0=no
640	OTOTHSYS	N	1	3302	3302	Other transplant - health system	C.95.g.	as16svc3	1=yes, 0=no
641	OTOTHVEN	N	1	3303	3303	Other transplant - joint venture	C.95.g.	as16svc3	1=yes, 0=no
642	TPORTHOS	N	1	3304	3304	Transportation to health services - hospital	C.96.	as16svc3	1=yes, 0=no
643	TPORTSYS	N	1	3305	3305	Transportation to health services - health system	C.96.	as16svc3	1=yes, 0=no
644	TPORTVEN	N	1	3306	3306	Transportation to health services - joint venture	C.96.	as16svc3	1=yes, 0=no
645	URGCCHOS	N	1	3307	3307	Urgent care center - hospital	C.97.	as16svc3	1=yes, 0=no
646	URGCCSYS	N	1	3308	3308	Urgent care center - health system	C.97.	as16svc3	1=yes, 0=no
647	URGCCVEN	N	1	3309	3309	Urgent care center - joint venture	C.97.	as16svc3	1=yes, 0=no
648	**VWRKHOS**	**N**	**1**	**3310**	**3310**	**Violence prevention programs for the workplace - hospital**	**C.98.a.**	**as16svc3**	**1=yes, 0=no**
649	**VWRKSYS**	**N**	**1**	**3311**	**3311**	**Violence prevention programs for the workplace - health system**	**C.98.a.**	**as16svc3**	**1=yes, 0=no**
650	**VWRKVEN**	**N**	**1**	**3312**	**3312**	**Violence prevention programs for the workplace - joint venture**	**C.98.a.**	**as16svc3**	**1=yes, 0=no**
651	**VCMMHOS**	**N**	**1**	**3313**	**3313**	**Violence prevention programs for the community - hospital**	**C.98.b.**	**as16svc3**	**1=yes, 0=no**
652	**VCMMSYS**	**N**	**1**	**3314**	**3314**	**Violence prevention programs for the community - health system**	**C.98.b.**	**as16svc3**	**1=yes, 0=no**
653	**VCMMVEN**	**N**	**1**	**3315**	**3315**	**Violence prevention programs for the community - joint venture**	**C.98.b.**	**as16svc3**	**1=yes, 0=no**
654	VRCSHOS	N	1	3316	3316	Virtual colonoscopy - hospital	C.99.	as16svc3	1=yes, 0=no
655	VRCSSYS	N	1	3317	3317	Virtual colonoscopy - health system	C.99.	as16svc3	1=yes, 0=no
656	VRCSVEN	N	1	3318	3318	Virtual colonoscopy - joint venture	C.99.	as16svc3	1=yes, 0=no
657	VOLSVHOS	N	1	3319	3319	Volunteer services department - hospital	C.100.	as16svc3	1=yes, 0=no
658	VOLSVSYS	N	1	3320	3320	Volunteer services department - health system	C.100.	as16svc3	1=yes, 0=no
659	VOLSVVEN	N	1	3321	3321	Volunteer services department - joint venture	C.100.	as16svc3	1=yes, 0=no
660	WOMHCHOS	N	1	3322	3322	Women's health center/services - hospital	C.101.	as16svc3	1=yes, 0=no
661	WOMHCSYS	N	1	3323	3323	Women's health center/services - health system	C.101.	as16svc3	1=yes, 0=no
662	WOMHCVEN	N	1	3324	3324	Women's health center/services - joint venture	C.101.	as16svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
663	WMGTHOS	N	1	3325	3325	Wound management services - hospital	C.102.	as16svc3	1=yes, 0=no
664	WMGTSYS	N	1	3326	3326	Wound management services - health system	C.102.	as16svc3	1=yes, 0=no
665	WMGTVEN	N	1	3327	3327	Wound management services - joint venture	C.102.	as16svc3	1=yes, 0=no
666	EXPTOT	Y	15	3328	3342	Total facility expenses, excluding bad debt	D.3.m.	as16util1	Total expenses
667	EXPTHA	Y	15	3343	3357	Hospital total expenses, excluding bad debt		as16util1	Calculated Field: Total expenses less nursing home unit expense
668	EXPTLA	Y	15	3358	3372	Nursing home expenses, excluding bad debt	D.3.m.	as16util1	Total expenses (nursing home unit)
669	CPPCT	N	4	3373	3376	What % of the hospital's net patient revenue is paid on a capitated basis?	C.111.	as16util1	
670	CAPRSK	N	4	3377	3380	What % of the hospital's net patient revenue is paid on a shared risk basis?	C.112.	as16util1	
671	DPEXA	N	10	3381	3390	Depreciation expense	D.3.h.	as16util1	Expense
672	INTEXA	N	10	3391	3400	Interest expense	D.3.i.	as16util1	Expense
673	**PHREXA**	**N**	**10**	**3401**	**3410**	**Pharmacy expense**	**D.3.j.**	**as16util1**	**Expense**
674	SUPEXA	N	10	3411	3420	Supply expense	D.3.k.	as16util1	Expense
675	OTHEXPA	N	10	3421	3430	All other expenses	D.3.l	as16util1	Expense
676	NPAYBEN	Y	10	3431	3440	Total facility employee benefits	D.3.g.	as16util1	Employee benefits
677	PAYTOT	Y	10	3441	3450	Total facility payroll expenses	D.3.f.	as16util1	Payroll expenses
678	PAYTOTH	Y	10	3451	3460	Hospital unit payroll expenses		as16util1	Calculated Field: Total facility payroll expenses less nursing home facility payroll expenses
679	NPAYBENH	N	10	3461	3470	Hospital unit employee benefits		as16util1	Calculated Field: Total facility employee benefits expenses less nursing home facility employee benefits expenses
680	PAYTOTLT	Y	10	3471	3480	Nursing home payroll expenses	D.3.f.	as16util1	Payroll expenses (nursing home unit)
681	NPAYBENL	N	10	3481	3490	Nursing home employee benefits	D.3.g.	as16util1	Employee benefits (nursing home unit)
682	LBEDSA	N	6	3491	3496	Licensed beds total facility	D.1.a.	as16util1	Total licensed beds
683	BDTOT	NA	4	3497	3500	Total facility beds set up and staffed at the end of reporting period	D.1.b.	as16util1	Beds set up and staffed (total facility)
684	ADMTOT	Y	6	3501	3506	Total facility admissions	D.1.e.	as16util1	Admissions (total facility)
685	IPDTOT	Y	8	3507	3514	Total facility inpatient days	D.1.f.	as16util1	Inpatient days (total facility)
686	BDH	N	4	3515	3518	Hospital unit beds set up and staffed		as16util1	Calculated Field: Total facility beds less nursing home unit beds
687	ADMH	N	6	3519	3524	Hospital unit admissions		as16util1	Calculated Field: Total facility admissions less nursing home unit admissions

