American Hospital Association™

Advancing Health in America

AHA ANNUAL SURVEY DATABASE™

FISCAL YEAR 2017

› ORGANIZATIONAL STRUCTURE

› SERVICES

› BEDS AND UTILIZATION

› EXPENSES

› STAFFING

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AHA Data & Insights

Introduction

AHA Annual Survey Database™ for Fiscal Year 2017 is a comprehensive hospital database for peer comparisons, market analysis, and health services research. It is produced primarily from the *AHA Annual Survey of Hospitals,* which is administered by the American Hospital Association (AHA). The survey responses are supplemented by data assembled from the U.S. Census Bureau, hospital accrediting bodies, and other organizations.

The *AHA Annual Survey* is a voluntary survey. We encourage **all** hospitals open and operating in the United States and territories to participate in the Survey. Participating hospitals are not required to be members of the American Hospital Association.

Hospitals report information on their organizational structure, service lines, utilization, finances, insurance and payment models, 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 (CCN) to link the AHA data 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, reconciliation with prior year Database, and glossary.

Some items on the questionnaire, such as revenue, are designated 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™.*

This *AHA Annual Survey* Documentation Book is intended for licensees of *AHA Annual Survey Database.* We welcome your feedback at **support@aha.org.**

Changes for Fiscal Year 2017

The following fields are new for the Fiscal Year 2017 Database:

Field label	Short description
SPCC	Primary care clinic – satellite facility
SPCCN	Primary care clinic – number of facilities
SSC	Specialty clinic – satellite facility
SSCN	Specialty clinic – number of facilities
SUCAR	Urgent care – satellite facility
SUCARN	Urgent care – number of facilities
SAMBS	Ambulatory surgery – satellite facility
SAMBSN	Ambulatory surgery – number of facilities
SRHB	Rehabilitation – satellite facility
SRHBN	Rehabilitation – number of facilities
SPSY	Psychiatric care – satellite facility
SPSYN	Psychiatric care – number of facilities
SALOP	Substance abuse/chemical dependency – satellite facility
SALOPN	Substance abuse/chemical dependency – number of facilities
SSNR	Skilled nursing – satellite facility
SSNRN	Skilled nursing – number of facilities
SRSCR	Residential care – satellite facility
SRSCRN	Residential care – number of facilities
SOEXC	Other extended care – satellite facility
SOEXCN	Other extended care – number of facilities
SLAB	Laboratory – satellite facility
SLABN	Laboratory – number of facilities
SDMRI	Diagnostic imaging center – satellite facility
SDMRIN	Diagnostic imaging center – number of facilities
OTHSAT	Other – satellite facility
OTHSATN	Other – number of facilities
INSPT	Hospital/system partners with insurer to offer insurance products
INSPRD	Hospital/system offers insurance products (via ownership or joint venture)
MEDADHOS	Medicare advantage – hospital
MEDADSYS	Medicare advantage – system
MEDADVEN	Medicare advantage – joint venture
MEDADN	Medicare advantage – no
MEDADDK	Medicare advantage – do not know
MMCHOS	Medicaid managed care – hospital
MMCSYS	Medicaid managed care – system

Field label	Short description
MMCVEN	Medicaid managed care – joint venture
MMCN	Medicaid managed care – no
MMCDK	Medicaid managed care – do not know
HLINHOS	Health insurance marketplace (exchange) – hospital
HLINSYS	Health insurance marketplace (exchange) – hospital
HLINVEN	Health insurance marketplace (exchange) – joint venture
HLINN	Health insurance marketplace (exchange) – no
HLINDK	Health insurance marketplace (exchange) – do not know
OTHIMHOS	Other individual market – hospital
OTHIMSYS	Other individual market – system
OTHIMVEN	Other individual market – joint venture
OTHIMN	Other individual market – no
OTHIMDK	Other individual market – do not know
SMGRPHOS	Small group – hospital
SMGRPSYS	Small group – system
SMGRPVEN	Small group – joint venture
SMGRPN	Small group - no
SMGPDK	Small group – do not know
LGRPHOS	Large group – hospital
LGRPSYS	Large group – system
LGRPVEN	Large group – joint venture
LGRPN	Large group – no
LGRPDK	Large group – do not know
BNDRSK	Hospital shares upside or downside risk for outside providers
BNDPCT	Percent of hospital's patient revenue paid through bundled payment arrangements
BHER	Emergency services integrated with behavioral health care
BHPCS	Primary care services integrated with behavioral health care
BHACAR	Acute inpatient care integrated with behavioral health care
BHXCAR	Extended care integrated with behavioral health care
APDTE	ACO patient population – Direct to employer
MEDHSE	*System* established medical home program
CINHSP	*Hospital* established a clinically integrated network
CINSYS	*System* established clinically integrated network
HCOCA	Partnership for population health improvement – Healthcare providers outside your system
LORGA	Partnership for population health improvement – Local or state public health organizations
LORGCA	Partnership for population health improvement – Local or state human/social service organizations
OTLSGDC	Partnership for population health improvement – Other local or state government

Field label	Short description
NPOEA	Partnership for population health improvement – Non-profit
FBOFA	Partnership for population health improvement – Faith-based organizations
HICGA	Partnership for population health improvement – Health insurance companies
SCHHA	Partnership for population health improvement – schools
LBCCIA	Local business or chambers of commerce
OTHINTA	Partnership for population health improvement – Other
OTHPART	Partnership for population health improvement – Other description
ALDBD	Alcoholism/chemical dependency pediatric services beds
ALCPDHOS	Alcoholism/chemical dependency pediatric services - hospital
ALCPDSYS	Alcoholism/chemical dependency pediatric services – health system
ALCPDVEN	Alcoholism/chemical dependency pediatric services – joint venture
ALCPRHOS	Alcoholism/chemical partial hospitalization services – hospital
ALCPRSYS	Alcoholism/chemical partial hospitalization services – health system
ALCPRVEN	Alcoholism/chemical dependency outpatient services – joint venture
PSCBD	Psychiatric pediatric care beds
PSGBD	Psychiatric geriatric services beds
PSYOIHOS	Psychiatric intensive outpatient services – hospital
PSYOISYS	Psychiatric intensive outpatient services – health system
PSYOIVEN	Psychiatric intensive outpatient services – joint venture
PSYPHAHOS	Psychiatric partial hospitalization services/adult – hospital
PSYPHASYS	Psychiatric partial hospitalization services/adult – health system
PSYPHAVEN	Psychiatric partial hospitalization services/adult – joint venture
PSYPHCHOS	Psychiatric partial hospitalization services/pediatric – hospital
PSYPHCSYS	Psychiatric partial hospitalization services/pediatric – health system
PSYPHCVEN	Psychiatric partial hospitalization services/pediatric – joint venture
PSYTRAHOS	Psychiatric residential treatment /adult – hospital
PSYTRASYS	Psychiatric residential treatment/adult – health system
PSYTRAVEN	Psychiatric residential treatment/adult – joint venture
PSYTRPHOS	Psychiatric residential treatment/pediatric – hospital

Field label	Short description
PSYTRPSYS	Psychiatric residential treatment/pediatric – health system
PSYTRPVEN	Psychiatric residential treatment/pediatric – joint venture
COFVHOS	Telehealth consultation and office visits – hospital
COFVSYS	Telehealth consultation and office visits – health system
COFVVEN	Telehealth consultation and office visits – joint venture
EICUHOS	Telehealth eICU – hospital
EICUSYS	Telehealth eICU – health system
EICUVEN	Telehealth eICU – joint venture
STRCHOS	Telehealth stroke care – hospital
STRCSYS	Telehealth stroke care – health system
STRCVEN	Telehealth stroke care – joint venture
ADTRTHOS	Telehealth psychiatric and addiction treatment – hospital
ADTRTSYS	Telehealth psychiatric and addiction treatment – health system
ADTRTVEN	Telehealth psychiatric and addiction treatment – joint venture
PDISHOS	Telehealth remote patient monitoring post discharge – hospital
PDISSYS	Telehealth remote patient monitoring post discharge – health system
PDISVEN	Telehealth remote patient monitoring post discharge – joint venture
CHCARHOS	Telehealth remote patient monitoring ongoing chronic care management – hospital
CHCARSYS	Telehealth remote patient monitoring ongoing chronic care management – health system
CHCARVEN	Telehealth remote patient monitoring ongoing chronic care management – joint venture
ITEXPA	IT operating expense
ITBUGT	IT capital expense
ITFTE	Number of employed IT staff (in FTEs)
OSFTE	Number of outsourced IT staff (in FTEs)

*Note: The following **existing** fields have a modified short description*:

PSYCAHOS   Psychiatric pediatric care – hospital

PSYCASYS   Psychiatric pediatric care – health system

PSYCAVEN   Psychiatric pediatric care – joint venture

There is a new Primary Service code: **Children's Cancer**. For more information, see *Appendix B – Primary Service Code Descriptions*.

Changes for Fiscal Year 2017

We **removed** the following fields for the Fiscal Year 2017 Database.

Field label	Short description
MTYPE	Hospital type code[1]
IPHMOHOS	Health maintenance organization (HMO) - hospital
IPHMOSYS	Health maintenance organization (HMO) – health system
IPHMONET	Health maintenance organization (HMO) - network
IPHMOVEN	Health maintenance organization (HMO) – joint venture
IPPPOHOS	Preferred provider organization (PPO) – hospital
IPPPOSYS	Preferred provider organization (PPO) – health system
IPPPONET	Preferred provider organization (PPO) – network
IPPPOVEN	Preferred provider organization (PPO) – joint venture
IPFEEHOS	Indemnity fee for service plan – hospital
IPFEESYS	Indemnity fee for service plan – health system
IPFEENET	Indemnity fee for service plan – network
IPFEEVEN	Indemnity fee for service plan – joint venture
HMO86	Does the hospital have a formal written contract with an HMO?
HMOCON	Number of HMO contracts
PPO86	Does the hospital have a formal written contract with a PPO?
PPOCON	Number of PPO contracts
CAPCOV	Number of lives covered on a capitated basis
PSYPHHOS	Psychiatric partial hospitalization program – hospital
PSYPHSYS	Psychiatric partial hospitalization program – health system
PSYPHVEN	Psychiatric partial hospitalization program – joint venture
PSTRTHOS	Psychiatric residential treatment – hospital
PSTRTSYS	Psychiatric residential treatment – health system
PSTRTVEN	Psychiatric residential treatment – joint venture

[1] Starting with the FY2017 AHA Annual Survey Database, the AHA will no longer employ its own methodology to classify hospitals as registered. We will use the following definition, which is more generally known and accepted:

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

As a result of the application of the new, broader hospital definition, the *Summary of Changes,* a reconciliation between two Annual Survey years, no longer categorizes hospitals as 'Registered' and 'Nonregistered'.

Technical User Notes

The Annual Survey Database Fiscal Year 2017 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

AS2017.accdb	MS Access Database

/COMMA

AS17dem.xlsx	MS Excel file - demographic
AS17svc1.xlsx	MS Excel file – service 1 of 3
AS17svc2.xlsx	MS Excel file – service 2 of 3
AS17svc3.xlsx	MS Excel file – service 3 of 3
AS17util1.xlsx	MS Excel file – utilization 1 of 2
AS17util2.xlsx	MS Excel file – utilization 2 of 2
AS2017FULLFILE.xlsx	MS Excel full file
ASPUB17.csv	Comma delimited file
ASPUB17DCTfile.dct	Dictionary file

/DOCUMENTATION

AS2017lay.xlsx	File layout
AS2017desc.xlsx	Data description file
SASLAYOUT2017.txt	SAS layout

/FLAT

PUBAS17.asc	The flat ascii fixed-length file

/NPI

NPI2017.xlsx	NPI database
NPIFileLayout.xlsx	The file layout of the AHA NPI with the AHA taxonomy descriptions and CMS taxonomy codes descriptions

/UNITS

FUNIT_ID.xlsx	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

PUBAS17.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.

ASPUBAS17.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.

AS2017.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:
AS17DEM — contains the demographic and descriptive fields for each facility
AS17SVC1 — contains facilities and services fields
AS17SVC2— contains facilities and services fields
AS17SVC3— contains facilities and services fields
AS17UTIL1— contains utilization, personnel and the financial fields
AS17UTIL2— 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:

AS2017desc.xlsx

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.

AS2017lay.xlsx

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

AS2017appendices.xlsx

- 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.*

SASLAYOUT2017.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.

For technical assistance contact us at 866-375-3633 or 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.

4. **How can I identify estimated values?**

   - The file layout has the complete list of estimation flags.
   - **Appendix H** of the file layout includes the key to estimation flags.
   - Estimated fields are 100% filled.
   - Estimated fields have an 'E' as the first character in the field name. For example, the estimation flag for *Total Admissions (ADMTOT) is 'EADMTOT'*.

5. **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.

6. **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.*

7. **Does the Database include *'Unit"* hospitals?**

   - In the *Annual Survey Database,* data appear only for the parent hospital. A 'unit' is a distinct and separately identified site of care that is a component part of a larger (parent) hospital. Beds and activity pertaining to the individual unit are included as part of the parent hospital's data.
   - **There is a separate cross-reference file**, **FUNIT_ID.xls, delivered with the Database** to identify unit hospitals (also referred to as 'subsidiary hospitals') and their affiliated parent hospital. Learn more about 'Unit' hospitals in the 'Technical User Notes'.

8. **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.

   The affiliated health care system is identified as part of the hospital record, where applicable. See the file layout for *SYSNAME.* Below are the included fields.

System ID	System state
System name	System zip code
System address	System main telephone
System city	System primary contact and title

System Fields

9. 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.

10. Are 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, new items may be excluded from the Database for additional evaluation of the responses in relationship to the intent of the question.

11. Why are AHA Identification Numbers (hospitals) from a prior year Database not on the Fiscal Year 2017 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* in this Documentation Book identifies the AHA IDs added or removed from the Fiscal Year 2017 Database, and the reason for the change.

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

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

13. 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

14. 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.

15. 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'.

16. Which map projection is used for the latitude/longitude pairs?

The Universal Transverse Mercator (UTM) coordinate system.

17. What other Survey data are available?

The American Hospital Association conducts a variety of surveys throughout the year. To learn about the availability of data from our surveys, contact us at ahadatainfo@aha.org.