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
688	IPDH	N	8	3525	3532	Hospital unit inpatient days		as16util1	Calculated Field: Total facility inpatient days less nursing home unit inpatient days
689	LBEDLA	N	6	3533	3538	Nursing home licensed beds	D.1.a.	as16util1	Licensed beds (nursing home unit)
690	BDLT	N	4	3539	3542	Nursing home beds set up and staffed	D.1.b.	as16util1	Nursing home beds set up and staffed
691	ADMLT	N	6	3543	3548	Nursing home admissions	D.1.e.	as16util1	Nursing home admissions
692	IPDLT	N	8	3549	3556	Nursing home inpatient days	D.1.f.	as16util1	Nursing home inpatient days
693	MCRDC	Y	6	3557	3562	Total facility Medicare discharges	D.2.a1.	as16util1	Medicare discharges (total facility)
694	MCRIPD	Y	8	3563	3570	Total facility Medicare days	D.2.b1.	as16util1	Medicare inpatient days (total facility)
695	MCDDC	Y	6	3571	3576	Total facility Medicaid discharges	D.2.c1.	as16util1	Medicaid discharges (total facility)
696	MCDIPD	Y	8	3577	3584	Total facility Medicaid days	D.2.d1.	as16util1	Medicaid Inpatient days (total facility)
697	MCRDCH	N	6	3585	3590	Hospital unit Medicare discharges		as16util1	Calculated Field: Total facility Medicare discharges less nursing home unit Medicare discharges
698	MCRIPDH	N	8	3591	3598	Hospital unit Medicare days		as16util1	Calculated Field: Total facility Medicare days less nursing home unit Medicare days
699	MCDDCH	N	6	3599	3604	Hospital unit Medicaid discharges		as16util1	Calculated Field: Total facility Medicaid discharges less nursing home unit Medicaid discharges
700	MCDIPDH	N	8	3605	3612	Hospital unit Medicaid days		as16util1	Calculated Field: Total facility Medicaid days less nursing home unit Medicaid days
701	MCRDCLT	N	6	3613	3618	Nursing home Medicare discharges	D.2.a1.	as16util1	Medicare discharges (nursing home unit)
702	MCRIPDLT	N	8	3619	3626	Nursing home Medicare days	D.2.b1.	as16util1	Medicare inpatient days (nursing home unit)
703	MCDDCLT	N	6	3627	3632	Nursing home Medicaid discharges	D.2.c1.	as16util1	Medicaid discharges (nursing home unit)
704	MCDIPDLT	N	8	3633	3640	Nursing home Medicaid days	D.2.d1.	as16util1	Medicaid inpatient days (nursing home unit)
705	BASSIN	NA	4	3641	3644	Bassinets set up and staffed	D.1.c.	as16util1	Bassinets set up and staffed
706	BIRTHS	Y	6	3645	3650	Total births (excluding fetal deaths)	D.1.d.	as16util1	Births (exclude fetal deaths)
707	SUROPIP	Y	6	3651	3656	Inpatient surgical operations	D.1.i.	as16util1	Inpatient surgeries
708	SUROPOP	Y	6	3657	3662	Outpatient surgical operations	D.1.k.	as16util1	Outpatient surgeries
709	SUROPTOT	Y	6	3663	3668	Total surgical operations		as16util1	Calculated Field: Inpatient surgical operations + outpatient surgical operations
710	VEM	Y	8	3669	3676	Emergency department visits	D.1.g.	as16util1	Emergency department visits
711	VOTH	Y	8	3677	3684	Other outpatient visits		as16util1	Calculated Field: Total outpatient visits less emergency department visits
712	VTOT	Y	8	3685	3692	Total outpatient visits	D.1.h.	as16util1	Total outpatient visits

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
Note: Numbers in parentheses below indicate survey questionnaire columns									
713	FTMDTF	Y	5	3693	3697	Full-time physicians and dentists	D.10.a.(1)	as16util1	Full-time physicians and dentists
714	FTRES	Y	5	3698	3702	Full-time medical and dental residents and interns	D.10.c.(1)	as16util1	Full-time medical and dental residents/interns
715	FTTRAN84	Y	5	3703	3707	Full-time other trainees	D.10.d.(1)	as16util1	Full-time other trainees
716	FTRNTF	Y	5	3708	3712	Full-time registered nurses	D.10.e.(1)	as16util1	Full-time registered nurses
717	FTLPNTF	Y	5	3713	3717	Full-time licensed practical (vocational) nurses	D.10.f.(1)	as16util1	Full-time licensed practical (vocational) nurses
718	FTAST	Y	5	3718	3722	Full-time nursing assistive personnel	D.10.g.(1)	as16util1	Full-time nursing assistive personnel
719	FTRAD	Y	5	3723	3727	Full-time radiology technicians	D.10.h.(1)	as16util1	Full-time radiology technicians
720	FTLAB	Y	5	3728	3732	Full-time laboratory technicians	D.10.i.(1)	as16util1	Full-time laboratory technicians
721	FTPHR	Y	5	3733	3737	Full-time pharmacists, licensed	D.10.j.(1)	as16util1	Full-time pharmacists, licensed
722	FTPHT	Y	5	3738	3742	Full-time pharmacy technicians	D.10.k.(1)	as16util1	Full-time pharmacy technicians
723	FTRESP	Y	5	3743	3747	Full-time respiratory therapists	D.10.l.(1)	as16util1	Full-time respiratory therapists
724	FTOTHTF	Y	5	3748	3752	Full-time all other personnel	D.10.m.(1)	as16util1	Full-time all other personnel
725	FTTOT	Y	5	3753	3757	Full-time total personnel	D.10.n.(1)	as16util1	Full-time total facility personnel
726	PTMDTF	Y	5	3758	3762	Part-time physicians and dentists	D.10.a.(2)	as16util1	Part-time physicians and dentists
727	PTRES	Y	5	3763	3767	Part-time medical and dental residents and interns	D.10.c.(2)	as16util1	Part-time medical and dental residents/interns
728	PTTRAN84	Y	5	3768	3772	Part-time other trainees	D.10.d.(2)	as16util1	Part-time other trainees
729	PTRNTF	Y	5	3773	3777	Part-time registered nurses	D.10.e.(2)	as16util1	Part-time registered nurses
730	PTLPNTF	Y	5	3778	3782	Part-time licensed practical (vocational) nurses	D.10.f.(2)	as16util1	Part-time licensed practical (vocational) nurses
731	PTAST	Y	5	3783	3787	Part-time nursing assistive personnel	D.10.g.(2)	as16util1	Part-time nursing assistive personnel
732	PTRAD	Y	5	3788	3792	Part-time radiology technicians	D.10.h.(2)	as16util1	Part-time radiology technicians
733	PTLAB	Y	5	3793	3797	Part-time laboratory technicians	D.10.i.(2)	as16util1	Part-time laboratory technicians
734	PTPHR	Y	5	3798	3802	Part-time pharmacists, licensed	D.10.j.(2)	as16util1	Part-time pharmacists, licensed
735	PTPHT	Y	5	3803	3807	Part-time pharmacy technicians	D.10.k.(2)	as16util1	Part-time pharmacy technicians
736	PTRESP	Y	5	3808	3812	Part-time respiratory therapists	D.10.l.(2)	as16util1	Part-time respiratory therapists
737	PTOTHTF	Y	5	3813	3817	Part-time all other personnel	D.10.m.(2)	as16util1	Part-time all other personnel
738	PTTOT	Y	5	3818	3822	Part-time total personnel	D.10.n.(2)	as16util1	Part-time total facility personnel
739	FTTOTH	Y	5	3823	3827	Total full-time hospital unit personnel		as16util1	Calculated Field: Total full-time facility personnel less total full-time nursing home personnel
740	PTTOTH	Y	5	3828	3832	Total part-time hospital unit personnel		as16util1	Calculated Field: Total part-time facility personnel less total part-time nursing home personnel
741	**FTRNLT**	**N**	**5**	**3833**	**3837**	**Total full-time nursing home type unit/facility registered nurses**	**D.10.o.(1)**	**as16util1**	**Total full-time nursing home type unit/facility registered nurses**
742	**PTRNLT**	**N**	**5**	**3838**	**3842**	**Total part-time nursing home type unit/facility registered nurses**	**D.10.o.(2)**	**as16util1**	**Total part-time nursing home type unit/facility registered nurses**
743	FTTOTLT	Y	5	3843	3847	Total Full-time nursing home personnel	D.10.p.(1)	as16util1	Total full-time nursing home personnel

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
744	PTTOTLT	Y	5	3848	3852	Total Part-time nursing home personnel	D.10.p.(2)	as16util1	Total part-time nursing home personnel
745	FTED	N	8	3853	3860	Physicians and dentists FTE	D.10.a.(3)	as16util1	Physicians and dentists FTE (Reported)
746	FTER	N	8	3861	3868	Medical and dental residents FTE	D.10.c.(3)	as16util1	Medical and dental residents FTE (Reported)
747	FTET	N	8	3869	3876	Other trainees FTE	D.10.d.(3)	as16util1	Other trainees FTE (Reported)
748	FTEN	N	8	3877	3884	Registered nurses FTE	D.10.e.(3)	as16util1	Registered nurses FTE (Reported)
749	FTEP	N	8	3885	3892	Licensed practical (vocational) nurses FTE	D.10.f.(3)	as16util1	Licensed practical (vocational) nurses FTE (Reported)
750	FTEAP	N	8	3893	3900	Nursing assistive personnel FTE	D.10.g.(3)	as16util1	Nursing assistive personnel FTE (Reported)
751	FTERAD	N	8	3901	3908	Radiology technicians FTE	D.10.h.(3)	as16util1	Radiology technicians FTE (Reported)
752	FTELAB	N	8	3909	3916	Laboratory technicians FTE	D.10.i.(3)	as16util1	Laboratory technicians FTE (Reported)
753	FTEPH	N	8	3917	3924	Pharmacists, licensed FTE	D.10.j.(3)	as16util1	Pharmacists, licensed FTE (Reported)
754	FTEPHT	N	8	3925	3932	Pharmacy technicians FTE	D.10.k.(3)	as16util1	Pharmacy technicians FTE (Reported)
755	FTERESP	N	8	3933	3940	Respiratory therapists FTE	D.10.l.(3)	as16util1	Respiratory therapists FTE (Reported)
756	FTEO	N	8	3941	3948	All other personnel FTE	D.10.m.(3)	as16util1	All other personnel FTE (Reported)
757	FTETF	N	8	3949	3956	Total facility personnel FTE	D.10.n.(3)	as16util1	Total facility personnel FTE (Reported)
758	FTERNLT	N	8	3957	3964	Nursing home type unit/facility registered nurses FTE	D.10.o.(3)	as16util1	Nursing home registered nurses FTE (Reported)
759	FTEU	N	8	3965	3972	Nursing home personnel FTE	D.10.p.(3)	as16util1	Nursing home personnel FTE (Reported)
760	VMD	N	8	3973	3980	Physician and dentists- vacancies	D.10.a.(4)	as16util1	Physician and dentists - vacancies
761	VRES	N	8	3981	3988	Medical and dental residents/interns- vacancies	D.10.c.(4)	as16util1	Medical and dental residents/interns- vacancies
762	VTTRN	N	8	3989	3996	Other trainees - vacancies	D.10.d.(4)	as16util1	Other trainees - vacancies
763	VRN	N	8	3997	4004	Registered nurses - vacancies	D.10.e.(4)	as16util1	Registered nurses - vacancies
764	VLPN	N	8	4005	4012	Licensed practical (vocational) nurses - vacancies	D.10.f.(4)	as16util1	Licensed practical (vocational) nurses - vacancies
765	VAST	N	8	4013	4020	Nursing assistive personnel - vacancies	D.10.g.(4)	as16util1	Nursing assistive personnel - vacancies
766	VRAD	N	8	4021	4028	Radiology technicians - vacancies	D.10.h.(4)	as16util1	Radiology technicians - vacancies
767	VLAB	N	8	4029	4036	Laboratory technicians - vacancies	D.10.i.(4)	as16util1	Laboratory technicians - vacancies
768	VPHR	N	8	4037	4044	Pharmacists, licensed - vacancies	D.10.j.(4)	as16util1	Pharmacists, licensed - vacancies
769	VPHT	N	8	4045	4052	Pharmacy technicians - vacancies	D.10.k.(4)	as16util1	Pharmacy technicians - vacancies
770	VRSP	N	8	4053	4060	Respiratory therapists - vacancies	D.10.l.(4)	as16util1	Respiratory therapists - vacancies
771	VOTHL	N	8	4061	4068	All other personnel - vacancies	D.10.m.(4)	as16util1	All other personnel - vacancies
772	VTOTL	N	8	4069	4076	Total facility personnel - vacancies	D.10.n.(4)	as16util1	Total facility personnel - vacancies
773	VRNH	N	8	4077	4084	Nursing home type unit/facility registered nurses- vacancies	D.10.o.(4)	as16util1	Nursing home type unit/facility registered nurses- vacancies
774	VTNH	N	8	4085	4092	Total nursing home type unit/facility personnel - vacancies	D.10.p.(4)	as16util1	Total nursing home type unit/facility personnel - vacancies
775	ERNFTE	N	8	4093	4100	Number of direct patient care RN FTEs	D.10.q.	as16util1	Number of FTEs (among employed RNs) involved in direct patient care

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
776	ADC	NA	8	4101	4108	Average daily census		as16util1	Inpatient Days / Days Covered
777	ADJADM	NA	8	4109	4116	Adjusted admissions		as16util1	Admissions + (Admissions * (Outpatient Revenue/Inpatient Revenue))
778	ADJPD	NA	8	4117	4124	Adjusted patient days		as16util1	Inpatient Days + (Inpatient Days * (Outpatient Revenue/Inpatient Revenue))
779	ADJADC	NA	8	4125	4132	Adjusted average daily census		as16util1	Adjusted Inpatient Days/Number of Days in Reporting Period
780	**ADJPDH**	**NA**	**8**	**4133**	**4140**	**Adjusted patient days hospital unit**		**as16util1**	**Inpatient days hospital + (Inpatient days hospital* (Outpatient Revenue/Inpatient Revenue))**
781	**ADJADCH**	**NA**	**8**	**4141**	**4148**	**Adjusted average daily census hospital unit**		**as16util1**	**Adjusted Inpatient Days Hospital Unit/Number of Days in Reporting Period**
782	**FTERNH**	**NA**	**8**	**4149**	**4156**	**Registered nurses FTE hospital unit**		**as16util1**	**Calculated Field: Total facility RN FTE less nursing home unit RN FTE**
783	FTEMD	NA	8	4157	4164	Full time equivalent physicians and dentists		as16util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
784	FTERN	NA	8	4165	4172	Full time equivalent registered nurses		as16util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
785	FTELPN	NA	8	4173	4180	Full time equivalent licensed practical or vocational nurses		as16util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
786	FTERES	NA	8	4181	4188	Full time equivalent medical and dental residents and interns		as16util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
787	FTETRAN	NA	8	4189	4196	Full time equivalent other trainees		as16util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
788	FTETTRN	NA	8	4197	4204	Full time equivalent total trainees		as16util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
789	FTEOTH94	NA	8	4205	4212	Full time equivalent all other personnel		as16util1	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
790	FTEH	NA	8	4213	4220	Full time equivalent hospital unit total personnel		as16util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
791	FTENH	NA	8	4221	4228	Full time equivalent nursing home total personnel		as16util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
792	FTE	NA	8	4229	4236	Full time equivalent total personnel		as16util1	Excludes medical and dental residents, interns and other trainees
793	OPRA	N	4	4237	4240	Number of operating rooms	D.1.j.	as16util1	Number of operating rooms
794	EADMTOT	NA	1	4241	4241	(Estimation Flag) Admissions		as16util1	0=reported, 1=estimated, 2=expanded
795	EIPDTOT	NA	1	4242	4242	(Estimation Flag) Inpatient Days		as16util1	0=reported, 1=estimated, 2=expanded
796	EADMH	NA	1	4243	4243	(Estimation Flag) Hospital Unit Admissions		as16util1	0=reported, 1=estimated, 2=expanded
797	EIPDH	NA	1	4244	4244	(Estimation Flag) Hospital Unit Inpatient Days		as16util1	0=reported, 1=estimated, 2=expanded
798	EADMLT	NA	1	4245	4245	(Estimation Flag) Nursing Home Unit Admissions		as16util1	0=reported, 1=estimated, 2=expanded
799	EIPDLT	NA	1	4246	4246	(Estimation Flag) Nursing Home Unit Inpatient Days		as16util1	0=reported, 1=estimated, 2=expanded
800	EMCRDC	NA	1	4247	4247	(Estimation Flag) Medicare Inpatient Discharges		as16util1	0=reported, 1=estimated, 2=expanded
801	EMCRIPD	NA	1	4248	4248	(Estimation Flag) Medicare Inpatient Days		as16util1	0=reported, 1=estimated, 2=expanded
802	EMCDDC	NA	1	4249	4249	(Estimation Flag) Medicaid Inpatient Discharges		as16util1	0=reported, 1=estimated, 2=expanded
803	EMCDIPD	NA	1	4250	4250	(Estimation Flag) Medicaid Inpatient Days		as16util1	0=reported, 1=estimated, 2=expanded
804	EMCRDCH	NA	1	4251	4251	(Estimation Flag) Hospital Unit Medicare Inpatient Discharges		as16util1	0=reported, 1=estimated, 2=expanded
805	EMCRIPDH	NA	1	4252	4252	(Estimation Flag) Hospital Unit Medicare Inpatient Days		as16util1	0=reported, 1=estimated, 2=expanded
806	EMCDDCH	NA	1	4253	4253	(Estimation Flag) Hospital Unit Medicaid Inpatient Discharges		as16util1	0=reported, 1=estimated, 2=expanded
807	EMCDIPDH	NA	1	4254	4254	(Estimation Flag) Hospital Unit Medicaid Inpatient Days		as16util1	0=reported, 1=estimated, 2=expanded
808	EMCRDCLT	NA	1	4255	4255	(Estimation Flag) Nursing Home Unit Medicare Inpatient Discharges		as16util1	0=reported, 1=estimated, 2=expanded
809	EMCRPDLT	NA	1	4256	4256	(Estimation Flag) Nursing Home Unit Medicare Inpatient Days		as16util1	0=reported, 1=estimated, 2=expanded
810	EMCDDCLT	NA	1	4257	4257	(Estimation Flag) Nursing Home Unit Medicaid Inpatient Discharges		as16util1	0=reported, 1=estimated, 2=expanded