	AHA Identification Number	AHA region code in position 2, AHA state code in position 2-3, hospital number in position 4-7

Database Description Document
FY 2017 Edition

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 2017 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.22.a.	Alcoholism-chemical dependency pediatric services (#beds)	
C.22.b.	Alcoholism-chemical dependency outpatient services	
C.22.c.	Alcoholism-chemical dependency partial hospitalization 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.	Certified trauma center	
C.44.c.	Level of Trauma Center	1=regional resource trauma center; 2=community trauma center; 3-rural trauma hospital; 4 or greater = other (specific to select states)
C.45.	Enabling services	
C.46.	Endoscopic services	
C.46.a.	Optical colonoscopy	

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

C.80.a.	Assistive technology center	
C.80.b.	Electrodiagnostic services	
C.80.c.	Physical rehabilitation outpatient services	
C.80.d.	Prosthetic and orthotic services	
C.80.e.	Robot-assisted walking therapy	
C.80.f.	Simulated rehabilitation environment	
C.81.	Primary care department	
C.82.	Psychiatric services	
C.82.a.	Psychiatric consultation-liaison services	
C.82.b.	Psychiatric pediatric care (and #beds)	
C.82.c.	Psychiatric geriatric services (and #beds)	
C.82.d.	Psychiatric education services	
C.82.e.	Psychiatric emergency services	
C.82.f.	Psychiatric outpatient services	
C.82.g.	Psychiatric intensive outpatient services	
C.82.h.	Psychiatric partial hospitalization services - adult	
C.82.i.	Psychiatric partial hospitalization services - pediatric	
C.82.j.	Psychiatric residential treatment - adult	
C.82.k.	Psychiatric residential treatment - pediatric	
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.	Telehealth	
C.95.a.	Consultation and office visits	
C.95.b	eICU	
C.95.c.	Stroke care	
C.95.d.	Psychiatric and addiction treatment	
C.95.e.	Remote patient monitoring	
C.95.e.1.	Post-discharge	
C.95.e.2.	Ongoing chronic care management	
C.96.	Transplant Services	
C.96.a.	Bone marrow	
C.96.b.	Heart	
C.96.c.	Kidney	
C.96.d.	Liver	
C.96.e.	Lung	
C.96.f.	Tissue	
C.96.g.	Other	
C.97.	Transportation to health services	
C.98.	Urgent care center	
C.99.	Violence prevention programs	
C.99.a.	For the workplace	
C.99.b.	For the community	
C.100.	Virtual colonoscopy	
C.101.	Volunteer services department	
C.102.	Women's health center/services	
C.103.	Wound management services	

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C.104.	Does your organization routinely integrate behavioral health services in the following care areas?	
C.104.a.	Emergency services	
C.104.b	Primary care services	
C.104.c.	Acute inpatient care	
C.104.d.	Extended care	
Type of physician arrangement is asked for the **hospital**, the **health system**, and the **health network**		
C.105.a.	Independent practice association	Number of physicians
C.105.b.	Group practice without walls	Number of physicians
C.105.c.	Open physician-hospital organization (PHO)	Number of physicians
C.105.d.	Closed physician-hospital organization (PHO)	Number of physicians
C.105.e.	Management service organization (MSO)	Number of physicians
C.105.f.	Integrated salary model	Number of physicians
C.105.g.	Equity model	Number of physicians
C.105.h.	Foundation	Number of physicians
C.105.i.	Other, please specify	Number of physicians
C.106.	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.107.a.	Does your hospital participate in any joint venture arrangements with physicians or physician groups?	
C.107.b.1.	Limited service hospital	
C.107.b.2.	Ambulatory surgical centers	
C.107.b.3.	Imaging centers	
C.107.b.4.	Other	
C.107.b.4.	Other (description text)	literal value
C.107.c.	If you selected 'a. Limited Service Hospital', please tell us what type(s) of services are provided	
C.107.c.1.	Cardiac	
C.107.c.2.	Orthopedic	
C.107.c.3.	Surgical	
C.107.c.4.	Other	
C.107.c.4.	Other (description text)	

C.107.d.	Does you hospital participate in joint venture arrangements with organizations other than physician groups	
Section D, Insurance and Alternative Payment Models, includes **items not publicly available as denoted by** [2]		
D.1.	Does your hospital/system have a health plan license?[2]	
D.1.a.	If yes, in what states?[2]	
D.1.b.	Does your hospital/system partner with an insurer to offer insurance products?	
D.1.c.	Does your hospital/system offer insurance products (either via ownership or joint ventures)?	
D.1.d.	If yes, please indicate the insurance products and the total medical enrollment (check all that apply)	
D.1.d.1	Medicare advantage	
D.1.d.2	Medicaid Managed Care	
D.1.d.3	Health Insurance Marketplace ("exchange")	
D.1.d.4	Other Individual Market	
D.1.d.5	Small Group	
D.1.d.6	Large Group	
D.2.	Does your health plan make capitated payments to physicians either within or outside of your network for specific groups or enrollees?[2]	
D.2.a.	Physicians within your network[2]	
D.2.b.	Physicians outside your network[2]	
D.3.	Does your health plan make bundled payments to providers in your network or to outside providers?[2]	
D.3.a.	Providers within your network[2]	
D.3.b.	Providers outside your network[2]	
D.4.	Does your health plan offer shared risk contracts to either providers in your network or to outside providers?[2]	
D.4.a.	Providers within your network[2]	
D.4.b.	Providers outside your network[2]	
D.5.	What percentage of your hospital's patient revenue is paid on a capitated basis?	
D.6.	Does your hospital participate in a bundled payment program?	
D.6.a.	If yes, does your hospital share upside or downside risk for any of those outside providers?	
D.6.b.	If yes, what percentage of the hospital's patient revenue is paid through bundled payment arrangements?	
D.7.	What percentage of your hospital's patient revenue is paid on a shared risk basis (other than capitated or bundled payments)?	

D.8.	Does your hospital contract directly with employers or a coalition of employers to provide care on a capitated, predetermined, or shared risk basis?	
D.9.	Does your hospital have contracts with commercial payors where payment is tied to performance on quality/safety metrics?[2]	
D.10.	Has your hospital or health care system established an Accountable Care Organization?	
D.10.a.	Is yes, please indicate the patient populations that are served in the ACO.	
D.10.a.1.	Medicaid	
D.10.a.2.	Medicare	
D.10.a.3.	Privately insured	
D.10.a.4	Direct-to-Employer	
D.10.a.5	Other, please specify	
D.12.	Does your hospital/system have an established medical home program?	
D.12.a.	Hospital	
D.12.b.	System	
D.13.	Has your hospital/system established a clinically integrated network?	
D.13.a.	Hospital	
D.13.b.	System	
	[2]On questionnaire, not in database.	
E: TOTAL FACILITY BEDS, UTILIZATION, FINANCES AND STAFFING		
Calculated	Does the hospital maintain a separate nursing home type of long-term care unit?	1=yes, 0=no, see **Appendix H** for more information
E.1.a	Total licensed beds	
E.1.a.	Total licensed beds-nursing home unit	
E.1.b.	Total facility beds set up and staffed at the end of reporting period	
E.1.b.	Nursing home beds set up and staffed	
Calculated	Hospital unit beds set up and staffed	Total beds less nursing home beds
E.1.c.	Bassinets set up and staffed	
E.1.d.	Total births (excluding fetal deaths)	
E.1.e	Total facility admissions	
E.1.e.	Nursing home admissions	
Calculated	Hospital unit admissions	Total admissions less nursing home admissions
E.1.f.	Total facility inpatient days	
E.1.f.	Nursing home inpatient days	
Calculated	Hospital unit inpatient days	Total inpatient days less nursing home inpatient days
E.1.g.	Emergency department visits	
E.1.h.	Total outpatient visits	
Calculated	Other outpatient visits	Total outpatient visits less emergency room visits

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

Calculated	Hospital unit Medicaid managed care inpatient days	Total Medicaid managed care inpatient days less nursing home Medicaid managed care inpatient days
Note: Items E.3.a-e (Revenue data) are considered confidential and are not released publicly at the hospital-specific level		
E.3.a.	Net patient revenue (treat bad debt as a deduction from revenue)	Data not available
E.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.
E.3.b.	Other operating revenue, Tax appropriations	Data not available
E.3.c.	Other operating revenue, other than tax appropriations	Data not available
E.3.d.	Other total non-operating revenue	Data not available
E.3.e.	Total revenue, including bad debt	Data not available
E.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.
E.3.f.	Total facility payroll expenses	
E.3.f.	Nursing home payroll expenses	
Calculated	Hospital unit payroll expenses	Total payroll expenses less nursing home payroll expenses
E.3.g.	Total facility employee benefits	
E.3.g.	Nursing home employee benefits	
Calculated	Hospital unit employee benefits	Total employee benefits expenses less nursing home employee benefits expenses
E.3.h.	Depreciated expense (for reporting period only)	
E.3.i.	Interest expense	
E.3.j.	Pharmacy expense	
E.3.k.	Supply expense	
E.3.l.	All other expenses	
E.3.m.	Total facility total expenses	
E.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. Items E.9.e-i. are not publicly available.		
*E.4.a.	*Gross inpatient revenue	*Data not available
*E.4.b.	*Gross outpatient revenue	*Data not available
*E.4.c.	*Total gross patient revenue	*Data not available

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*E.5.a.	*Bad debt expenses	*Data not available
*E.5.b.	*Charity care revenue forgone at full established rates. Included in gross revenue	*Data not available
*E.6.a.1.a	*Gross patient revenue from Medicare - Routine care revenue	*Data not available
*E.6.a.1.a	*Net patient revenue from Medicare - Routine care revenue	*Data not available
*E.6.a.1.b	*Gross patient revenue from Medicare - Managed care revenue	*Data not available
*E.6.a.1.b	*Net patient revenue from Medicare - Managed care revenue	*Data not available
*E.6.a.1.c	*Gross patient revenue from Medicare - total	*Data not available
*E.6.a.1.c	*Net patient revenue from Medicare - total	*Data not available
*E.6.a.2.a	*Gross patient revenue from Medicaid - Routine care revenue	*Data not available
*E.6.a.2.a	*Net patient revenue from Medicaid - Routine care revenue	*Data not available
*E.6.a.2.b	*Gross patient revenue from Medicaid - Managed care revenue	*Data not available
*E.6.a.2.b	*Net patient revenue from Medicaid - Managed care revenue	*Data not available
*E.6.a.2.c	*Gross patient revenue from Medicaid - total	*Data not available
*E.6.a.2.c	*Net patient revenue from Medicaid - total	*Data not available
*E.6.a.3.	Other government gross patient revenue	*Data not available
*E.6.a.3.	Other government net patient revenue	*Data not available
*E.6.b.1.	Gross patient revenue from Self Pay	*Data not available
*E.6.b.1.	Net patient revenue from Self Pay	*Data not available
*E.6.b.2.a.	Gross patient revenue from Managed care (includes HMO and PPO)	*Data not available
*E.6.b.2.a.	Net patient revenue from Managed care (includes HMO and PPO)	*Data not available
*E.6.b.2.b.	Gross patient revenue from other 3rd party payors	*Data not available
*E.6.b.2.b.	Net patient revenue from other 3rd party payors	*Data not available
*E.6.b.2.c.	Gross patient revenue from 3rd party payors - total	*Data not available
*E.6.b.2.c.	Net patient revenue from 3rd party payors - total	*Data not available
*E.6.b.3.	Other non-government gross patient revenue	*Data not available
*E.6.b.3.	Other non-government net patient revenue	*Data not available
*E.6.c.	Total gross patient revenue (sum by source)	*Data not available
*E.6.d.	If you report Medicaid Supplemental Payments, please break the payment total into inpatient and outpatient care.	
*E.6.e.	If you are a government owned facility (control codes 12-16), does your facility participate in the Medicaid intergovernmental transfer or certified public expenditures program?	
*E.6.f.	If yes, please report gross and net revenue.	
E.7.	Fixed assets	
E.7.a.	Property, plant and equipment at cost	
E.7.b.	Accumulated depreciation	
E.7.c.	Net property, plant and equipment (a-b)	

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E.7.d.	Total gross square feet of your physical plant used for or in support of your healthcare activities.	
E.8.	Total Capital Expenses	
E.9.a.	IT operating expense	
E.9.b.	IT capital expense	
E.9.c.	IT Number of employed IT staff (in FTEs)	
E.9.d.	Number of outsourced IT staff (in FTEs)	
*E.9.e.	What percentage of your IT budget is spent on security?	
*E.9.f	Which of the following cybersecurity measures does your hospital or health system currently deploy?	
*E.9.f.1.	Annual risk assessment	
*E.9.f.2.	Incident response plan	
*E.9.f.3.	Intrusion detection systems	
*E.9.f.4.	Mobile device data encryption	
*E.9.f.5.	Mobile device data wiping	
*E.9.f.6.	Penetration testing to identify security vulnerabilities	
*E.9.f.7	Strong password requirements	
*E.9.f.8	Two-factor authentication	
*E.9.g.	Does your hospital or health system board oversight of risk management and reduction specifically include consideration of cybersecurity risk?	Yes, No, Unsure
*E.9.h.	Does your hospital or health system have cybersecurity insurance?	Yes, No, Unsure
*E.9.i.	Is your hospital or health system participating in cybersecurity information-sharing activities with an outside information sharing and analysis organization to identify threats and vulnerabilities?	Yes, No, Unsure
E.10.a.	Full time physicians	
E.10.a.	Part time physicians	
E.10.a.	FTEs Physicians	
E.10.a.	Vacancies Physicians	
E.10.b.	Full time dentists	
E.10.b.	Part time dentists	
E.10.b.	FTE dentists	
E.10.b.	Vacancies Dentists	
E.10.c.	Full time medical and dental residents and interns	
E.10.c.	Part time medical and dental residents and interns	
E.10.c.	FTEs medical and dental residents and interns	
E.10.c.	Vacancies medical and dental residents and interns	
E.10.d.	Full time other trainees	

E.10.d.	Part time other trainees	
E.10.d.	FTEs other trainees	
E.10.d.	Vacancies other trainees	
E.10.e.	Full time registered nurses	
E.10.e.	Part time registered nurses	
E.10.e.	FTEs registered nurses	
E.10.e.	Vacancies registered nurses	
E.10.f.	Full time licensed practical or vocational nurses	
E.10.f.	Part time licensed practical or vocational nurses	
E.10.f.	FTEs licensed practical or vocational nurses	
E.10.f.	Vacancies licensed practical or vocational nurses	
E.10.g.	Full time nursing assistive personnel	
E.10.g.	Part time nursing assistive personnel	
E.10.g.	FTEs nursing assistive personnel	
E.10.g.	Vacancies nursing assistive personnel	
E.10.h.	Full time Radiology technicians	
E.10.h.	Part time Radiology technicians	
E.10.h.	FTEs Radiology technicians	
E.10.h.	Vacancies Radiology technicians	
E.10.i.	Full time laboratory technicians	
E.10.i.	Part time laboratory technicians	
E.10.i.	FTEs laboratory technicians	
E.10.i.	Vacancies laboratory technicians	
E.10.j.	Full time Pharmacists, licensed	
E.10.j.	Part time Pharmacists, licensed	
E.10.j.	FTEs Pharmacists, licensed	
E.10.j.	Vacancies Pharmacists, licensed	
E.10.k.	Full time Pharmacy technicians	
E.10.k.	Part time Pharmacy technicians	
E.10.k.	FTEs Pharmacy technicians	
E.10.k.	Vacancies Pharmacy technicians	
E.10.l.	Full time Respiratory therapists	
E.10.l.	Part time Respiratory therapists	
E.10.l.	FTEs Respiratory therapists	
E.10.l.	Vacancies Respiratory therapists	
E.10.m.	Full time all other personnel	
E.10.m.	Part time all other personnel	

E.10.m.	FTEs all other personnel	
E.10.m.	Vacancies all other personnel	
E.10.n.	Full time total personnel	
E.10.n.	Part time total personnel	
E.10.n.	FTEs total personnel	
E.10.n.	Vacancies total personnel	
E.10.o.	Full time nursing home type unit/facility registered nurses	
E.10.o.	Part time nursing home type unit/facility registered nurses	
E.10.o.	FTE nursing home type unit/facility registered nurses	
E.10.o.	Vacancies nursing home type unit/facility registered nurses	
E.10.p.	Total full time total nursing home personnel	
E.10.p.	Total part time total nursing home personnel	
E.10.p.	FTEs nursing total nursing home personnel	
E.10.p.	Vacancies total nursing home personnel	
E.10.q.	For your employed RN FTEs reported in E.10.e., please report the number of FTEs who are involved in direct patient care.	
E.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total employed	
E.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total individual contract	
E.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total group contract	
E.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - not employed or under contract	
E.11.a.	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total privileged	
E.11.b.	Emergency medicine - total employed	
E.11.b.	Emergency medicine - total individual contract	
E.11.b.	Emergency medicine - total group contract	
E.11.b.	Emergency medicine - not employed or under contract	
E.11.b.	Emergency medicine - total privileged	
E.11.c.	Hospitalist - total employed	
E.11.c.	Hospitalist - total individual contract	
E.11.c.	Hospitalist - total group contract	
E.11.c.	Hospitalist - not employed or under contract	
E.11.c.	Hospitalist - total privileged	
E.11.d.	Intensivist - total employed	

E.11.d.	Intensivist - total individual contract	
E.11.d.	Intensivist - total group contract	
E.11.d.	Intensivist - not employed or under contract	
E.11.d.	Intensivist - total privileged	
E.11.d.	Radiologist/pathologist/anesthesiologist - total employed	
E.11.e.	Radiologist/pathologist/anesthesiologist - total individual contract	
E.11.e.	Radiologist/pathologist/anesthesiologist - total group contract	
E.11.e.	Radiologist/pathologist/anesthesiologist - not employed or under contract	
E.11.e.	Radiologist/pathologist/anesthesiologist - total privileged	
E.11.f.	Other specialist - total employed	
E.11.f.	Other specialist - total individual contract	
E.11.f.	Other specialist - total group contract	
E.11.f.	Other specialist - not employed or under contract	
E.11.f.	Other specialist - total privileged	
E.11.g.	Total physicians - total employed	
E.11.g.	Total physicians - total individual contract	
E.11.g.	Total physicians - total group contract	
E.11.g.	Total physicians - not employed or under contract	
E.11.g.	Total physicians - total privileged	
E.12.a.	Do hospitalists provide care for patients in your hospital?	1=yes, 0=no
E.12.b.	If yes, please report the number of full time equivalents (FTE) hospitalists?	
E.13.a.	Do intensivists provide care for patients in your hospital?	1=yes, 0=no
E.13.b.1.	Intensivists (FTE) medical-surgical intensive care	
E.13.b.1.	Medical surgical intensive care - closed to intensivists	
E.13.b.2.	Intensivists (FTE) cardiac intensive care	
E.13.b.2.	Cardiac intensive care - closed to intensivists	
E.13.b.3.	Intensivists (FTE) neonatal intensive care	
E.13.b.3.	Neonatal intensive care - closed to intensivists	
E.13.b.4.	Intensivists (FTE) pediatric intensive care	
E.13.b.4.	Pediatric intensive care - closed to intensivists	
E.13.b.5.	Intensivists (FTE) other intensive care	
E.13.b.5.	Other intensive care - closed to intensivists	
E.13.b.6.	Total number of FTE Intensivists	
E.14.a.	Do advanced practice nurse/physician assistants provide care for patients in your hospital?	1=yes, 0=no
E.14.b.	FT Advanced practice nurses (number)	
E.14.b.	PT Advanced practice nurses (number)	

E.14.b.	FTE Advanced practice nurses (number)	
E.14.b.	Physician Assistants FT (number)	
E.14.b.	Physician Assistants PT (number)	
E.14.b.	Physician Assistants FTE (number)	
E.14.c.	Primary care advanced practice nurses	1=yes, 0=no
E.14.c.	Anesthesia services advanced practice nurses	1=yes, 0=no
E.14.c.	Emergency department care advanced practice nurses	1=yes, 0=no
E.14.c.	Other specialty care advanced practice nurses	1=yes, 0=no
E.14.c.	Patient education advanced practice nurses	1=yes, 0=no
E.14.c.	Case management advanced practice nurses	1=yes, 0=no
E.14.c.	Other advanced practice nurses	1=yes, 0=no
E.15.a.	Did your facility hire more foreign-educated nurses	0=did not hire, 1=more, 2=less, 3=same
E.15.b.	From which countries/continents are you recruiting foreign-educated nurses?	
E.15.b.	Africa	1=yes, 0=no
E.15.b.	South Korea	1=yes, 0=no
E.15.b.	Canada	1=yes, 0=no
E.15.b.	Philippines	1=yes, 0=no
E.15.b.	China	1=yes, 0=no
E.15.b.	India	1=yes, 0=no
E.15.b.	Other	1=yes, 0=no
F: SUPPLEMENTAL INFORMATION. Some items are not publicly available, denoted by [2].		**Not used at all; Used minimally; Used moderately; Used widely; Used hospital-wide.**
F.1.	Does your hospital provide services through a satellite facility(s)?	1=yes, 0=no
F.1.a.	Primary care clinic, and # of facilities	
F.1.b.	Specialty clinic, and # of facilities	
F.1.c.	Urgent care, and # of facilities	
F.1.d.	Ambulatory surgery, and # of facilities	
F.1.e.	Rehabilitation, and # of facilities	
F.1.f.	Psychiatric care, and # of facilities	
F.1.g.	Substance abuse/chemical dependency, and # of facilities	
F.1.h.	Skilled nursing, and # of facilities	
F.1.i	Residential care, and # of facilities	
F.1.j.	Other extended care, and # of facilities	
F.1.k.	Laboratory, and # of facilities	
F.1.l.	Diagnostic imaging center, and # of facilities	
F.1.m.	Other, please specify	

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F.2	Does the hospital participate in a group purchasing arrangement? If yes, please provide the name, city, and state of the group purchasing organization.	
F.2.	Name of group purchasing organization	
F.2.	City of group purchasing organization	
F.2.	State of group purchasing organization	
F.3.	Does the hospital purchase medical/surgical supplies directly through a distributor?	1=yes, 0=no
F.3.	Name of Distributor	
F.4.	If your hospital hired RNs during the reporting period, how many were new graduates from nursing schools?	
F.5.	Describe the extent of your hospital's current partnership with the following types of organizations for community or population health improvement initiatives.	
F.5.a.	Health care providers outside your system.	Not involved; Collaboration; Formal Alliance.
F.5.b.	Local or state public health organizations.	Not involved; Collaboration; Formal Alliance.
F.5.c.	Local or state human/social service organizations.	Not involved; Collaboration; Formal Alliance.
F.5.d.	Other local or state government.	Not involved; Collaboration; Formal Alliance.
F.5.F.	Non-profit organizations.	Not involved; Collaboration; Formal Alliance.
F.5.f.	Faith-based organizations.	Not involved; Collaboration; Formal Alliance.
F.5.g.	Health insurance companies.	Not involved; Collaboration; Formal Alliance.
F.5.h.	Schools	Not involved; Collaboration; Formal Alliance.
F.5.i.	Local businesses or chambers of commerce.	Not involved; Collaboration; Formal Alliance.
F.5.j.	Other (list).	Not involved; Collaboration; Formal Alliance.
F.6.	Does your hospital have an established patient and family advisory council that meets regularly to actively engage the perspectives of patients and families?[2]	

F.7.	Does your hospital have a policy or guidelines that facilitate unrestricted access, 24 hours a day, to hospitalized patients by family and other partners in care according to patient preference?[2]	
F.7.a.	Exists across all units[2]	
F.7.b.	Exists across some units[2]	
F.7.c.	Does not exist in any hospital unit[2]	
	[2]On questionnaire, not in database.	

ADDITIONAL INFORMATION

This data is from various sources including AHA Membership

	AHA Member code	Y=member
	Hospital name	Source: AHA membership
	Name of Chief Administrator	Source: AHA membership
	Medicare Provider Identifier (CMS Certification Number -- CCN)	Source: AHA membership
	System Identifier	Source: AHA membership
	System Primary Contact	Source: AHA membership
	System Contact's title	Source: AHA membership
	Health System Cluster Code	AHA derived field, see **Appendix G**
	Health Service Area Code	
	Health Service Area Name	Local health care markets for community-based inpatient care derived by researchers at Dartmouth Medical school for the *Dartmouth Atlas of Health Care* from a national patient origin study. Each HSA is a cluster of contiguous Zip Codes; the residents of which predominantly use one or more hospitals within the HSA.

This data is from various sources including AHA Membership

	Health Referral Region Code	
	Health Referral Region Name	Regional health care markets for tertiary medical care. Hospital referral regions were defined in the Dartmouth Atlas of Health Care by documenting where residents of hospital service areas received major cardiovascular surgical procedures and neurosurgery. Using these two services as markers for tertiary care, the hospital service areas were aggregated into hospital referral regions.

	Community Hospital Flag (consistent with *AHA Hospital Statistics)*	Use to foot to *AHA Hospital Statistics.* Derived using the following formula: state code>10 + 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

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	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	

	Database Description Document	
	FY 2017 Edition	
	Total facility employee benefits	
	Total facility expenses	
	Hospital unit payroll expenses	
	Hospital unit employee benefits	
	Hospital unit total expenses	
	Nursing home payroll expenses	
	Nursing home employee benefits	
	Nursing home total expenses	
	Full time physicians and dentists	
	Full time medical and dental residents and interns	
	Full time other trainees	
	Full time registered nurses	
	Full time licensed practical or vocational nurses	
	Full time nursing assistive personnel	
	Full time radiology technicians	
	Full time laboratory technicians	
	Full time pharmacists licensed	
	Full time pharmacists technicians	
	Full time other personnel	
	Full time total personnel	
	Part time physicians and dentists	
	Part time medical and dental residents and interns	
	Part time other trainees	
	Part time registered nurses	
	Part time licensed practical or vocational nurses	
	Part time nursing assistive personnel	
	Part time radiology technicians	
	Part time laboratory technicians	
	Part time pharmacists licensed	
	Part time pharmacists technicians	
	Part time other personnel	
	Part time total personnel	
	Total full time hospital unit personnel	
	Total part time hospital unit personnel	
	Total full time nursing home personnel	
	Total part time nursing home personnel	
	Bad debt expense	

	Revenue, Charity deduction	
	Gross patient revenue, Medicaid	
	Net patient revenue, Medicaid	
	Gross patient revenue, Medicare	
	Net patient revenue Medicare	
	Gross patient revenue, other government	
	Gross patient revenue, other non-government	
	Net patient revenue, other government	
	Net patient revenue, other non-government	
	Gross patient revenue	
	Gross inpatient revenue	
	Gross outpatient revenue	
	Total facility revenue, including bad debt	
	Total facility revenue, excluding bad debt	
	Total hospital revenue, including bad debt	
	Total nursing home revenue, including bad debt	
	Other non-operating revenue	
	Net patient revenue, including bad debt	
	Net patient revenue, excluding bad debt	
	Hospital net patient revenue, including bad debt	
	Nursing home net patient revenue, including bad debt	
	Other operating revenue, other than tax appropriations	
	Other operating revenue, tax appropriations	
	Gross patient revenue, self-pay	
	Net patient revenue, self-pay	
	Gross patient revenue, 3rd party	
	Net patient revenue, 3rd party	
	Gross patient revenue, sum by source	
	Gross patient revenue, government	
	Gross patient revenue, non-government	
	Net patient revenue, sum by source	
	Net patient revenue, government	
	Net patient revenue, non-government	

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
1	ID	NA	7	1	7	AHA Identification Number		as17dem	
	REG	NA	1	2	2	AHA Region Code		as17dem	
	STCD	NA	2	2	3	AHA State Code		as17dem	See Appendix C - Census Divisions and State Codes
	HOSPN	NA	4	4	7	AHA Hospital Number		as17dem	
2	DTBEG	N	10	8	17	Beginning of reporting period	A.1.	as17dem	MM/DD/YYYY
	DBEGM	N	2	8	9	Reporting Period Beginning Month		as17dem	
	DBEGD	N	2	11	12	Reporting Period Beginning Day		as17dem	
	DBEGY	N	4	14	17	Reporting Period Beginning Year		as17dem	
3	DTEND	N	10	18	27	End of reporting period	A.1.	as17dem	MM/DD/YYYY
	DENDM	N	2	18	19	Reporting Period End Month		as17dem	
	DENDD	N	2	21	22	Reporting Period End Day		as17dem	
	DENDY	N	4	24	27	Reporting Period End Year		as17dem	
4	DCOV	NA	3	28	30	Days open during reporting period	A.2.b.	as17dem	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.	as17dem	1=yes, 2=less than a full year
6	FISYR	N	10	32	41	Beginning date of fiscal year	A.3.	as17dem	MM/DD/YYYY
	FISM	N	2	32	33	Fiscal Year Beginning Month		as17dem	
	FISD	N	2	35	36	Fiscal Year Beginning Day		as17dem	
	FISY	N	4	38	41	Fiscal Year Beginning Year		as17dem	
7	CNTRL	NA	2	42	43	Control Code – type of authority responsible for establishing policy concerning overall operation of the hospital	B.1.	as17dem	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.	as17dem	See Appendix B - Primary Service Code Descriptions
9	SERVOTH	N	100	46	145	Special service description	B.2.	as17dem	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.	as17dem	1=yes, 0=no
11	HSACODE	NA	5	147	151	Health Service Area Code - Dartmouth		as17dem	
12	HSANAME	NA	30	152	181	Health Service Area Name - Dartmouth		as17dem	
13	HRRCODE	NA	3	182	184	Health Referral Region Code - Dartmouth		as17dem	
14	HRRNAME	NA	30	185	214	Health Referral Region Name - Dartmouth		as17dem	
15	LOS	NA	1	215	215	Short-term, long-term classification code		as17dem	1=short-term, 2=long-term, Source: AHA Membership
16	MNAME	NA	100	216	315	Hospital name		as17dem	Source: AHA Membership