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
811	EMCDPDLT	NA	1	4258	4258	(Estimation Flag) Nursing Home Unit Medicaid Inpatient Days		as16util1	0=reported, 1=estimated, 2=expanded
812	EBIRTHS	NA	1	4259	4259	(Estimation Flag) Births		as16util1	0=reported, 1=estimated, 2=expanded
813	ESUROPIP	NA	1	4260	4260	(Estimation Flag) Surgical Operations Inpatient		as16util1	0=reported, 1=estimated, 2=expanded
814	ESUROPOP	NA	1	4261	4261	(Estimation Flag) Surgical Operations Outpatient		as16util1	0=reported, 1=estimated, 2=expanded
815	ESUROPTO	NA	1	4262	4262	(Estimation Flag) Surgical Operations Total		as16util1	0=reported, 1=estimated, 2=expanded
816	EVEM	NA	1	4263	4263	(Estimation Flag) Outpatient Visits Emergency		as16util1	0=reported, 1=estimated, 2=expanded
817	EVOTH	NA	1	4264	4264	(Estimation Flag) Outpatient Visits Other		as16util1	0=reported, 1=estimated, 2=expanded
818	EVTOT	NA	1	4265	4265	(Estimation Flag) Outpatient Visits Total		as16util1	0=reported, 1=estimated, 2=expanded
819	EPAYTOT	NA	1	4266	4266	(Estimation Flag) Total Payroll Expenses		as16util1	0=reported, 1=estimated, 2=expanded
820	ENPAYBEN	NA	1	4267	4267	(Estimation Flag) Employee Benefits		as16util1	0=reported, 1=estimated, 2=expanded
821	EPAYTOTH	NA	1	4268	4268	(Estimation Flag) Hospital Unit Total Payroll Expenses		as16util1	0=reported, 1=estimated, 2=expanded
822	ENPYBENH	NA	1	4269	4269	(Estimation Flag) Hospital Unit Employee Benefits		as16util1	0=reported, 1=estimated, 2=expanded
823	EPYTOTLT	NA	1	4270	4270	(Estimation Flag) Nursing Home Unit Total Payroll Expenses		as16util1	0=reported, 1=estimated, 2=expanded
824	ENPBENLT	NA	1	4271	4271	(Estimation Flag) Nursing Home Unit Employee Benefits		as16util1	0=reported, 1=estimated, 2=expanded
825	EFTMDTF	NA	1	4272	4272	(Estimation Flag) Full Time Physicians and Dentists		as16util1	0=reported, 1=estimated, 2=expanded
826	EFTRES	NA	1	4273	4273	(Estimation Flag) Full Time Medical and Dental Residents		as16util1	0=reported, 1=estimated, 2=expanded
827	EFTTRN84	NA	1	4274	4274	(Estimation Flag) Full Time Other Trainees		as16util1	0=reported, 1=estimated, 2=expanded
828	EFTRNTF	NA	1	4275	4275	(Estimation Flag) Full Time Registered Nurses		as16util1	0=reported, 1=estimated, 2=expanded
829	EFTLPNTF	NA	1	4276	4276	(Estimation Flag) Full Time Licensed Practical or Vocational Nurses		as16util1	0=reported, 1=estimated, 2=expanded
830	EFTAST	NA	1	4277	4277	(Estimation Flag) Full Time Nursing assistive personnel		as16util1	0=reported, 1=estimated, 2=expanded
831	EFTRAD	NA	1	4278	4278	(Estimation Flag) Full Time Radiology technicians		as16util1	0=reported, 1=estimated, 2=expanded
832	EFTLAB	NA	1	4279	4279	(Estimation Flag) Full Time Laboratory technicians		as16util1	0=reported, 1=estimated, 2=expanded

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
833	EFTPHR	NA	1	4280	4280	(Estimation Flag) Full Time Pharmacists, licensed		as16util1	0=reported, 1=estimated, 2=expanded
834	EFTPHT	NA	1	4281	4281	(Estimation Flag) Full Time Pharmacy technicians		as16util1	0=reported, 1=estimated, 2=expanded
835	EFTRESP	NA	1	4282	4282	(Estimation Flag) Full Time Respiratory therapists		as16util1	0=reported, 1=estimated, 2=expanded
836	EFTOTHTF	NA	1	4283	4283	(Estimation Flag) Full Time All Other Personnel		as16util1	0=reported, 1=estimated, 2=expanded
837	EFTTOT	NA	1	4284	4284	(Estimation Flag) Full Time Total Personnel		as16util1	0=reported, 1=estimated, 2=expanded
838	EPTMDTF	NA	1	4285	4285	(Estimation Flag) Part Time Physicians and Dentists		as16util1	0=reported, 1=estimated, 2=expanded
839	EPTRES	NA	1	4286	4286	(Estimation Flag) Part Time Medical and Dental Residents		as16util1	0=reported, 1=estimated, 2=expanded
840	EPTTRN84	NA	1	4287	4287	(Estimation Flag) Part Time Other Trainees		as16util1	0=reported, 1=estimated, 2=expanded
841	EPTRNTF	NA	1	4288	4288	(Estimation Flag) Part Time Registered Nurses		as16util1	0=reported, 1=estimated, 2=expanded
842	EPTLPNTF	NA	1	4289	4289	(Estimation Flag) Part Time Licensed Practical or Vocational Nurses		as16util1	0=reported, 1=estimated, 2=expanded
843	EPTAST	NA	1	4290	4290	(Estimation Flag) Part Time Nursing assistive personnel		as16util1	0=reported, 1=estimated, 2=expanded
844	EPTRAD	NA	1	4291	4291	(Estimation Flag) Part Time Radiology technicians		as16util1	0=reported, 1=estimated, 2=expanded
845	EPTLAB	NA	1	4292	4292	(Estimation Flag) Part Time Laboratory technicians		as16util1	0=reported, 1=estimated, 2=expanded
846	EPTPHR	NA	1	4293	4293	(Estimation Flag) Part Time Pharmacists, licensed		as16util1	0=reported, 1=estimated, 2=expanded
847	EPTPHT	NA	1	4294	4294	(Estimation Flag) Part Time Pharmacy technicians		as16util1	0=reported, 1=estimated, 2=expanded
848	EPTRESP	NA	1	4295	4295	(Estimation Flag) Part Time Respiratory therapists		as16util1	0=reported, 1=estimated, 2=expanded
849	EPTOTHTF	NA	1	4296	4296	(Estimation Flag) Part Time All Other Personnel		as16util1	0=reported, 1=estimated, 2=expanded
850	EPTTOT	NA	1	4297	4297	(Estimation Flag) Part Time Total Personnel		as16util1	0=reported, 1=estimated, 2=expanded
851	EFTTOTH	NA	1	4298	4298	(Estimation Flag) Hospital Unit Total Full Time		as16util1	0=reported, 1=estimated, 2=expanded
852	EPTTOTH	NA	1	4299	4299	(Estimation Flag) Hospital Unit Total Part Time		as16util1	0=reported, 1=estimated, 2=expanded
853	EFTTOTLT	NA	1	4300	4300	(Estimation Flag) Nursing Home Unit Total Full Time		as16util1	0=reported, 1=estimated, 2=expanded