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
17	MADMIN	NA	160	316	475	Name of chief administrator		as17dem	Source: AHA Membership
18	MLOCADDR	NA	60	476	535	Street address		as17dem	Source: AHA Membership
19	MLOCCITY	NA	30	536	565	City		as17dem	Source: AHA Membership
20	MLOCSTCD	NA	2	566	567	State Code		as17dem	See Appendix C - Census Divisions and State Codes
21	MLOCZIP	NA	10	568	577	ZIP code		as17dem	Source: AHA Membership
22	MSTATE	NA	2	578	579	Hospital, 2-letter state abbreviation		as17dem	Source: AHA Membership
23	AREA	NA	3	580	582	Area code		as17dem	Source: AHA Membership
24	TELNO	NA	7	583	589	Local telephone number		as17dem	Source: AHA Membership
25	RESP	NA	1	590	590	Response code		as17dem	1=yes, 2=no
26	CHC	NA	1	591	591	Community hospital code (as defined by AHA membership)		as17dem	1=community hospital, 2=not a community hospital
27	BSC	NA	1	592	592	Bed size code		as17dem	See Appendix D - Bed Size Codes
28	MHSMEMB	N	1	593	593	System member		as17dem	If SYSID is not blank then MHSMEMB = 1
29	SUBS	N	1	594	594	Does the hospital itself operate subsidiary corporations?	B.3.b.	as17dem	1=yes, 0=no
30	MNGT	N	1	595	595	Is the hospital contract managed?	B.3.c.	as17dem	1=yes, 0=no
31	MNGTNAME	NA	100	596	695	Management organization name	B.3.c.	as17dem	
32	MNGTCITY	NA	30	696	725	Management organization city	B.3.c.	as17dem	
33	MNGTSTCD	NA	2	726	727	Management organization state abbreviation	B.3.c.	as17dem	
34	NETWRK	N	1	728	728	Is the hospital a participant in a network?	B.3.d.	as17dem	1=yes, 0=no
35	NETNAME	NA	100	729	828	Network name	B.3.d.	as17dem	
36	NETCT	NA	30	829	858	Network city	B.3.d.	as17dem	
37	NETSC	NA	2	859	860	Network state	B.3.d.	as17dem	
38	NETPHONE	NA	10	861	870	Network, concatenated phone	B.3.d.	as17dem	
39	GROUP	N	1	871	871	Does the hospital participate in a group purchasing agreement?	F.2.	as17dem	1=yes, 0=no
40	GPONAME	N	100	872	971	Group purchasing organization name	F.2.	as17dem	
41	GPOCITY	N	30	972	1001	Group purchasing organization city	F.2.	as17dem	
42	GPOST	N	2	1002	1003	Group purchasing organization state	F.2.	as17dem	
43	SUPLY	N	1	1004	1004	Supplies purchased directly through distributor	F.3.	as17dem	1=yes, 0=no
44	SUPNM	N	100	1005	1104	Distributor's name	F.3.	as17dem	Literal Description
45	PHYGP	N	1	1105	1105	Is hospital owned in whole or in part by physicians or a physician group?	B.3.e.	as17dem	1=yes, 0=no
46	LTCHF	N	1	1106	1106	Freestanding LTCH	B.3.f.	as17dem	1=yes, 0=no
47	LTCHC	N	1	1107	1107	LTCH arranged within a general acute care hospital	B.3.f.	as17dem	1=yes, 0=no
48	LTNM	N	100	1108	1207	If arranged in a general acute care hospital, what is host hospital's name?	B.3.f.	as17dem	Literal Description

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
49	LTCT	N	30	1208	1237	Host hospital's city	B.3.f.	as17dem	
50	LTST	N	2	1238	1239	Host hospital's state	B.3.f.	as17dem	
51	NPINUM	N	10	1240	1249	10 Digit NPI number		as17dem	
52	CLUSTER	NA	1	1250	1250	AHA System Cluster Code		as17dem	See Appendix G - Cluster Codes
53	SYSID	NA	4	1251	1254	Health care system ID		as17dem	AHA Health Care System Identifier unique values (last four digits)
54	SYSNAME	NA	100	1255	1354	System name		as17dem	Source: AHA Membership
55	SYSADDR	NA	60	1355	1414	System address		as17dem	Source: AHA Membership
56	SYSCITY	NA	30	1415	1444	System city		as17dem	Source: AHA Membership
57	SYSST	NA	2	1445	1446	System state		as17dem	Source: AHA Membership
58	SYSZIP	NA	10	1447	1456	System ZIP code		as17dem	Source: AHA Membership
59	SYSAREA	NA	3	1457	1459	System area code		as17dem	Source: AHA Membership
60	SYSTELN	NA	8	1460	1467	System telephone number		as17dem	Source: AHA Membership
61	SYSTEM_PRIMARY_CONTACT	NA	30	1468	1497	System primary contact		as17dem	Source: AHA Membership
62	SYSTITLE	NA	100	1498	1597	System contact's title		as17dem	Source: AHA Membership
63	COMMTY	NA	1	1598	1598	Community Hospital flag - to foot to AHA Hospital Statistics™		as17dem	Y=community hospital as defined in AHA Hospital Statistics™, N=not a community hospital
64	MCRNUM	NA	6	1599	1604	Medicare Provider ID		as17dem	Sources: Centers for Medicare and Medicaid and AHA Membership
65	LAT	NA	10	1605	1614	Hospital, Latitude		as17dem	Source: Federal Emergency Management Agency. Note: UTM system.
66	LONG	NA	10	1615	1624	Hospital, Longitude		as17dem	Source: Federal Emergency Management Agency. Note: UTM system.
67	CNTYNAME	NA	60	1625	1684	County Name, State Abbreviation		as17dem	
68	CBSANAME	NA	60	1685	1744	Core-Based Statistical Area Name, State Abbreviation		as17dem	Source: U.S. Census Bureau
69	CBSATYPE	NA	8	1745	1752	Core-Based Statistical Area Type		as17dem	Metro, Micro, Rural; Source: U.S. Census Bureau (*see 'Census Division Name'* for Census Bureau Division names*)*
70	CBSACODE	NA	5	1753	1757	Core-Based Statistical Area Code		as17dem	Source: U.S. Census Bureau (*see 'Census Division Code'* for Census Bureau Division codes)
71	DIVNAME	NA	60	1758	1817	Metropolitan Division name		as17dem	Source: U.S. Census Bureau
72	DIVCODE	NA	5	1818	1822	Metropolitan Division code		as17dem	Source: U.S. Census Bureau
73	CSANAME	NA	60	1823	1882	Combined Statistical Area name		as17dem	Source: U.S. Census Bureau
74	CSACODE	NA	3	1883	1885	Combined Statistical Area code		as17dem	Source: U.S. Census Bureau
75	MCNTYCD	NA	3	1886	1888	Modified FIPS County Code		as17dem	AHA derived code
76	FCOUNTY	NA	5	1889	1893	FIPS State and County Code		as17dem	Source: U.S. Census Bureau
77	FSTCD	NA	2	1894	1895	FIPS State code		as17dem	Source: U.S. Census Bureau
78	FCNTYCD	NA	3	1896	1898	FIPS County code		as17dem	Source: U.S. Census Bureau
79	CITYRK	NA	3	1899	1901	Ranking of 100 largest cities		as17dem	See Appendix F - City Rank Code

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
80	MAPP1	NA	1	1902	1902	Accreditation by The Joint Commission		as17dem	1=yes, 2=no; Source: The Joint Commission
81	MAPP2	NA	1	1903	1903	Cancer program approved by American College of Surgeons		as17dem	1=yes, 2=no; Source: American College of Surgeons, Commission on Cancer
82	MAPP3	NA	1	1904	1904	Participating site recognized for one or more Accreditation Council for Graduate Medical Education accredited programs		as17dem	1=yes, 2=no; Source: Accreditation Council of Graduate Medical Education (ACGME)
83	MAPP5	NA	1	1905	1905	Medical school affiliation reported to American Medical Association		as17dem	1=yes, 2=no; Source: American Medical Association
84	MAPP7	NA	1	1906	1906	Accreditation by Commission on Accreditation of Rehabilitation Facilities (CARF)		as17dem	1=yes, 2=no; Source: Commission on Accreditation of Rehabilitation Facilities
85	MAPP8	NA	1	1907	1907	Member of Council of Teaching Hospital of the Association of American Medical Colleges (COTH)		as17dem	1=yes, 2=no; Source: Association of American Medical Colleges
86	MAPP10	NA	1	1908	1908	Medicare certification by the U.S. Department of Health and Human Services		as17dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
87	MAPP11	NA	1	1909	1909	Accreditation by Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Association		as17dem	1=yes, 2=no; Source: Healthcare Facilities Accreditation Program
88	MAPP12	NA	1	1910	1910	Internship approved by American Osteopathic Association		as17dem	1=yes, 2=no; Source: American Osteopathic Association
89	MAPP13	NA	1	1911	1911	Residency approved by American Osteopathic Association		as17dem	1=yes, 2=no; Source: American Osteopathic Association
90	MAPP16	NA	1	1912	1912	Catholic Church Operated		as17dem	1=yes, 2=no
91	MAPP18	NA	1	1913	1913	Critical Access Hospital		as17dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
92	MAPP19	NA	1	1914	1914	Rural Referral Center		as17dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
93	MAPP20	NA	1	1915	1915	Sole Community Provider		as17dem	1=yes, 2=no; Source: Centers for Medicare and Medicaid
94	MAPP21	NA	1	1916	1916	DNV Healthcare Accreditation		as17dem	1=yes, 2=no; Source: DNV Healthcare
95	MAPP22	NA	1	1917	1917	Center for Improvement in Healthcare Quality accreditation		as17dem	1=yes, 2=no; Source: Center for Improvement in Healthcare Quality
96	AHAMBR	NA	1	1918	1918	AHA Membership Flag		as17dem	1=yes, 0=no
97	SNT	N	1	1919	1919	Does your hospital provide services through one or more satellite facilities?	F.1.	as17dem	1=yes, 0=no
98	SPCC	N	1	1920	1920	Primary care clinic - satellite facility	F.1.a.a.	as17dem	1=yes
99	SPCCN	N	4	1921	1924	Primary care clinic - number of facilities	F.1.a.a.	as17dem	Number of facilities

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
100	SSC	N	1	1925	1925	Specialty clinic - satellite facility	F.1.a.b.	as17dem	1=yes
101	SSCN	N	4	1926	1929	Specialty clinic - number of facilities	F.1.a.b.	as17dem	Number of facilities
102	SUCAR	N	1	1930	1930	Urgent care - satellite facility	F.1.a.c.	as17dem	1=yes
103	SUCARN	N	4	1931	1934	Urgent care - number of facilities	F.1.a.c.	as17dem	Number of facilities
104	SAMBS	N	1	1935	1935	Ambulatory surgery - satellite facility	F.1.a.d.	as17dem	1=yes
105	SAMBSN	N	4	1936	1939	Ambulatory surgery - number of facilities	F.1.a.d.	as17dem	Number of facilities
106	SRHB	N	1	1940	1940	Rehabilitation - satellite facility	F.1.a.e.	as17dem	1=yes
107	SRHBN	N	4	1941	1944	Rehabilitation - number of facilities	F.1.a.e.	as17dem	Number of facilities
108	SPSY	N	1	1945	1945	Psychiatric care - satellite facility	F.1.a.f.	as17dem	1=yes
109	SPSYN	N	4	1946	1949	Psychiatric care - number of facilities	F.1.a.f.	as17dem	Number of facilities
110	SALOP	N	1	1950	1950	Substance abuse/chemical dependency - satellite facility	F.1.a.g.	as17dem	1=yes
111	SALOPN	N	4	1951	1954	Substance abuse/chemical dependency - number of facilities	F.1.a.g.	as17dem	Number of facilities
112	SSNR	N	1	1955	1955	Skilled nursing - satellite facility	F.1.a.h.	as17dem	1=yes
113	SSNRN	N	4	1956	1959	Skilled nursing - number of facilities	F.1.a.h.	as17dem	Number of facilities
114	SRSCR	N	1	1960	1960	Residential care - satellite facility	F.1.a.i.	as17dem	1=yes
115	SRSCRN	N	4	1961	1964	Residential care - number of facilities	F.1.a.i.	as17dem	Number of facilities
116	SOEXC	N	1	1965	1965	Other extended care - satellite facility	F.1.a.j.	as17dem	1=yes
117	SOEXCN	N	4	1966	1969	Other extended care - number of facilities	F.1.a.j.	as17dem	Number of facilities
118	SLAB	N	1	1970	1970	Laboratory - satellite facility	F.1.a.k.	as17dem	1=yes
119	SLABN	N	4	1971	1974	Laboratory - number of facilities	F.1.a.k.	as17dem	Number of facilities
120	SDMRI	N	1	1975	1975	Diagnostic imaging center - satellite facility	F.1.a.l.	as17dem	1=yes
121	SDMRIN	N	4	1976	1979	Diagnostic imaging center - number of facilities	F.1.a.l.	as17dem	Number of facilities
122	OTHSAT	N	1	1980	1980	Other - satellite facility	F.1.a.m.	as17dem	1=yes
123	OTHSATN	N	4	1981	1984	Other - number of facilities	F.1.a.m.	as17dem	Number of facilities
124	SUNITS	N	1	1985	1985	Does the hospital maintain a separate nursing home type of long-term care unit?		as17dem	1=yes, 0=no
125	IPAHOS	N	1	1986	1986	Independent practice association - hospital	C.105.a.	as17dem	1=yes, 0=no
126	IPASYS	N	1	1987	1987	Independent practice association - health system	C.105.a.	as17dem	1=yes, 0=no
127	IPANET	N	1	1988	1988	Independent practice association - network	C.105.a.	as17dem	1=yes, 0=no
128	GPWWHOS	N	1	1989	1989	Group practice without walls - hospital	C.105.b.	as17dem	1=yes, 0=no
129	GPWWSYS	N	1	1990	1990	Group practice without walls - health system	C.105.b.	as17dem	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
130	GPWWNET	N	1	1991	1991	Group practice without walls - network	C.105.b.	as17dem	1=yes, 0=no
131	OPHOHOS	N	1	1992	1992	Open physician-hospital organization - hospital	C.105.c.	as17dem	1=yes, 0=no
132	OPHOSYS	N	1	1993	1993	Open physician-hospital organization - health system	C.105.c.	as17dem	1=yes, 0=no
133	OPHONET	N	1	1994	1994	Open physician-hospital organization - network	C.105.c.	as17dem	1=yes, 0=no
134	CPHOHOS	N	1	1995	1995	Closed physician-hospital organization - hospital	C.105.d.	as17dem	1=yes, 0=no
135	CPHOSYS	N	1	1996	1996	Closed physician-hospital organization - health system	C.105.d.	as17dem	1=yes, 0=no
136	CPHONET	N	1	1997	1997	Closed physician-hospital organization - network	C.105.d.	as17dem	1=yes, 0=no
137	MSOHOS	N	1	1998	1998	Management service organization - hospital	C.105.e.	as17dem	1=yes, 0=no
138	MSOSYS	N	1	1999	1999	Management service organization - health system	C.105.e.	as17dem	1=yes, 0=no
139	MSONET	N	1	2000	2000	Management service organization - network	C.105.e.	as17dem	1=yes, 0=no
140	ISMHOS	N	1	2001	2001	Integrated salary model - hospital	C.105.f.	as17dem	1=yes, 0=no
141	ISMSYS	N	1	2002	2002	Integrated salary model - health system	C.105.f.	as17dem	1=yes, 0=no
142	ISMNET	N	1	2003	2003	Integrated salary model - network	C.105.f.	as17dem	1=yes, 0=no
143	EQMODHOS	N	1	2004	2004	Equity model - hospital	C.105.g.	as17dem	1=yes, 0=no
144	EQMODSYS	N	1	2005	2005	Equity model - health system	C.105.g.	as17dem	1=yes, 0=no
145	EQMODNET	N	1	2006	2006	Equity model - network	C.105.g.	as17dem	1=yes, 0=no
146	FOUNDHOS	N	1	2007	2007	Foundation - hospital	C.105.h.	as17dem	1=yes, 0=no
147	FOUNDSYS	N	1	2008	2008	Foundation - health system	C.105.h.	as17dem	1=yes, 0=no
148	FOUNDNET	N	1	2009	2009	Foundation - network	C.105.h.	as17dem	1=yes, 0=no
149	PHYOTH	N	100	2010	2109	Other, please specify	C.105.i.	as17dem	Literal Description
150	PHYHOS	N	1	2110	2110	Other - hospital	C.105.i.	as17dem	1=yes, 0=no
151	PHYSYS	N	1	2111	2111	Other - health system	C.105.i.	as17dem	1=yes, 0=no
152	PHYNET	N	1	2112	2112	Other - network	C.105.i.	as17dem	1=yes, 0=no
153	INSPT	N	1	2113	2113	Hospital/system partners with insurer to offer insurance products	D.1.b.	as17dem	1=yes, 0=no
154	INSPRD	N	1	2114	2114	Hospital/system offers insurance products (via ownership or joint venture)	D.1.c.	as17dem	1=yes, 0=no
155	MEDADHOS	N	1	2115	2115	Medicare advantage - hospital	D.1.d.1.	as17dem	1=yes
156	MEDADSYS	N	1	2116	2116	Medicare advantage - system	D.1.d.1.	as17dem	1=yes
157	MEDADVEN	N	1	2117	2117	Medicare advantage - joint venture	D.1.d.1.	as17dem	1=yes
158	MEDADN	N	1	2118	2118	Medicare advantage - no	D.1.d.1.	as17dem	1=yes
159	MEDADDK	N	1	2119	2119	Medicare advantage - do not know	D.1.d.1.	as17dem	1=yes
160	MMCHOS	N	1	2120	2120	Medicaid managed care - hospital	D.1.d.2.	as17dem	1=yes