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
854	EPTTOTLT	NA	1	4301	4301	(Estimation Flag) Nursing Home Unit Total Part Time		as16util1	0=reported, 1=estimated, 2=expanded
855	EEXPTOT	NA	1	4302	4302	(Estimation Flag) Total Expenses		as16util1	0=reported, 1=estimated, 2=expanded
856	EXPTHB	NA	1	4303	4303	(Estimation Flag) Hospital total expenses, excluding bad debt		as16util1	0=reported, 1=estimated, 2=expanded
857	EXPTLB	NA	1	4304	4304	(Estimation Flag) Nursing home expenses, excluding bad debt		as16util1	0=reported, 1=estimated, 2=expanded
858	TECAR	N	8	4305	4312	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total employed	D.11.a.1.	as16util2	Number of physicians with privileges
859	TEMER	N	8	4313	4320	Emergency medicine - total employed	D.11.b.1.	as16util2	Number of physicians with privileges
860	TEHSP	N	8	4321	4328	Hospitalist - total employed	D.11.c.1.	as16util2	Number of physicians with privileges
861	TEINT	N	8	4329	4336	Intensivist - total employed	D.11.d.1.	as16util2	Number of physicians with privileges
862	TEGST	N	8	4337	4344	Radiologist/pathologist/anesthesiologist - total employed	D.11.e.1.	as16util2	Number of physicians with privileges
863	TEOTH	N	8	4345	4352	Other specialists - total employed	D.11.f.1.	as16util2	Number of physicians with privileges
864	TETOT	N	8	4353	4360	Total - Total Employed	D.11.g.1.	as16util2	Number of physicians with privileges
865	TCCAR	N	8	4361	4368	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total individual contract	D.11.a.2.	as16util2	Number of physicians with privileges
866	TCMER	N	8	4369	4376	Emergency medicine - total individual contract	D.11.b.2.	as16util2	Number of physicians with privileges
867	TCHSP	N	8	4377	4384	Hospitalist - total individual contract	D.11.c.2.	as16util2	Number of physicians with privileges
868	TCINT	N	8	4385	4392	Intensivist - total individual contract	D.11.d.2.	as16util2	Number of physicians with privileges
869	TCGST	N	8	4393	4400	Radiologist/pathologist/anesthesiologist - total individual contract	D.11.e.2.	as16util2	Number of physicians with privileges
870	TCOTH	N	8	4401	4408	Other specialist - total individual contract	D.11.f.2.	as16util2	Number of physicians with privileges
871	TCTOT	N	8	4409	4416	Total - individual contract	D.11.g.2.	as16util2	Number of physicians with privileges
872	TGCAR	N	8	4417	4424	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total group contract	D.11.a.3.	as16util2	Number of physicians with privileges
873	TGMER	N	8	4425	4432	Emergency medicine - total group contract	D.11.b.3.	as16util2	Number of physicians with privileges
874	TGHSP	N	8	4433	4440	Hospitalist - total group contract	D.11.c.3.	as16util2	Number of physicians with privileges
875	TGINT	N	8	4441	4448	Intensivist - total group contract	D.11.d.3.	as16util2	Number of physicians with privileges

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
876	TGGST	N	8	4449	4456	Radiologist/pathologist/anesthesiologist - total group contract	D.11.e.3.	as16util2	Number of physicians with privileges
877	TGOTH	N	8	4457	4464	Other specialist - total group contract	D.11.f.3.	as16util2	Number of physicians with privileges
878	TGTOT	N	8	4465	4472	Total - total group contract	D.11.g.3.	as16util2	Number of physicians with privileges
879	NECAR	N	8	4473	4480	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - not employed or under contract	D.11.a.4.	as16util2	Number of physicians with privileges
880	NEMER	N	8	4481	4488	Emergency medicine - not employed or under contract	D.11.b.4.	as16util2	Number of physicians with privileges
881	NEHSP	N	8	4489	4496	Hospitalist - not employed or under contract	D.11.c.4.	as16util2	Number of physicians with privileges
882	NEINT	N	8	4497	4504	Intensivist - not employed or under contract	D.11.d.4.	as16util2	Number of physicians with privileges
883	NEGST	N	8	4505	4512	Radiologist/pathologist/anesthesiologist - not employed or under contract	D.11.e.4.	as16util2	Number of physicians with privileges
884	NEOTH	N	8	4513	4520	Other specialist - not employed or under contract	D.11.f.4.	as16util2	Number of physicians with privileges
885	NETOT	N	8	4521	4528	Total - not employed or under contract	D.11.g.4.	as16util2	Number of physicians with privileges
886	TPCAR	N	8	4529	4536	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total privileged	D.11.a.5.	as16util2	Number of physicians with privileges
887	TPMER	N	8	4537	4544	Emergency medicine - total privileged	D.11.b.5.	as16util2	Number of physicians with privileges
888	TPHSP	N	8	4545	4552	Hospitalist - total privileged	D.11.c.5.	as16util2	Number of physicians with privileges
889	TPINT	N	8	4553	4560	Intensivist - total privileged	D.11.d.5.	as16util2	Number of physicians with privileges
890	TPGST	N	8	4561	4568	Radiologist/pathologist/anesthesiologist - total privileged	D.11.e.5.	as16util2	Number of physicians with privileges
891	TPOTH	N	8	4569	4576	Other specialist - total privileged	D.11.f.5.	as16util2	Number of physicians with privileges
892	TPRTOT	N	8	4577	4584	Total - total privileged	D.11.g.5.	as16util2	Number of physicians with privileges
893	HSPTL	N	1	4585	4585	Hospitalists provide care	D.12.a.	as16util2	1 = yes, 0 = no
894	FTEHSP	N	8	4586	4593	Hospitalists FTE	D.12.b.	as16util2	Hospitalists FTE
895	INTCAR	N	1	4594	4594	Intensivists provide care	D.13.a.	as16util2	1 = yes, 0 = no
896	FTEMSI	N	8	4595	4602	Intensivists FTE Medical-surgical intensive care	D.13.b.1.	as16util2	Intensivists FTE Medical-surgical intensive care
897	FTECIC	N	8	4603	4610	Intensivists FTE Cardiac intensive care	D.13.b.2.	as16util2	Intensivists FTE Cardiac intensive care
898	FTENIC	N	8	4611	4618	Intensivists FTE Neonatal intensive care	D.13.b.3.	as16util2	Intensivists FTE Neonatal intensive care
899	FTEPIC	N	8	4619	4626	Intensivists FTE Pediatric intensive care	D.13.b.4.	as16util2	Intensivists FTE Pediatric intensive care

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
900	FTEOIC	N	8	4627	4634	Intensivists FTE Other intensive care	D.13.b.5.	as16util2	Intensivists FTE Other intensive care
901	FTEINT	N	8	4635	4642	Intensivists FTE Total	D.13.b.6.	as16util2	Intensivists FTE Total
902	CLSMSI	N	1	4643	4643	Closed medical surgical intensive care	D.13.b.1.	as16util2	1 = yes
903	CLSCIC	N	1	4644	4644	Closed cardiac intensive care	D.13.b.2.	as16util2	1 = yes
904	CLSNIC	N	1	4645	4645	Closed neonatal intensive care	D.13.b.3.	as16util2	1 = yes
905	CLSPIC	N	1	4646	4646	Closed pediatric intensive care	D.13.b.4.	as16util2	1 = yes
906	CLSOIC	N	1	4647	4647	Closed other intensive care	D.13.b.5.	as16util2	1 = yes
907	APRN	N	1	4648	4648	Do Advanced practice nurses/PA's provide care for patients in your hospital?	D.14.a.	as16util2	1 = yes, 0 = no
908	FTAPRN	N	8	4649	4656	Full-time advanced practice nurses	D.14.b.	as16util2	Number of full-time advanced practice nurses
909	PTAPRN	N	8	4657	4664	Part-time advanced practice nurses	D.14.b.	as16util2	Number of part-time advanced practice nurses
910	FTEAPN	N	8	4665	4672	FTE Advanced practice nurses	D.14.b.	as16util2	Number of advanced practice nurse FTEs
911	FTPHRN	N	8	4673	4680	Full-time physician assistants	D.14.b.	as16util2	Number of full-time physician assistants
912	PTPHRN	N	8	4681	4688	Part-time physician assistants	D.14.b.	as16util2	Number of part-time physician assistants
913	FTEPHRN	N	8	4689	4696	FTE Physician assistants	D.14.b.	as16util2	Number of physician assistant FTEs
914	APCAR	N	1	4697	4697	Primary care advanced practice nurses/PA's	D.14.c.	as16util2	1 = yes, 0 = no
915	APANES	N	1	4698	4698	Anesthesia services advanced practice nurses/PA's	D.14.c.	as16util2	1 = yes, 0 = no
916	APEMER	N	1	4699	4699	Emergency department care advanced practice nurses/PA's	D.14.c.	as16util2	1 = yes, 0 = no
917	APSPC	N	1	4700	4700	Other specialty care advanced practice nurses/PA's	D.14.c.	as16util2	1 = yes, 0 = no
918	APED	N	1	4701	4701	Patient education advanced practice nurses/PA's	D.14.c.	as16util2	1 = yes, 0 = no
919	APCASE	N	1	4702	4702	Case management advanced practice nurses/PA's	D.14.c.	as16util2	1 = yes, 0 = no
920	APOTH	N	1	4703	4703	Other advanced practice nurses/PA's		as16util2	1 = yes, 0 = no
921	FORNRSA	N	1	4704	4704	Did your facility hire more foreign-educated nurses to help fill RN vacancies in 2016 vs. 2015?	D.15.a.	as16util2	0=did not hire, 1=more, 2=less, 3=same
922	AFRICA	N	1	4705	4705	From which countries/continents are you recruiting foreign-educated nurses? Africa	D.15.b.	as16util2	1 = yes, 0 = no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
923	KOREA	N	1	4706	4706	From which countries/continents are you recruiting foreign-educated nurses? South Korea	D.15.b.	as16util2	1 = yes, 0 = no
924	CANADA	N	1	4707	4707	From which countries/continents are you recruiting foreign-educated nurses? Canada	D.15.b.	as16util2	1 = yes, 0 = no
925	PH	N	1	4708	4708	From which countries/continents are you recruiting foreign-educated nurses? Philippines	D.15.b.	as16util2	1 = yes, 0 = no
926	CHINA	N	1	4709	4709	From which countries/continents are you recruiting foreign-educated nurses? China	D.15.b.	as16util2	1 = yes, 0 = no
927	INDIA	N	1	4710	4710	From which countries/continents are you recruiting foreign-educated nurses? India	D.15.b.	as16util2	1 = yes, 0 = no
928	OFRNRS	N	1	4711	4711	From which countries/continents are you recruiting foreign-educated nurses? Other	D.15.b.	as16util2	1 = yes, 0 = no
929	RNSCH	N	10	4712	4721	If your hospital hired RNs during the reporting period, how many were new graduates from nursing schools?	E.4.	as16util2	Number of new graduate RNs
930	PLNTA	N	10	4722	4731	Property, plant and equipment at cost	D.7.a.	as16util2	Property, plant and equipment at cost
931	ADEPRA	N	10	4732	4741	Accumulated depreciation	D.7.b.	as16util2	Accumulated depreciation
932	ASSNET	N	10	4742	4751	Net property, plant and equipment	D.7.c.	as16util2	Net property, plant and equipment
933	GFEET	N	10	4752	4761	Total gross square feet of your physical plant	D.7.d.	as16util2	Total gross square feet
934	CEAMT	N	10	4762	4771	Total capital expenses	D.8.	as16util2	Total capital expenses
935	ENDMARK	N	1	4772	4772	End of Survey			