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
161	MMCSYS	N	1	2121	2121	Medicaid managed care - system	D.1.d.2.	as17dem	1=yes
162	MMCVEN	N	1	2122	2122	Medicaid managed care - joint venture	D.1.d.2.	as17dem	1=yes
163	MMCN	N	1	2123	2123	Medicaid managed care - no	D.1.d.2.	as17dem	1=yes
164	MMCDK	N	1	2124	2124	Medicaid managed care - do not know	D.1.d.2.	as17dem	1=yes
165	HLINHOS	N	1	2125	2125	Health insurance marketplace (exchange) - hospital	D.1.d.3.	as17dem	1=yes
166	HLINSYS	N	1	2126	2126	Health insurance marketplace (exchange) - system	D.1.d.3.	as17dem	1=yes
167	HLINVEN	N	1	2127	2127	Health insurance marketplace (exchange) - joint venture	D.1.d.3.	as17dem	1=yes
168	HLINN	N	1	2128	2128	Health insurance marketplace (exchange) - no	D.1.d.3.	as17dem	1=yes
169	HLINDK	N	1	2129	2129	Health insurance marketplace (exchange) - do not know	D.1.d.3.	as17dem	1=yes
170	OTHIMHOS	N	1	2130	2130	Other individual market - hospital	D.1.d.4.	as17dem	1=yes
171	OTHIMSYS	N	1	2131	2131	Other individual market - system	D.1.d.4.	as17dem	1=yes
172	OTHIMVEN	N	1	2132	2132	Other individual market - joint venture	D.1.d.4.	as17dem	1=yes
173	OTHIMN	N	1	2133	2133	Other individual market - no	D.1.d.4.	as17dem	1=yes
174	OTHIMDK	N	1	2134	2134	Other individual market - do not know	D.1.d.4.	as17dem	1=yes
175	SMGRPHOS	N	1	2135	2135	Small group - hospital	D.1.d.5.	as17dem	1=yes
176	SMGRPSYS	N	1	2136	2136	Small group - system	D.1.d.5.	as17dem	1=yes
177	SMGRPVEN	N	1	2137	2137	Small group - joint venture	D.1.d.5.	as17dem	1=yes
178	SMGRPN	N	1	2138	2138	Small group - no	D.1.d.5.	as17dem	1=yes
179	SMGPDK	N	1	2139	2139	Small group - do not know	D.1.d.5.	as17dem	1=yes
180	LGRPHOS	N	1	2140	2140	Large group - hospital	D.1.d.6.	as17dem	1=yes
181	LGRPSYS	N	1	2141	2141	Large group - system	D.1.d.6.	as17dem	1=yes
182	LGRPVEN	N	1	2142	2142	Large group - joint venture	D.1.d.6.	as17dem	1=yes
183	LGRPN	N	1	2143	2143	Large group - no	D.1.d.6.	as17dem	1=yes
184	LGRPDK	N	1	2144	2144	Large group - do not know	D.1.d.6.	as17dem	1=yes
185	CPPCT	N	4	2145	2148	What % of the hospital's patient revenue is paid on a capitated basis?	D.5.	as17dem	
186	BNDPAY	N	1	2149	2149	Does the hospital participate in a bundled payment program?	D.6.	as17dem	1=yes, 0=no
187	BNDRSK	N	1	2150	2150	Hospital shares upside or downside risk for outside providers	D.6.a.	as17dem	1=yes, 0=no
188	BNDPCT	N	3	2151	2153	Percent of hospital's patient revenue paid through bundled payment arrangements	D.6.b.	as17dem	
189	CAPRSK	N	4	2154	2157	What % of the hospital's net patient revenue is paid on a shared risk basis?	D.7.	as17dem	

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
190	CAPCON94	N	1	2158	2158	Does the hospital contract directly with employers or a coalition of employers to provide care on a capitated, predetermined or shared risk basis?	D.8.	as17dem	1=yes, 0=no
191	BHER	N	1	2159	2159	Emergency services integrated with behavioral health care	C.104.a.	as17dem	1=yes, 0=no
192	BHPCS	N	1	2160	2160	Primary care services integrated with behavioral health care	C.104.b.	as17dem	1=yes, 0=no
193	BHACAR	N	1	2161	2161	Acute inpatient care integrated with behavioral health care	C.104.c.	as17dem	1=yes, 0=no
194	BHXCAR	N	1	2162	2162	Extended care integrated with behavioral health care	C.104.d.	as17dem	1=yes, 0=no
195	IPAP	N	8	2163	2170	Number of physicians, Independent Practice Association	C.105.a.	as17dem	
196	GPWP	N	8	2171	2178	Number of physicians, Group Practice without walls	C.105.b.	as17dem	
197	OPHP	N	8	2179	2186	Number of physicians, Open Physician-Hospital Organization (PHO)	C.105.c.	as17dem	
198	CPHP	N	8	2187	2194	Number of physicians, Closed Physician-Hospital Organization (PHO)	C.105.d.	as17dem	
199	MSOP	N	8	2195	2202	Number of physicians, Management Service Organization (MSO)	C.105.e.	as17dem	
200	ISMP	N	8	2203	2210	Number of physicians, Integrated Salary Model	C.105.f.	as17dem	
201	EQMP	N	8	2211	2218	Number of physicians, Equity Model	C.105.g.	as17dem	
202	FNDP	N	8	2219	2226	Number of physicians, Foundation	C.105.h.	as17dem	
203	PHYP	N	8	2227	2234	Number of physicians, Other	C.105.i.	as17dem	
204	FTMT	N	8	2235	2242	Total physicians engaged in arrangement with hospital	C.106.	as17dem	Number of physicians
205	JNTPH	N	1	2243	2243	Does your hospital participate in any joint venture arrangements with physicians or physician groups?	C.107.a.	as17dem	1=yes, 0=no
206	JNLS	N	1	2244	2244	Limited Service Hospital	C.107.b.1.	as17dem	1=yes, 0=no
207	JNTAMB	N	1	2245	2245	Ambulatory Surgical Centers	C.107.b.2.	as17dem	1=yes, 0=no
208	JNTCTR	N	1	2246	2246	Imaging Centers	C.107.b.3.	as17dem	1=yes, 0=no
209	JNTOTH	N	1	2247	2247	Other	C.107.b.4.	as17dem	1=yes, 0=no
210	LSHTXT	N	100	2248	2347	Joint other description	C.107.b.4. other	as17dem	Literal Description
211	JNTLSC	N	1	2348	2348	Cardiac - Limited Service Hospital	C.107.c.1.	as17dem	1=yes, 0=no
212	JNTLSO	N	1	2349	2349	Orthopedic - Limited Service Hospital	C.107.c.2.	as17dem	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
213	JNTLSS	N	1	2350	2350	Surgical - Limited Service Hospital	C.107.c.3.	as17dem	1=yes, 0=no
214	JNTLST	N	1	2351	2351	Other - Limited Service Hospital	C.107.c.4.	as17dem	1=yes, 0=no
215	JNTTXT	N	100	2352	2451	Limited Service Hospital other description	C.107.c.4 other	as17dem	Literal Description
216	JNTMD	N	1	2452	2452	Does hospital participate in joint venture arrangements with organizations other than physician groups?	C.107.d.	as17dem	1=yes, 0=no
217	ACO	N	1	2453	2453	Has your hospital or health care system established an accountable care organization (ACO)?	D.10.	as17dem	1=yes, 0=no
218	AMCDCD	N	1	2454	2454	ACO patient population - Medicaid	D.10.a.1.	as17dem	1=yes, 0=no
219	AMCDCR	N	1	2455	2455	ACO patient population - Medicare	D.10.a.2.	as17dem	1=yes, 0=no
220	APOINS	N	1	2456	2456	ACO patient population - Privately insured	D.10.a.3.	as17dem	1=yes, 0=no
221	APDTE	N	1	2457	2457	ACO patient population - Direct to employer	D.10.a.4.	as17dem	1=yes, 0=no
222	APOHO	N	1	2458	2458	ACO patient population - Other	D.10.a.5.	as17dem	1=yes, 0=no
223	ACOPO	N	100	2459	2558	ACO patient population - Other description	D.10.a.5.	as17dem	Literal Description
224	MEDHME	N	1	2559	2559	*Hospital* established a medical home program	D.12.a.	as17dem	1=yes, 0=no
225	MEDHSE	N	1	2560	2560	*System* established a medical home program	D.12.b.	as17dem	1=yes, 0=no
226	CINHSP	N	1	2561	2561	*Hospital* established a clinically integrated network	D.13.a.	as17dem	1=yes, 0=no
227	CINSYS	N	1	2562	2562	*System* established a clinically integrated network	D.13.b.	as17dem	1=yes, 0=no
228	HCOCA	N	1	2563	2563	Partnership for population health improvement - Healthcare providers outside your system	F.5.a.	as17dem	1=not involved, 2=collaboration, 3=formal alliance
229	LORGA	N	1	2564	2564	Partnership for population health improvement - Local or state public health organizations	F.5.b.	as17dem	1=not involved, 2=collaboration, 3=formal alliance
230	LORGCA	N	1	2565	2565	Partnership for population health improvement - Local or state human/social service organizations	F.5.c.	as17dem	1=not involved, 2=collaboration, 3=formal alliance
231	OTLSGDC	N	1	2566	2566	Partnership for population health improvement - Other local or state government	F.5.d.	as17dem	1=not involved, 2=collaboration, 3=formal alliance
232	NPOEA	N	1	2567	2567	Partnership for population health improvement - Non-profit organizations	F.5.e.	as17dem	1=not involved, 2=collaboration, 3=formal alliance

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
233	FBOFA	N	1	2568	2568	Partnership for population health improvement - Faith-based organizations	F.5.f.	as17dem	1=not involved, 2=collaboration, 3=formal alliance
234	HICGA	N	1	2569	2569	Partnership for population health improvement - Health insurance companies	F.5.g.	as17dem	1=not involved, 2=collaboration, 3=formal alliance
235	SCHHA	N	1	2570	2570	Partnership for population health improvement - Schools	F.5.h.	as17dem	1=not involved, 2=collaboration, 3=formal alliance
236	LBCCIA	N	1	2571	2571	Partnership for population health improvement - Local business or chambers of commerce	F.5.i.	as17dem	1=not involved, 2=collaboration, 3=formal alliance
237	OTHINTA	N	1	2572	2572	Partnership for population health improvement - Other	F.5.j.	as17dem	1=not involved, 2=collaboration, 3=formal alliance
238	OTHPART	N	100	2573	2672	Partnership for population health improvement - Other description	F.5.j.	as17dem	Literal Description
239	GENBD	N	4	2673	2676	General medical and surgical (adult) beds	C.1.	as17svc1	
240	PEDBD	N	4	2677	2680	General medical and surgical (pediatric) beds	C.2.	as17svc1	
241	OBLEV	N	1	2681	2681	Obstetric unit care level	C.3.	as17svc1	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
242	OBBD	N	4	2682	2685	Obstetric care beds	C.3.	as17svc1	
243	MSICBD	N	4	2686	2689	Medical/surgical intensive care beds	C.4.	as17svc1	
244	CICBD	N	4	2690	2693	Cardiac intensive care beds	C.5.	as17svc1	
245	NICBD	N	4	2694	2697	Neonatal intensive care beds	C.6.	as17svc1	
246	NINTBD	N	4	2698	2701	Neonatal intermediate care beds	C.7.	as17svc1	
247	PEDICBD	N	4	2702	2705	Pediatric intensive care beds	C.8.	as17svc1	
248	BRNBD	N	4	2706	2709	Burn care beds	C.9.	as17svc1	
249	SPCICBD	N	4	2710	2713	Other special care beds	C.10.	as17svc1	
250	OSPOTH	N	100	2714	2813	Other special care beds, description	C.10.	as17svc1	Literal Description
251	OTHICBD	N	4	2814	2817	Other intensive care beds	C.11.	as17svc1	
252	OTHIC	N	100	2818	2917	Other intensive care beds, description	C.11.	as17svc1	Literal Description
253	REHABBD	N	4	2918	2921	Physical rehabilitation care beds	C.12.	as17svc1	
254	ALCHBD	N	4	2922	2925	Alcohol/drug abuse or dependency inpatient care beds	C.13.	as17svc1	
255	PSYBD	N	4	2926	2929	Psychiatric care beds	C.14.	as17svc1	
256	SNBD88	N	4	2930	2933	Skilled nursing care beds	C.15.	as17svc1	
257	ICFBD88	N	4	2934	2937	Intermediate nursing care beds	C.16.	as17svc1	
258	ACULTBD	N	4	2938	2941	Acute long-term care beds	C.17.	as17svc1	
259	OTHLBD94	N	4	2942	2945	Other long-term care beds	C.18.	as17svc1	

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
260	OTHBD94	N	4	2946	2949	Other care beds	C.19.	as17svc1	
261	OTHOTH	N	100	2950	3049	Other care beds, description	C.19.	as17svc1	Literal Description
262	HOSPBD	N	4	3050	3053	Total hospital beds (calculated)		as17svc1	Calculated Field: Sum of all individual bed counts
263	GENHOS	N	1	3054	3054	General medical and surgical care (adult) - hospital	C.1.	as17svc1	1=yes, 0=no
264	GENSYS	N	1	3055	3055	General medical and surgical care (adult) - health system	C.1.	as17svc1	1=yes, 0=no
265	GENVEN	N	1	3056	3056	General medical and surgical care (adult) - joint venture	C.1.	as17svc1	1=yes, 0=no
266	PEDHOS	N	1	3057	3057	General medical and surgical care (pediatric) - hospital	C.2.	as17svc1	1=yes, 0=no
267	PEDSYS	N	1	3058	3058	General medical and surgical care (pediatric) - health system	C.2.	as17svc1	1=yes, 0=no
268	PEDVEN	N	1	3059	3059	General medical and surgical care (pediatric) - joint venture	C.2.	as17svc1	1=yes, 0=no
269	OBHOS	N	1	3060	3060	Obstetrics care - hospital	C.3.	as17svc1	1=yes, 0=no
270	OBSYS	N	1	3061	3061	Obstetrics care - health system	C.3.	as17svc1	1=yes, 0=no
271	OBVEN	N	1	3062	3062	Obstetrics care - joint venture	C.3.	as17svc1	1=yes, 0=no
272	MSICHOS	N	1	3063	3063	Medical/surgical intensive care - hospital	C.4.	as17svc1	1=yes, 0=no
273	MSICSYS	N	1	3064	3064	Medical/surgical intensive care - health system	C.4.	as17svc1	1=yes, 0=no
274	MSICVEN	N	1	3065	3065	Medical/surgical intensive care - joint venture	C.4.	as17svc1	1=yes, 0=no
275	CICHOS	N	1	3066	3066	Cardiac intensive care - hospital	C.5.	as17svc1	1=yes, 0=no
276	CICSYS	N	1	3067	3067	Cardiac intensive care - health system	C.5.	as17svc1	1=yes, 0=no
277	CICVEN	N	1	3068	3068	Cardiac intensive care - joint venture	C.5.	as17svc1	1=yes, 0=no
278	NICHOS	N	1	3069	3069	Neonatal intensive care - hospital	C.6.	as17svc1	1=yes, 0=no
279	NICSYS	N	1	3070	3070	Neonatal intensive care - health system	C.6.	as17svc1	1=yes, 0=no
280	NICVEN	N	1	3071	3071	Neonatal intensive care - joint venture	C.6.	as17svc1	1=yes, 0=no
281	NINTHOS	N	1	3072	3072	Neonatal intermediate care - hospital	C.7.	as17svc1	1=yes, 0=no
282	NINTSYS	N	1	3073	3073	Neonatal intermediate care - health system	C.7.	as17svc1	1=yes, 0=no
283	NINTVEN	N	1	3074	3074	Neonatal intermediate care - joint venture	C.7.	as17svc1	1=yes, 0=no
284	PEDICHOS	N	1	3075	3075	Pediatric intensive care - hospital	C.8.	as17svc1	1=yes, 0=no
285	PEDICSYS	N	1	3076	3076	Pediatric intensive care - health system	C.8.	as17svc1	1=yes, 0=no
286	PEDICVEN	N	1	3077	3077	Pediatric intensive care - joint venture	C.8.	as17svc1	1=yes, 0=no
287	BRNHOS	N	1	3078	3078	Burn care - hospital	C.9.	as17svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
288	BRNSYS	N	1	3079	3079	Burn care - health system	C.9.	as17svc1	1=yes, 0=no
289	BRNVEN	N	1	3080	3080	Burn care - joint venture	C.9.	as17svc1	1=yes, 0=no
290	SPCICHOS	N	1	3081	3081	Other special care - hospital	C.10.	as17svc1	1=yes, 0=no
291	SPCICSYS	N	1	3082	3082	Other special care - health system	C.10.	as17svc1	1=yes, 0=no
292	SPCICVEN	N	1	3083	3083	Other special care - joint venture	C.10.	as17svc1	1=yes, 0=no
293	OTHIHOS	N	1	3084	3084	Other intensive care - hospital	C.11.	as17svc1	1=yes, 0=no
294	OTHISYS	N	1	3085	3085	Other intensive care - health system	C.11.	as17svc1	1=yes, 0=no
295	OTHIVEN	N	1	3086	3086	Other intensive care - joint venture	C.11.	as17svc1	1=yes, 0=no
296	REHABHOS	N	1	3087	3087	Physical rehabilitation care - hospital	C.12.	as17svc1	1=yes, 0=no
297	REHABSYS	N	1	3088	3088	Physical rehabilitation care - health system	C.12.	as17svc1	1=yes, 0=no
298	REHABVEN	N	1	3089	3089	Physical rehabilitation care - joint venture	C.12.	as17svc1	1=yes, 0=no
299	ALCHHOS	N	1	3090	3090	Alcoholism/chemical dependency inpatient care - hospital	C.13.	as17svc1	1=yes, 0=no
300	ALCHSYS	N	1	3091	3091	Alcoholism/chemical dependency inpatient care - health system	C.13.	as17svc1	1=yes, 0=no
301	ALCHVEN	N	1	3092	3092	Alcoholism/chemical dependency inpatient care - joint venture	C.13.	as17svc1	1=yes, 0=no
302	PSYHOS	N	1	3093	3093	Psychiatric care - hospital	C.14.	as17svc1	1=yes, 0=no
303	PSYSYS	N	1	3094	3094	Psychiatric care - health system	C.14.	as17svc1	1=yes, 0=no
304	PSYVEN	N	1	3095	3095	Psychiatric care - joint venture	C.14.	as17svc1	1=yes, 0=no
305	SNHOS	N	1	3096	3096	Skilled nursing care - hospital	C.15.	as17svc1	1=yes, 0=no
306	SNSYS	N	1	3097	3097	Skilled nursing care - health system	C.15.	as17svc1	1=yes, 0=no
307	SNVEN	N	1	3098	3098	Skilled nursing care - joint venture	C.15.	as17svc1	1=yes, 0=no
308	ICFHOS	N	1	3099	3099	Intermediate nursing care - hospital	C.16.	as17svc1	1=yes, 0=no
309	ICFSYS	N	1	3100	3100	Intermediate nursing care - health system	C.16.	as17svc1	1=yes, 0=no
310	ICFVEN	N	1	3101	3101	Intermediate nursing care - joint venture	C.16.	as17svc1	1=yes, 0=no
311	ACUHOS	N	1	3102	3102	Acute long-term care - hospital	C.17.	as17svc1	1=yes, 0=no
312	ACUSYS	N	1	3103	3103	Acute long-term care - health system	C.17.	as17svc1	1=yes, 0=no
313	ACUVEN	N	1	3104	3104	Acute long-term care - joint venture	C.17.	as17svc1	1=yes, 0=no
314	OTHLTHOS	N	1	3105	3105	Other long-term care - hospital	C.18.	as17svc1	1=yes, 0=no
315	OTHLTSYS	N	1	3106	3106	Other long-term care - health system	C.18.	as17svc1	1=yes, 0=no
316	OTHLTVEN	N	1	3107	3107	Other long-term care - joint venture	C.18.	as17svc1	1=yes, 0=no
317	OTHCRHOS	N	1	3108	3108	Other care - hospital	C.19.	as17svc1	1=yes, 0=no
318	OTHCRSYS	N	1	3109	3109	Other care - health system	C.19.	as17svc1	1=yes, 0=no
319	OTHCRVEN	N	1	3110	3110	Other care - joint venture	C.19.	as17svc1	1=yes, 0=no
320	ADULTHOS	N	1	3111	3111	Adult day care program - hospital	C.20.	as17svc1	1=yes, 0=no
321	ADULTSYS	N	1	3112	3112	Adult day care program - health system	C.20.	as17svc1	1=yes, 0=no
322	ADULTVEN	N	1	3113	3113	Adult day care program - joint venture	C.20.	as17svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
323	AIRBHOS	N	1	3114	3114	Airborne infection isolation room - hospital	C.21.	as17svc1	1=yes, 0=no
324	AIRBSYS	N	1	3115	3115	Airborne infection isolation room - health system	C.21.	as17svc1	1=yes, 0=no
325	AIRBVEN	N	1	3116	3116	Airborne infection isolation room - joint venture	C.21.	as17svc1	1=yes, 0=no
326	AIRBROOM	N	4	3117	3120	Number of airborne infection isolation rooms	C.21.	as17svc1	Number of rooms
327	ALDBD	N	4	3121	3124	Alcoholism/chemical dependency pediatric services beds	C.22.a.	as17svc1	
328	ALCPDHOS	N	1	3125	3125	Alcoholism/chemical dependency pediatric services - hospital	C.22.a.	as17svc1	1=yes, 0=no
329	ALCPDSYS	N	1	3126	3126	Alcoholism/chemical dependency pediatric services - health system	C.22.a.	as17svc1	1=yes, 0=no
330	ALCPDVEN	N	1	3127	3127	Alcoholism/chemical dependency pediatric services - joint venture	C.22.a.	as17svc1	1=yes, 0=no
331	ALCOPHOS	N	1	3128	3128	Alcoholism/chemical dependency outpatient services - hospital	C.22.b.	as17svc1	1=yes, 0=no
332	ALCOPSYS	N	1	3129	3129	Alcoholism/chemical dependency outpatient services - health system	C.22.b.	as17svc1	1=yes, 0=no
333	ALCOPVEN	N	1	3130	3130	Alcoholism/chemical dependency outpatient services - joint venture	C.22.b.	as17svc1	1=yes, 0=no
334	ALCPRHOS	N	1	3131	3131	Alcoholism/chemical partial hospitalization services - hospital	C.22.c.	as17svc1	1=yes, 0=no
335	ALCPRSYS	N	1	3132	3132	Alcoholism/chemical partial hospitalization services - health system	C.22.c.	as17svc1	1=yes, 0=no
336	ALCPRVEN	N	1	3133	3133	Alcoholism/chemical dependency partial hospitalization services - joint venture	C.22.c.	as17svc1	1=yes, 0=no
337	ALZHOS	N	1	3134	3134	Alzheimer Center - hospital	C.23.	as17svc1	1=yes, 0=no
338	ALZSYS	N	1	3135	3135	Alzheimer Center - health system	C.23.	as17svc1	1=yes, 0=no
339	ALZVEN	N	1	3136	3136	Alzheimer Center - joint venture	C.23.	as17svc1	1=yes, 0=no
340	AMBHOS	N	1	3137	3137	Ambulance services - hospital	C.24.	as17svc1	1=yes, 0=no
341	AMBSYS	N	1	3138	3138	Ambulance services - health system	C.24.	as17svc1	1=yes, 0=no
342	AMBVEN	N	1	3139	3139	Ambulance services - joint venture	C.24.	as17svc1	1=yes, 0=no
343	AMBSHOS	N	1	3140	3140	Ambulatory surgery center - hospital	C.25.	as17svc1	1=yes, 0=no
344	AMBSSYS	N	1	3141	3141	Ambulatory surgery center - health system	C.25.	as17svc1	1=yes, 0=no
345	AMBSVEN	N	1	3142	3142	Ambulatory surgery center - joint venture	C.25.	as17svc1	1=yes, 0=no
346	ARTHCHOS	N	1	3143	3143	Arthritis treatment center - hospital	C.26.	as17svc1	1=yes, 0=no
347	ARTHCSYS	N	1	3144	3144	Arthritis treatment center - health system	C.26.	as17svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
348	ARTHCVEN	N	1	3145	3145	Arthritis treatment center - joint venture	C.26.	as17svc1	1=yes, 0=no
349	ASSTLHOS	N	1	3146	3146	Assisted living services - hospital	C.27.	as17svc1	1=yes, 0=no
350	ASSTLSYS	N	1	3147	3147	Assisted living services - health system	C.27.	as17svc1	1=yes, 0=no
351	ASSTLVEN	N	1	3148	3148	Assisted living services - joint venture	C.27.	as17svc1	1=yes, 0=no
352	AUXHOS	N	1	3149	3149	Auxiliary - hospital	C.28.	as17svc1	1=yes, 0=no
353	AUXSYS	N	1	3150	3150	Auxiliary - health system	C.28.	as17svc1	1=yes, 0=no
354	AUXVEN	N	1	3151	3151	Auxiliary - joint venture	C.28.	as17svc1	1=yes, 0=no
355	BWHTHOS	N	1	3152	3152	Bariatric/weight control services - hospital	C.29.	as17svc1	1=yes, 0=no
356	BWHTSYS	N	1	3153	3153	Bariatric/weight control services - health system	C.29.	as17svc1	1=yes, 0=no
357	BWHTVEN	N	1	3154	3154	Bariatric/weight control services - joint venture	C.29.	as17svc1	1=yes, 0=no
358	BROOMHOS	N	1	3155	3155	Birthing room/LDR room/LDRP room - hospital	C.30.	as17svc1	1=yes, 0=no
359	BROOMSYS	N	1	3156	3156	Birthing room/LDR room/LDRP room - health system	C.30.	as17svc1	1=yes, 0=no
360	BROOMVEN	N	1	3157	3157	Birthing room/LDR room/LDRP room - joint venture	C.30.	as17svc1	1=yes, 0=no
361	BLDOHOS	N	1	3158	3158	Blood Donor Center - hospital	C.31.	as17svc1	1=yes, 0=no
362	BLDOSYS	N	1	3159	3159	Blood Donor Center - health system	C.31.	as17svc1	1=yes, 0=no
363	BLDOVEN	N	1	3160	3160	Blood Donor Center - joint venture	C.31.	as17svc1	1=yes, 0=no
364	MAMMSHOS	N	1	3161	3161	Breast cancer screening/mammograms - hospital	C.32.	as17svc1	1=yes, 0=no
365	MAMMSSYS	N	1	3162	3162	Breast cancer screening/mammograms - health system	C.32.	as17svc1	1=yes, 0=no