Appendix A - Control Code Descriptions

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

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
CENSUS DIVISION 1: NEW ENGLAND	
11	Maine
12	New Hampshire
13	Vermont
14	Massachusetts
15	Rhode Island
16	Connecticut
CENSUS DIVISION 2: MID ATLANTIC	
21	New York
22	New Jersey
23	Pennsylvania
CENSUS DIVISION 3: SOUTH ATLANTIC	
31	Delaware
32	Maryland
33	District of Columbia
34	Virginia
35	West Virginia
36	North Carolina
37	South Carolina
38	Georgia
39	Florida

State Code	Description
CENSUS DIVISION 4: EAST NORTH CENTRAL	
41	Ohio
42	Indiana
43	Illinois
44	Michigan
45	Wisconsin
CENSUS DIVISION 5: EAST SOUTH CENTRAL	
51	Kentucky
52	Tennessee
53	Alabama
54	Mississippi
CENSUS DIVISION 6: WEST NORTH CENTRAL	
61	Minnesota
62	Iowa
63	Missouri
64	North Dakota
65	South Dakota
66	Nebraska
67	Kansas

State Code	Description
CENSUS DIVISION 7: WEST SOUTH CENTRAL	
71	Arkansas
72	Louisiana
73	Oklahoma
74	Texas
CENSUS DIVISION 8: MOUNTAIN	
81	Montana
82	Idaho
83	Wyoming
84	Colorado
85	New Mexico
86	Arizona
87	Utah
88	Nevada
CENSUS DIVISON 9: PACIFIC	
91	Washington
92	Oregon
93	California
94	Alaska
95	Hawaii
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	Mesa	AZ	70	Newark	NJ
3	Chicago	IL	37	Kansas City	MO	71	Lincoln	NE
4	Houston	TX	38	Atlanta	GA	72	Toledo	OH
5	Phoenix	AZ	39	Long Beach	CA	73	Orlando	FL
6	Philadelphia	PA	40	Colorado Springs	CO	74	Chula Vista	CA
7	San Antonio	TX	41	Raleigh	NC	75	Irvine	CA
8	San Diego	CA	42	Miami	FL	76	Fort Wayne	IN
9	Dallas	TX	43	Virginia Beach	VA	77	Jersey City	NJ
10	San Jose	CA	44	Omaha	NE	78	Durham	NC
11	Austin	TX	45	Oakland	CA	79	Saint Petersburg	FL
12	Jacksonville	FL	46	Minneapolis	MN	80	Laredo	TX
13	San Francisco	CA	47	Tulsa	OK	81	Buffalo	NY
14	Columbus	OH	48	Arlington	TX	82	Madison	WI
15	Indianapolis	IN	49	New Orleans	LA	83	Lubbock	TX
16	Fort Worth	TX	50	Wichita	KS	84	Chandler	AZ
17	Charlotte	NC	51	Cleveland	OH	85	Scottsdale	AZ
18	Seattle	WA	52	Tampa	FL	86	Glendale	AZ
19	Denver	CO	53	Bakersfield	CA	87	Reno	NV
20	El Paso	TX	54	Aurora	CO	88	Norfolk	VA
21	Washington	DC	55	Honolulu	HI	89	Winston-Salem	NC
22	Boston	MA	56	Anaheim	CA	90	North Las Vegas	NV
23	Detroit	MI	57	Santa Ana	CA	91	Irving	TX
24	Nashville	TN	58	Corpus Christi	TX	92	Chesapeake	VA
25	Memphis	TN	59	Riverside	CA	93	Gilbert	AZ
26	Portland	OR	60	Lexington	KY	94	Hileah	FL
27	Oklahoma City	OK	61	St. Louis	MO	95	Garland	TX
28	Las Vegas	NV	62	Stockton	CA	96	Fremont	CA
29	Louisville	KY	63	Pittsburgh	PA	97	Baton Rouge	LA
30	Baltimore	MD	64	Saint Paul	MN	98	Richmond	VA
31	Milwaukee	WI	65	Cincinnati	OH	99	Boise	ID
32	Albuquerque	NM	66	Anchorage	AK	100	San Bernardino	CA
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 2016 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
2015 VS 2016 AHA ANNUAL SURVEY DATA

CLASSIFICATION	TOTAL	UNITED STATES	ASSOCIATED AREAS
2015 TOTAL	**5,629**	**5,564**	**65**
DELETIONS			
Status changed from registered to non-registered	1	1	0
Changed to inpatient care other than a hospital	1	1	0
Changed to an outpatient facility	5	5	0
Closed	19	16	3
Demerged/Dissolution			
Duplicate record			
Merged to form a new hospital			
Merged into a hospital already on file	10	10	0
Temporarily inactive record/Under construction			
TOTAL DELETIONS	**36**	**33**	**3**
ADDITIONS			
Status changed from non-registered to registered	3	3	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
	0	0	0
TOTAL ADDITIONS	**3**	**3**	**0**
2016 TOTAL	**5,596**	**5,534**	**62**

2015 VS 2016 REGISTERED DELETIONS

The following records have been deleted from the 2016 Annual Survey file of registered hospitals.