366	MAMMSVEN	N	1	3163	3163	Breast cancer screening/mammograms - joint venture	C.32.	as17svc1	1=yes, 0=no
367	ACARDHOS	N	1	3164	3164	Adult cardiology services - hospital	C.33.a.	as17svc1	1=yes, 0=no
368	ACARDSYS	N	1	3165	3165	Adult cardiology services - health system	C.33.a.	as17svc1	1=yes, 0=no
369	ACARDVEN	N	1	3166	3166	Adult cardiology services - joint venture	C.33.a.	as17svc1	1=yes, 0=no
370	PCARDHOS	N	1	3167	3167	Pediatric cardiology services - hospital	C.33.b.	as17svc1	1=yes, 0=no
371	PCARDSYS	N	1	3168	3168	Pediatric cardiology services - health system	C.33.b.	as17svc1	1=yes, 0=no
372	PCARDVEN	N	1	3169	3169	Pediatric cardiology services - joint venture	C.33.b.	as17svc1	1=yes, 0=no
373	ACLABHOS	N	1	3170	3170	Adult diagnostic catheterization - hospital	C.33.c.	as17svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
374	ACLABSYS	N	1	3171	3171	Adult diagnostic catheterization - health system	C.33.c.	as17svc1	1=yes, 0=no
375	ACLABVEN	N	1	3172	3172	Adult diagnostic catheterization - joint venture	C.33.c.	as17svc1	1=yes, 0=no
376	PCLABHOS	N	1	3173	3173	Pediatric diagnostic catheterization - hospital	C.33.d.	as17svc1	1=yes, 0=no
377	PCLABSYS	N	1	3174	3174	Pediatric diagnostic catheterization - health system	C.33.d.	as17svc1	1=yes, 0=no
378	PCLABVEN	N	1	3175	3175	Pediatric diagnostic catheterization - joint venture	C.33.d.	as17svc1	1=yes, 0=no
379	ICLABHOS	N	1	3176	3176	Adult interventional cardiac catheterization - hospital	C.33.e.	as17svc1	1=yes, 0=no
380	ICLABSYS	N	1	3177	3177	Adult interventional cardiac catheterization - health system	C.33.e.	as17svc1	1=yes, 0=no
381	ICLABVEN	N	1	3178	3178	Adult interventional cardiac catheterization - joint venture	C.33.e.	as17svc1	1=yes, 0=no
382	PELABHOS	N	1	3179	3179	Pediatric interventional cardiac catheterization - hospital	C.33.f.	as17svc1	1=yes, 0=no
383	PELABSYS	N	1	3180	3180	Pediatric interventional cardiac catheterization - health system	C.33.f.	as17svc1	1=yes, 0=no
384	PELABVEN	N	1	3181	3181	Pediatric interventional cardiac catheterization - joint venture	C.33.f.	as17svc1	1=yes, 0=no
385	ADTCHOS	N	1	3182	3182	Adult cardiac surgery - hospital	C.33.g.	as17svc1	1=yes, 0=no
386	ADTCSYS	N	1	3183	3183	Adult cardiac surgery - health system	C.33.g.	as17svc1	1=yes, 0=no
387	ADTCVEN	N	1	3184	3184	Adult cardiac surgery - joint venture	C.33.g.	as17svc1	1=yes, 0=no
388	PEDCSHOS	N	1	3185	3185	Pediatric cardiac surgery - hospital	C.33.h.	as17svc1	1=yes, 0=no
389	PEDCSSYS	N	1	3186	3186	Pediatric cardiac surgery - health system	C.33.h.	as17svc1	1=yes, 0=no
390	PEDCSVEN	N	1	3187	3187	Pediatric cardiac surgery - joint venture	C.33.h.	as17svc1	1=yes, 0=no
391	ADTEHOS	N	1	3188	3188	Adult cardiac electrophysiology-hospital	C.33.i.	as17svc1	1=yes, 0=no
392	ADTESYS	N	1	3189	3189	Adult cardiac electrophysiology-health system	C.33.i.	as17svc1	1=yes, 0=no
393	ADTEVEN	N	1	3190	3190	Adult cardiac electrophysiology-joint venture	C.33.i.	as17svc1	1=yes, 0=no
394	PEDEHOS	N	1	3191	3191	Pediatric cardiac electrophysiology-hospital	C.33.j.	as17svc1	1=yes, 0=no
395	PEDESYS	N	1	3192	3192	Pediatric cardiac electrophysiology-health system	C.33.j.	as17svc1	1=yes, 0=no
396	PEDEVEN	N	1	3193	3193	Pediatric cardiac electrophysiology-joint venture	C.33.j.	as17svc1	1=yes, 0=no
397	CHABHOS	N	1	3194	3194	Cardiac Rehabilitation - hospital	C.33.k.	as17svc1	1=yes, 0=no
398	CHABSYS	N	1	3195	3195	Cardiac Rehabilitation - health system	C.33.k.	as17svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
399	CHABVEN	N	1	3196	3196	Cardiac Rehabilitation - joint venture	C.33.k.	as17svc1	1=yes, 0=no
400	CMNGTHOS	N	1	3197	3197	Case Management - hospital	C.34.	as17svc1	1=yes, 0=no
401	CMNGTSYS	N	1	3198	3198	Case Management - health system	C.34.	as17svc1	1=yes, 0=no
402	CMNGTVEN	N	1	3199	3199	Case Management - joint venture	C.34.	as17svc1	1=yes, 0=no
403	CHAPHOS	N	1	3200	3200	Chaplaincy/pastoral care services - hospital	C.35.	as17svc1	1=yes, 0=no
404	CHAPSYS	N	1	3201	3201	Chaplaincy/pastoral care services - health system	C.35.	as17svc1	1=yes, 0=no
405	CHAPVEN	N	1	3202	3202	Chaplaincy/pastoral care services - joint venture	C.35.	as17svc1	1=yes, 0=no
406	CHTHHOS	N	1	3203	3203	Chemotherapy - hospital	C.36.	as17svc1	1=yes, 0=no
407	CHTHSYS	N	1	3204	3204	Chemotherapy - health system	C.36.	as17svc1	1=yes, 0=no
408	CHTHVEN	N	1	3205	3205	Chemotherapy - joint venture	C.36.	as17svc1	1=yes, 0=no
409	CWELLHOS	N	1	3206	3206	Children's wellness program - hospital	C.37.	as17svc1	1=yes, 0=no
410	CWELLSYS	N	1	3207	3207	Children's wellness program - health system	C.37.	as17svc1	1=yes, 0=no
411	CWELLVEN	N	1	3208	3208	Children's wellness program - joint venture	C.37.	as17svc1	1=yes, 0=no
412	CHIHOS	N	1	3209	3209	Chiropractic services - hospital	C.38.	as17svc1	1=yes, 0=no
413	CHISYS	N	1	3210	3210	Chiropractic services - health system	C.38.	as17svc1	1=yes, 0=no
414	CHIVEN	N	1	3211	3211	Chiropractic services - joint venture	C.38.	as17svc1	1=yes, 0=no
415	COUTRHOS	N	1	3212	3212	Community outreach - hospital	C.39.	as17svc1	1=yes, 0=no
416	COUTRSYS	N	1	3213	3213	Community outreach - health system	C.39.	as17svc1	1=yes, 0=no
417	COUTRVEN	N	1	3214	3214	Community outreach - joint venture	C.39.	as17svc1	1=yes, 0=no
418	COMPHOS	N	1	3215	3215	Complementary and alternative medicine services - hospital	C.40.	as17svc1	1=yes, 0=no
419	COMPSYS	N	1	3216	3216	Complementary and alternative medicine services - health system	C.40.	as17svc1	1=yes, 0=no
420	COMPVEN	N	1	3217	3217	Complementary and alternative medicine services - joint venture	C.40.	as17svc1	1=yes, 0=no
421	CAOSHOS	N	1	3218	3218	Computer assisted orthopedic surgery - hospital	C.41.	as17svc1	1=yes, 0=no
422	CAOSSYS	N	1	3219	3219	Computer assisted orthopedic surgery - health system	C.41.	as17svc1	1=yes, 0=no
423	CAOSVEN	N	1	3220	3220	Computer assisted orthopedic surgery - joint venture	C.41.	as17svc1	1=yes, 0=no
424	CPREVHOS	N	1	3221	3221	Crisis prevention - hospital	C.42.	as17svc1	1=yes, 0=no
425	CPREVSYS	N	1	3222	3222	Crisis prevention - health system	C.42.	as17svc1	1=yes, 0=no
426	CPREVVEN	N	1	3223	3223	Crisis prevention - joint venture	C.42.	as17svc1	1=yes, 0=no
427	DENTSHOS	N	1	3224	3224	Dental services - hospital	C.43.	as17svc1	1=yes, 0=no
428	DENTSSYS	N	1	3225	3225	Dental services - health system	C.43.	as17svc1	1=yes, 0=no
429	DENTSVEN	N	1	3226	3226	Dental services - joint venture	C.43.	as17svc1	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
430	EMDEPHOS	N	1	3227	3227	Emergency department - hospital	C.44.a.	as17svc1	1=yes, 0=no
431	EMDEPSYS	N	1	3228	3228	Emergency department - health system	C.44.a.	as17svc1	1=yes, 0=no
432	EMDEPVEN	N	1	3229	3229	Emergency department - joint venture	C.44.a.	as17svc1	1=yes, 0=no
433	PEMERHOS	N	1	3230	3230	Pediatric emergency department - hospital	C.44.b.	as17svc1	1=yes, 0=no
434	PEMERSYS	N	1	3231	3231	Pediatric emergency department - health system	C.44.b.	as17svc1	1=yes, 0=no
435	PEMERVEN	N	1	3232	3232	Pediatric emergency department - joint venture	C.44.b.	as17svc1	1=yes, 0=no
436	TRAUMHOS	N	1	3233	3233	Certified trauma center - hospital	C.44.c.	as17svc2	1=yes, 0=no
437	TRAUMSYS	N	1	3234	3234	Certified trauma center - health system	C.44.c.	as17svc2	1=yes, 0=no
438	TRAUMVEN	N	1	3235	3235	Certified trauma center - joint venture	C.44.c.	as17svc2	1=yes, 0=no
439	TRAUML90	N	1	3236	3236	Level of trauma center	C.44.c.	as17svc2	1=regional resource trauma center, 2=community trauma center, 3=rural trauma center, 4 or greater=other (specific to some states)
440	ENBHOS	N	1	3237	3237	Enabling Services - hospital	C.45.	as17svc2	1=yes, 0=no
441	ENBSYS	N	1	3238	3238	Enabling Services - health system	C.45.	as17svc2	1=yes, 0=no
442	ENBVEN	N	1	3239	3239	Enabling Services - joint venture	C.45.	as17svc2	1=yes, 0=no
443	ENDOCHOS	N	1	3240	3240	Optical Colonoscopy - hospital	C.46.a.	as17svc2	1=yes, 0=no
444	ENDOCSYS	N	1	3241	3241	Optical Colonoscopy - health system	C.46.a.	as17svc2	1=yes, 0=no
445	ENDOCVEN	N	1	3242	3242	Optical Colonoscopy - joint venture	C.46.a.	as17svc2	1=yes, 0=no
446	ENDOUHOS	N	1	3243	3243	Endoscopic ultrasound - hospital	C.46.b.	as17svc2	1=yes, 0=no
447	ENDOUSYS	N	1	3244	3244	Endoscopic ultrasound - health system	C.46.b.	as17svc2	1=yes, 0=no
448	ENDOUVEN	N	1	3245	3245	Endoscopic ultrasound - joint venture	C.46.b.	as17svc2	1=yes, 0=no
449	ENDOAHOS	N	1	3246	3246	Ablation of Barrett's esophagus - hospital	C.46.c.	as17svc2	1=yes, 0=no
450	ENDOASYS	N	1	3247	3247	Ablation of Barrett's esophagus - health system	C.46.c.	as17svc2	1=yes, 0=no
451	ENDOAVEN	N	1	3248	3248	Ablation of Barrett's esophagus - joint venture	C.46.c.	as17svc2	1=yes, 0=no
452	ENDOEHOS	N	1	3249	3249	Esophageal impedance study - hospital	C.46.d.	as17svc2	1=yes, 0=no
453	ENDOESYS	N	1	3250	3250	Esophageal impedance study - health system	C.46.d.	as17svc2	1=yes, 0=no
454	ENDOEVEN	N	1	3251	3251	Esophageal impedance study - joint venture	C.46.d.	as17svc2	1=yes, 0=no
455	ENDORHOS	N	1	3252	3252	Endoscopic retrograde cholangiopancreatography (ERCP) - hospital	C.46.e.	as17svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
456	ENDORSYS	N	1	3253	3253	Endoscopic retrograde cholangiopancreatography (ERCP) - health system	C.46.e.	as17svc2	1=yes, 0=no
457	ENDORVEN	N	1	3254	3254	Endoscopic retrograde cholangiopancreatography (ERCP) - joint venture	C.46.e.	as17svc2	1=yes, 0=no
458	ENRHOS	N	1	3255	3255	Enrollment (insurance) assistance services - hospital	C.47.	as17svc2	1=yes, 0=no
459	ENRSYS	N	1	3256	3256	Enrollment (insurance) assistance services - health system	C.47.	as17svc2	1=yes, 0=no
460	ENRVEN	N	1	3257	3257	Enrollment (insurance) assistance services - joint venture	C.47.	as17svc2	1=yes, 0=no
461	ESWLHOS	N	1	3258	3258	Extracorporeal shock waved lithotripter (ESWL) - hospital	C.48.	as17svc2	1=yes, 0=no
462	ESWLSYS	N	1	3259	3259	Extracorporeal shock waved lithotripter (ESWL) - health system	C.48.	as17svc2	1=yes, 0=no
463	ESWLVEN	N	1	3260	3260	Extracorporeal shock waved lithotripter (ESWL) - joint venture	C.48.	as17svc2	1=yes, 0=no
464	FRTCHOS	N	1	3261	3261	Fertility clinic - hospital	C.49.	as17svc2	1=yes, 0=no
465	FRTCSYS	N	1	3262	3262	Fertility clinic - health system	C.49.	as17svc2	1=yes, 0=no