ID	NAME	CITY	STATE	REASON FOR DELETION & MERGER INFORMATION - PARENT ORGANIZATION
6040040	Lafayette Hospital	Arroyo	PR	Closed
6040135	Hospital Santa Rosa	Guayama	PR	Closed
6040240	Hospital Oncologico Andres Grillasca	Ponce	PR	Closed
6120155	Crotched Mountain Rehabilitation Center	Greenfield	NH	Closed
6142100	Baystate Mary Lane Hospital	Ware	MA	Not operating as a hospital - Urgent Care Center
6142240	Westwood Lodge Hospital	Westwood	MA	Closed
6214640	Southampton Hospital	Southampton	NY	Merged into 6214775 Stony Brook University Hospital - Stony Brook, NY
6231620	Palmerton Hospital	Palmerton	PA	Merged into 6231205 Blue Mountain Hospital - Lehighton, PA
6232585	LifeCare Hospitals of Pittsburgh - Monroeville	Monroeville	PA	Closed
6360028	Select Specialty Hospital-Winston-Salem	Winston-Salem	NC	Closed
6420037	Select Specialty Hospital-Fort Wayne	Fort Wayne	IN	Closed
6442070	Borgess-Pipp Hospital	Plainwell	MI	Merged into 6440017 Borgess Medical Center - Kalamazoo, MI
6520008	TriStar Skyline Madison Campus	Madison	TN	Merged into 6521020 TriStar Skyline Medical Center - Nashville, TN
6540480	Quitman County Hospital	Marks	MS	Closed
6540610	Natchez Community Hospital	Natchez	MS	Closed
6610523	Unity Hospital	Fridley	MN	Merged into 6610085 Mercy Hospital - Coon Rapids, MN
6611725	Community Behavioral Health Hospital - St. Peter	Saint Peter	MN	Closed
6620126	Mercy Medical Center - West Lakes	West Des Moines	IA	Merged into 6620003 Mercy Medical Center-Des Moines - Des Moines, IA
6630017	Kindred Hospital-St. Louis at Mercy	Saint Louis	MO	Closed
6630018	Ozarks Community Hospital	Springfield	MO	Not operating as a hospital - Ambulatory Care Center
6630360	Crittenton Children's Center	Kansas City	MO	Merged into 6630470 Saint Luke's Hospital of Kansas City - Kansas City, MO
6720132	AMG Specialty Hospital - Covington	Covington	LA	Closed
6720180	Lakeview Regional Medical Center	Covington	LA	Merged into 6720032 Tulane Medical Center - New Orleans, LA
6730003	Muscogee Creek Nation Physical Rehabilitation Center	Okmulgee	OK	Not operating as a hospital - Rehabilitation Center
6730410	Reynolds Army Community Hospital	Fort Sill	OK	Not operating as a hospital - Ambulatory Care Center
6740159	Kindred Hospital-Bay Area	Pasadena	TX	Merged into 6740074 Kindred Hospital-Houston Northwest - Houston, TX
6740203	CHRISTUS Dubuis Hospital of Port Arthur	Port Arthur	TX	Merged into 6740198 CHRISTUS Dubuis Hospital of Beaumont - Beaumont, TX
6740339	University General Hospital	Houston	TX	Closed
6742040	University of Texas Harris County Psychiatric Center	Houston	TX	Status changed to nonregistered
6743725	Gulf Coast Medical Center	Wharton	TX	Closed
6840027	Kindred Hospital Colorado Springs	Colorado Springs	CO	Closed
6840031	Select Specialty Hospital-Denver	Denver	CO	Closed
6860048	Select Specialty Hospital-Scottsdale	Scottsdale	AZ	Closed
6911180	Jonathan M. Wainwright Memorial Veterans Affairs Medical Center	Walla Walla	WA	Not operating as a hospital - Ambulatory Care Center
6911190	Walla Walla General Hospital	Walla Walla	WA	Closed
6931743	Shriners Hospitals for Children-Los Angeles	Los Angeles	CA	Not operating as a hospital - Ambulatory Care Center

2015 VS 2016 REGISTERED ADDITIONS

The following records have been added to the 2016 Annual Survey file of <u>registered</u> hospitals.

6740554	HEALTHSOUTH Rehabilitation Hospital - Abilene	Abilene	TX	Previously non registered
6741011	Select Specialty Hospital - Dallas Garland	Garland	TX	Previously non registered
6741028	Pearland Medical Center	Pearland	TX	Previously non registered

SUMMARY OF NON REGISTERED HOSPITALS
2015 VS 2016 AHA ANNUAL SURVEY DATA

CLASSIFICATION	TOTAL	UNITED STATES	ASSOCIATED AREAS
2015 TOTAL	**622**	**616**	**6**
DELETIONS			
Status changed from non-registered to registered	3	3	0
Changed to inpatient care other than a hospital	0	0	0
Changed to an outpatient facility	0	0	0
Closed	11	11	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	4	4	0
Temporarily inactive record	1	1	0
TOTAL DELETIONS	**19**	**19**	**0**
ADDITIONS			
Status changed from registered to non-registered	1	1	0
Demerger result	0	0	0
Merger result	0	0	0
Newly added to the non-registered file	39	36	3
Previously closed/reopened	0	0	0
Duplicate record	0	0	0
TOTAL ADDITIONS	**40**	**37**	**3**
2016 TOTAL	**643**	**634**	**9**

2015 VS 2016 NONREGISTERED DELETIONS

The following hospitals have been deleted from the 2016 Annual Survey file of nonregistered hospitals

ID	NAME	CITY	STATE	REASON FOR DELETION & MERGER INFORMATION - PARENT HOSPITAL
6420073	Doctors NeuroMedical Hospital	Bremen	IN	Closed
6521093	Pioneer Community Hospital of Scott	Oneida	TN	Closed
6720095	AMG Specialty Hospital-Feliciana	Clinton	LA	Closed
6720114	Louisiana Heart Hospital	Lacombe	LA	Closed
6720195	Westend Hospital	Jennings	LA	Closed
6720391	Allegiance Health Center of Ruston	Ruston	LA	Merged into 6729132 Allegiance Behavioral Health Centers of Monroe - West Monroe, LA
6730052	Lane Frost Health and Rehabilitation Center	Hugo	OK	Closed
6740067	Select Specialty Hospital-Houston West	Houston	TX	Closed
6740133	Physicians Surgical Hospital - Panhandle Campus	Amarillo	TX	Merged into 6740300 Physicians Surgical Hospital - Quail Creek - Amarillo, TX
6740266	Northwest Texas Surgery Center	Amarillo	TX	Merged into 6740065 Northwest Texas Healthcare System - Amarillo, TX
6740287	Harbor Hospital of Southeast Texas	Beaumont	TX	Temporarily Closed
6740321	Memorial Hermann Orthopedic and Spine Hospital	Bellaire	TX	Merged into 6741890 Memorial Hermann - Texas Medical Center - Houston, TX
6740554	HEALTHSOUTH Rehabilitation Hospital - Abilene	Abilene	TX	Status changed to registered
6740659	Texas Specialty Hospital at Lubbock	Lubbock	TX	Closed
6741011	Select Specialty Hospital - Dallas Garland	Garland	TX	Status changed to registered
6741028	Pearland Medical Center	Pearland	TX	Status changed to registered
6860057	Restora Hospital of Mesa	Mesa	AZ	Closed
6860058	Restora Hospital of Sun City	Sun City	AZ	Closed
6930111	Gardens Regional Hospital and Medical Center	Hawaiian Gardens	CA	Closed

2015 VS 2016 NONREGISTERED ADDITIONS

The following hospitals have been added to the 2016 Annual Survey file of nonregistered hospitals

ID	NAME	CITY	STATE	REASON FOR ADDITION
6040349	INSPIRA Ponce	Ponce	PR	Newly Added
6040382	Metropolitano De La Montana	Utuado	PR	Newly Added
6060346	Guam Regional Medical City	Dededo	GU	Newly Added
6360449	Hoke Hospital	Raeford	NC	Newly Added
6389230	Rehabilitation Hospital of Savannah	Savannah	GA	Newly Added
6410563	UH Avon Rehabilitation Hospital	Avon	OH	Newly Added
6410566	Cleveland Clinic Avon Hospital	Avon	OH	Newly Added
6430474	Memorial Hospital East	Shiloh	IL	Newly Added
6450501	UW Health Rehabilitation Hospital	Madison	WI	Newly Added
6510443	ContinueCARE Hospital at Madisonville	Madisonville	KY	Newly Added
6519071	ContinueCARE Hospital at Baptist Health Paducah	Paducah	KY	Newly Added
6520482	HEALTHSOUTH Rehabilitation Hospital of Franklin	Franklin	TN	Newly Added
6610473	Sanford Thief River Falls Behavioral Health Center	Thief River Falls	MN	Newly Added
6719166	Baptist Health Medical Center - Conway	Conway	AR	Newly Added
6740174	Cross Creek Hospital	Austin	TX	Newly Added
6741051	Oceans Behavioral Hospital San Marcos	San Marcos	TX	Newly Added
6741059	First Texas Hospital	Carrollton	TX	Newly Added
6741062	First Baptist Medical Center	Dallas	TX	Newly Added
6741064	ContinueCARE Hospital at Medical Center (Odessa)	Odessa	TX	Newly Added
6741071	Baylor Emergency Medical Centers - Rockwall	Rockwall	TX	Newly Added
6741072	Baylor Emergency Medical Centers - Burleson	Burleson	TX	Newly Added
6741092	Garland Behavioral Hospital	Garland	TX	Newly Added
6741093	Kate Dishman Rehabilitation Hospital	Beaumont	TX	Newly Added
6741094	Providence Hospital of North Houston	Houston	TX	Newly Added
6741101	Warm Springs Rehabilitation Hospital of Kyle	Kyle	TX	Newly Added
6741102	Altus Baytown Hospital	Baytown	TX	Newly Added
6741104	San Antonio Behavioral Healthcare Hospital	San Antonio	TX	Newly Added
6741106	Sun Behavioral Houston	Houston	TX	Newly Added
6742040	University of Texas Harris County Psychiatric Center	Houston	TX	Previously listed as registered
6860049	Select Specialty Hospital-Phoenix Downtown	Phoenix	AZ	Newly Added
6869157	Cobalt Rehabilitation Hospital	Surprise	AZ	Newly Added
6870397	Northern Utah Rehabilitation Hospital	South Ogden	UT	Newly Added
6880011	Carson Tahoe Continuing Care Hospital	Carson City	NV	Newly Added
6889102	Desert Parkway Behavioral Healthcare Hospital	Las Vegas	NV	Newly Added
6910690	Cascade Behavioral Hospital	Tukwila	WA	Newly Added
6930677	Temecula Valley Hospital	Temecula	CA	Newly Added
6930679	Hoag Orthopedic Institute	Irvine	CA	Newly Added
6930682	Central Valley Specialty Hospital	Modesto	CA	Newly Added
6930707	Kaiser Permanente San Leandro Medical Center	San Leandro	CA	Newly Added
6930731	San Jose Behavorial Health	San Jose	CA	Newly Added

Mergers

ID	NAME	CITY	STATE	MERGER INFORMATION & PARENT ORGANIZATION
6214640	Southampton Hospital	Southampton	NY	Merged into 6214775 Stony Brook University Hospital - Stony Brook, NY
6231620	Palmerton Hospital	Palmerton	PA	Merged into 6231205 Blue Mountain Hospital - Lehighton, PA
6442070	Borgess-Pipp Hospital	Plainwell	MI	Merged into 6440017 Borgess Medical Center - Kalamazoo, MI
6520008	TriStar Skyline Madison Campus	Madison	TN	Merged into 6521020 TriStar Skyline Medical Center - Nashville, TN
6610523	Unity Hospital	Fridley	MN	Merged into 6610085 Mercy Hospital - Coon Rapids, MN
6620126	Mercy Medical Center - West Lakes	West Des Moines	IA	Merged into 6620003 Mercy Medical Center-Des Moines - Des Moines, IA
6630360	Crittenton Children's Center	Kansas City	MO	Merged into 6630470 Saint Luke's Hospital of Kansas City - Kansas City, MO
6720180	Lakeview Regional Medical Center	Covington	LA	Merged into 6720032 Tulane Medical Center - New Orleans, LA
6720391	Allegiance Health Center of Ruston	Ruston	LA	Merged into 6729132 Allegiance Behavioral Health Centers of Monroe - West Monroe, LA
6740133	Physicians Surgical Hospital - Panhandle Campus	Amarillo	TX	Merged into 6740300 Physicians Surgical Hospital - Quail Creek - Amarillo, TX
6740159	Kindred Hospital-Bay Area	Pasadena	TX	Merged into 6740074 Kindred Hospital-Houston Northwest - Houston, TX
6740203	CHRISTUS Dubuis Hospital of Port Arthur	Port Arthur	TX	Merged into 6740198 CHRISTUS Dubuis Hospital of Beaumont - Beaumont, TX
6740266	Northwest Texas Surgery Center	Amarillo	TX	Merged into 6740065 Northwest Texas Healthcare System - Amarillo, TX
6740321	Memorial Hermann Orthopedic and Spine Hospital	Bellaire	TX	Merged into 6741890 Memorial Hermann - Texas Medical Center - Houston, TX

2016 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 (366 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_____

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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	☐	☐	☐	☐

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
96. Transportation to health services...............................	☐	☐	☐	☐
97. Urgent care center..	☐	☐	☐	☐
98. Violence Prevention Programs				
a. For the workplace…………………………………	☐	☐	☐	☐
b. For the community…………………………………	☐	☐	☐	☐
99. Virtual colonoscopy	☐	☐	☐	☐
100. Volunteer services department	☐	☐	☐	☐
101. Women's health center/services	☐	☐	☐	☐
102. Wound management services	☐	☐	☐	☐

103. 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 _____)	☐	☐	☐	☐

104. Looking across all the relationships identified in question **103**, 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 _____

105a. Does your hospital participate in any joint venture arrangements with physicians or physician groups?   YES ☐   NO ☐

105b. 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)

    1. ☐ Limited service hospital

    2. ☐ Ambulatory surgical centers

    3. ☐ Imaging centers

    4. ☐ Other _____

105c. If you selected 'a. Limited service hospital', please tell us what type(s) of services are provided. (Check all that apply)

    1. ☐ Cardiac

    2. ☐ Orthopedic

    3. ☐ Surgical

    4. ☐ Other _____

105d. Does your hospital participate in joint venture arrangements with organizations other than physician groups?   YES ☐   NO ☐

C. FACILITIES AND SERVICES (continued)

106a. Has your hospital or health care system established an accountable care organization (ACO)? YES ☐ NO ☐

106b. If yes, please indicate the patient population that participates in the ACO. (Check all that apply)
1. ☐ Medicaid
2. ☐ Medicare
3. ☐ Privately insured
4. ☐ Other, please specify_____

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

108. 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 ☐

109. 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 110. 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	☐	☐	☐	☐	☐

110. 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? _____

111. 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" _____ %

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

113. 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 ☐

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

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

116a. Does your hospital conduct an internal survey of the hospital's quality/safety culture at least every 18 months? YES ☐ NO ☐

116b. If yes, please indicate the response rate for the most recent survey. _____ %

116c. 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.)

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) Total Facility	(2) Nursing Home Unit/Facility

1. BEDS AND UTILIZATION

	(1)	(2)
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)	(2)
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)	(2)
*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. Pharmacy Expense………………………………………………………..	_____.00	
k. Supply expense (other than pharmacy)	_____.00	
l. All other expenses..	_____.00	
m. TOTAL EXPENSES (add 3f thru 3l. Exclude bad debt) ………………………	_____.00	_____.00

4. REVENUE BY TYPE

	(1)
*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 2016 vs. 2015?

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 2016 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, 2016 should be shown as 01/01/2016. Number of days should equal the time span between the two dates that the hospital was open. If you are reporting for less than 366 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 366 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.

SECTION C
FACILITIES AND SERVICES
Definitions

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 days 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 produce composite 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, 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. **Violence Prevention**

    a. Workplace. A violence prevention program with goals and objectives for preventing workplace violence against staff and patients.

    b. Community. An organized program that attempts to make a positive impact on the type(s) of violence a community is experiencing. For example, it can assist victims of violent crimes, e.g., rape, or incidents, e.g., bullying, to hospital or to community services to prevent further victimization or retaliation. A program that targets the underlying circumstances that contribute to violence such as poor housing, insufficient job training, and/or substance abuse through means such direct involvement and support, education, mentoring, anger management, crisis intervention and training programs would also qualify.

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

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

101. **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.

102. **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.

103. **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.

104. Of all physician arrangements listed in question 103 (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.

105. 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.

106. 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.

107. 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.

108. 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.

111. 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.

112. 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.

116. 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.

<div align="center">

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

</div>

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 patient day or a census day, or by some federal hospitals as an occupied bed day) is a period of service between the census-taking hours on two successive calendar days, the day of discharge being counted only when the patient was admitted the same day.

    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. Pharmacy Expense. Includes the cost of drugs and pharmacy supplies requested to patient care departments and drugs charged to patients.

3k. 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.

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

3m.Total expenses. Add 3f-3l. 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].

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. [ACO].

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. *Value provided for total facility* [ADJPD]; *and also for the hospital unit* [ADJPDH].

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).* [MEGHOS].

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. Also known as CMS Certification Number (CCN) [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 expense:
Includes the cost of drugs and pharmacy supplies requested to patient care departments and drugs charged to patients. [PHREXA].

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. [MCDIPD].

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. [MCRIPD].

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

Violence prevention programs:
Workplace: A violence prevention program with goals and objectives for preventing workplace violence against staff and patients. **Community**: An organized program that attempts to marke a positive impact on the type(s) of violence a community is experiencing. For example, it can assist victims of violent crimes, e.g., rape, or incidents, e.g., bullying, to hospital or to community services to prevent further victimization or retalization. A program that targets the underlying circumstances that contribute to violence such as poor housing, insufficient job training, and/or substance abuse through means such as direct involvement and support, education, mentoring, anger management, crisis intervention and training

programs would also qualify. [VWRKHOS][VCMMHOS]

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].