466	FRTCVEN	N	1	3263	3263	Fertility clinic - joint venture	C.49.	as17svc2	1=yes, 0=no
467	FITCHOS	N	1	3264	3264	Fitness center - hospital	C.50.	as17svc2	1=yes, 0=no
468	FITCSYS	N	1	3265	3265	Fitness center - health system	C.50.	as17svc2	1=yes, 0=no
469	FITCVEN	N	1	3266	3266	Fitness center - joint venture	C.50.	as17svc2	1=yes, 0=no
470	OPCENHOS	N	1	3267	3267	Freestanding outpatient center - hospital	C.51.	as17svc2	1=yes, 0=no
471	OPCENSYS	N	1	3268	3268	Freestanding outpatient center - health system	C.51.	as17svc2	1=yes, 0=no
472	OPCENVEN	N	1	3269	3269	Freestanding outpatient center - joint venture	C.51.	as17svc2	1=yes, 0=no
473	GERSVHOS	N	1	3270	3270	Geriatric services - hospital	C.52.	as17svc2	1=yes, 0=no
474	GERSVSYS	N	1	3271	3271	Geriatric services - health system	C.52.	as17svc2	1=yes, 0=no
475	GERSVVEN	N	1	3272	3272	Geriatric services - joint venture	C.52.	as17svc2	1=yes, 0=no
476	HLTHFHOS	N	1	3273	3273	Health fair - hospital	C.53.	as17svc2	1=yes, 0=no
477	HLTHFSYS	N	1	3274	3274	Health fair - health system	C.53.	as17svc2	1=yes, 0=no
478	HLTHFVEN	N	1	3275	3275	Health fair - joint venture	C.53.	as17svc2	1=yes, 0=no
479	HLTHCHOS	N	1	3276	3276	Community health education - hospital	C.54.	as17svc2	1=yes, 0=no
480	HLTHCSYS	N	1	3277	3277	Community health education - health system	C.54.	as17svc2	1=yes, 0=no
481	HLTHCVEN	N	1	3278	3278	Community health education - joint venture	C.54.	as17svc2	1=yes, 0=no
482	GNTCHOS	N	1	3279	3279	Genetic testing/counseling - hospital	C.55.	as17svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
483	GNTCSYS	N	1	3280	3280	Genetic testing/counseling - health system	C.55.	as17svc2	1=yes, 0=no
484	GNTCVEN	N	1	3281	3281	Genetic testing/counseling - joint venture	C.55.	as17svc2	1=yes, 0=no
485	HLTHSHOS	N	1	3282	3282	Health screenings - hospital	C.56.	as17svc2	1=yes, 0=no
486	HLTHSSYS	N	1	3283	3283	Health screenings - health system	C.56.	as17svc2	1=yes, 0=no
487	HLTHSVEN	N	1	3284	3284	Health screenings - joint venture	C.56.	as17svc2	1=yes, 0=no
488	HLTRHOS	N	1	3285	3285	Health research - hospital	C.57.	as17svc2	1=yes, 0=no
489	HLTRSYS	N	1	3286	3286	Health research - health system	C.57.	as17svc2	1=yes, 0=no
490	HLTRVEN	N	1	3287	3287	Health research - joint venture	C.57.	as17svc2	1=yes, 0=no
491	HEMOHOS	N	1	3288	3288	Hemodialysis - hospital	C.58.	as17svc2	1=yes, 0=no
492	HEMOSYS	N	1	3289	3289	Hemodialysis - health system	C.58.	as17svc2	1=yes, 0=no
493	HEMOVEN	N	1	3290	3290	Hemodialysis - joint venture	C.58.	as17svc2	1=yes, 0=no
494	AIDSSHOS	N	1	3291	3291	HIV-AIDS services - hospital	C.59.	as17svc2	1=yes, 0=no
495	AIDSSSYS	N	1	3292	3292	HIV-AIDS services - health system	C.59.	as17svc2	1=yes, 0=no
496	AIDSSVEN	N	1	3293	3293	HIV-AIDS services - joint venture	C.59.	as17svc2	1=yes, 0=no
497	HOMEHHOS	N	1	3294	3294	Home health services - hospital	C.60.	as17svc2	1=yes, 0=no
498	HOMEHSYS	N	1	3295	3295	Home health services - health system	C.60.	as17svc2	1=yes, 0=no
499	HOMEHVEN	N	1	3296	3296	Home health services - joint venture	C.60.	as17svc2	1=yes, 0=no
500	HOSPCHOS	N	1	3297	3297	Hospice program - hospital	C.61.	as17svc2	1=yes, 0=no
501	HOSPCSYS	N	1	3298	3298	Hospice program - health system	C.61.	as17svc2	1=yes, 0=no
502	HOSPCVEN	N	1	3299	3299	Hospice program - joint venture	C.61.	as17svc2	1=yes, 0=no
503	OPHOSHOS	N	1	3300	3300	Hospital-based outpatient care center/services - hospital	C.62.	as17svc2	1=yes, 0=no
504	OPHOSSYS	N	1	3301	3301	Hospital-based outpatient care center/services - health system	C.62.	as17svc2	1=yes, 0=no
505	OPHOSVEN	N	1	3302	3302	Hospital-based outpatient care center/services - joint venture	C.62.	as17svc2	1=yes, 0=no
506	IMPRHOS	N	1	3303	3303	Immunization program - hospital	C.63.	as17svc2	1=yes, 0=no
507	IMPRSYS	N	1	3304	3304	Immunization program - health system	C.63.	as17svc2	1=yes, 0=no
508	IMPRVEN	N	1	3305	3305	Immunization program - joint venture	C.63.	as17svc2	1=yes, 0=no
509	ICARHOS	N	1	3306	3306	Indigent care clinic - hospital	C.64.	as17svc2	1=yes, 0=no
510	ICARSYS	N	1	3307	3307	Indigent care clinic - health system	C.64.	as17svc2	1=yes, 0=no
511	ICARVEN	N	1	3308	3308	Indigent care clinic - joint venture	C.64.	as17svc2	1=yes, 0=no
512	LINGHOS	N	1	3309	3309	Linguistic/translation services - hospital	C.65.	as17svc2	1=yes, 0=no
513	LINGSYS	N	1	3310	3310	Linguistic/translation services - health system	C.65.	as17svc2	1=yes, 0=no
514	LINGVEN	N	1	3311	3311	Linguistic/translation services - joint venture	C.65.	as17svc2	1=yes, 0=no
515	MEALSHOS	N	1	3312	3312	Meals on wheels - hospital	C.66.	as17svc2	1=yes, 0=no
516	MEALSSYS	N	1	3313	3313	Meals on wheels - health system	C.66.	as17svc2	1=yes, 0=no
517	MEALSVEN	N	1	3314	3314	Meals on wheels - joint venture	C.66.	as17svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
518	MOHSHOS	N	1	3315	3315	Mobile health services - hospital	C.67.	as17svc2	1=yes, 0=no
519	MOHSSYS	N	1	3316	3316	Mobile health services - health system	C.67.	as17svc2	1=yes, 0=no
520	MOHSVEN	N	1	3317	3317	Mobile health services - joint venture	C.67.	as17svc2	1=yes, 0=no
521	NEROHOS	N	1	3318	3318	Neurological services - hospital	C.68.	as17svc2	1=yes, 0=no
522	NEROSYS	N	1	3319	3319	Neurological services - health system	C.68.	as17svc2	1=yes, 0=no
523	NEROVEN	N	1	3320	3320	Neurological services - joint venture	C.68.	as17svc2	1=yes, 0=no
524	NUTRPHOS	N	1	3321	3321	Nutrition program - hospital	C.69.	as17svc2	1=yes, 0=no
525	NUTRPSYS	N	1	3322	3322	Nutrition program - health system	C.69.	as17svc2	1=yes, 0=no
526	NUTRPVEN	N	1	3323	3323	Nutrition program - joint venture	C.69.	as17svc2	1=yes, 0=no
527	OCCHSHOS	N	1	3324	3324	Occupational health services - hospital	C.70.	as17svc2	1=yes, 0=no
528	OCCHSSYS	N	1	3325	3325	Occupational health services - health system	C.70.	as17svc2	1=yes, 0=no
529	OCCHSVEN	N	1	3326	3326	Occupational health services - joint venture	C.70.	as17svc2	1=yes, 0=no
530	ONCOLHOS	N	1	3327	3327	Oncology services - hospital	C.71.	as17svc2	1=yes, 0=no
531	ONCOLSYS	N	1	3328	3328	Oncology services - health system	C.71.	as17svc2	1=yes, 0=no
532	ONCOLVEN	N	1	3329	3329	Oncology services - joint venture	C.71.	as17svc2	1=yes, 0=no
533	ORTOHOS	N	1	3330	3330	Orthopedic services - hospital	C.72.	as17svc2	1=yes, 0=no
534	ORTOSYS	N	1	3331	3331	Orthopedic services - health system	C.72.	as17svc2	1=yes, 0=no
535	ORTOVEN	N	1	3332	3332	Orthopedic services - joint venture	C.72.	as17svc2	1=yes, 0=no
536	OPSRGHOS	N	1	3333	3333	Outpatient surgery - hospital	C.73.	as17svc2	1=yes, 0=no
537	OPSRGSYS	N	1	3334	3334	Outpatient surgery - health system	C.73.	as17svc2	1=yes, 0=no
538	OPSRGVEN	N	1	3335	3335	Outpatient surgery - joint venture	C.73.	as17svc2	1=yes, 0=no
539	PAINHOS	N	1	3336	3336	Pain management program - hospital	C.74.	as17svc2	1=yes, 0=no
540	PAINSYS	N	1	3337	3337	Pain management program - health system	C.74.	as17svc2	1=yes, 0=no
541	PAINVEN	N	1	3338	3338	Pain management program - joint venture	C.74.	as17svc2	1=yes, 0=no
542	PALHOS	N	1	3339	3339	Palliative care program - hospital	C.75.	as17svc2	1=yes, 0=no
543	PALSYS	N	1	3340	3340	Palliative care program - health system	C.75.	as17svc2	1=yes, 0=no
544	PALVEN	N	1	3341	3341	Palliative care program - joint venture	C.75.	as17svc2	1=yes, 0=no
545	IPALHOS	N	1	3342	3342	Inpatient palliative care unit - hospital	C.76.	as17svc2	1=yes, 0=no
546	IPALSYS	N	1	3343	3343	Inpatient palliative care unit - health system	C.76.	as17svc2	1=yes, 0=no
547	IPALVEN	N	1	3344	3344	Inpatient palliative care unit - joint venture	C.76.	as17svc2	1=yes, 0=no
548	PCAHOS	N	1	3345	3345	Patient controlled analgesia - hospital	C.77.	as17svc2	1=yes, 0=no
549	PCASYS	N	1	3346	3346	Patient controlled analgesia - health system	C.77.	as17svc2	1=yes, 0=no
550	PCAVEN	N	1	3347	3347	Patient controlled analgesia - joint venture	C.77.	as17svc2	1=yes, 0=no
551	PATEDHOS	N	1	3348	3348	Patient education center - hospital	C.78.	as17svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
552	PATEDSYS	N	1	3349	3349	Patient education center - health system	C.78.	as17svc2	1=yes, 0=no
553	PATEDVEN	N	1	3350	3350	Patient education center - joint venture	C.78.	as17svc2	1=yes, 0=no
554	PATRPHOS	N	1	3351	3351	Patient representative services - hospital	C.79.	as17svc2	1=yes, 0=no
555	PATRPSYS	N	1	3352	3352	Patient representative services - health system	C.79.	as17svc2	1=yes, 0=no
556	PATRPVEN	N	1	3353	3353	Patient representative services - joint venture	C.79.	as17svc2	1=yes, 0=no
557	RASTHOS	N	1	3354	3354	Assistive technology center - hospital	C.80.a.	as17svc2	1=yes, 0=no
558	RASTSYS	N	1	3355	3355	Assistive technology center - health system	C.80.a.	as17svc2	1=yes, 0=no
559	RASTVEN	N	1	3356	3356	Assistive technology center - joint venture	C.80.a.	as17svc2	1=yes, 0=no
560	REDSHOS	N	1	3357	3357	Electrodiagnostic services - hospital	C.80.b.	as17svc2	1=yes, 0=no
561	REDSSYS	N	1	3358	3358	Electrodiagnostic services - health system	C.80.b.	as17svc2	1=yes, 0=no
562	REDSVEN	N	1	3359	3359	Electrodiagnostic services - joint venture	C.80.b.	as17svc2	1=yes, 0=no
563	RHBOPHOS	N	1	3360	3360	Physical rehabilitation outpatient services - hospital	C.80.c.	as17svc2	1=yes, 0=no
564	RHBOPSYS	N	1	3361	3361	Physical rehabilitation outpatient services - health system	C.80.c.	as17svc2	1=yes, 0=no
565	RHBOPVEN	N	1	3362	3362	Physical rehabilitation outpatient services - joint venture	C.80.c.	as17svc2	1=yes, 0=no
566	RPRSHOS	N	1	3363	3363	Prosthetic and orthotic services - hospital	C.80.d.	as17svc2	1=yes, 0=no
567	RPRSSYS	N	1	3364	3364	Prosthetic and orthotic services - health system	C.80.d.	as17svc2	1=yes, 0=no
568	RPRSVEN	N	1	3365	3365	Prosthetic and orthotic services - joint venture	C.80.d.	as17svc2	1=yes, 0=no
569	RBOTHOS	N	1	3366	3366	Robot-assisted walking therapy - hospital	C.80.e.	as17svc2	1=yes, 0=no
570	RBOTSYS	N	1	3367	3367	Robot-assisted walking therapy - health system	C.80.e.	as17svc2	1=yes, 0=no
571	RBOTVEN	N	1	3368	3368	Robot-assisted walking therapy - joint venture	C.80.e.	as17svc2	1=yes, 0=no
572	RSIMHOS	N	1	3369	3369	Simulated rehabilitation environment - hospital	C.80.f.	as17svc2	1=yes, 0=no
573	RSIMSYS	N	1	3370	3370	Simulated rehabilitation environment - health system	C.80.f.	as17svc2	1=yes, 0=no
574	RSIMVEN	N	1	3371	3371	Simulated rehabilitation environment - joint venture	C.80.f.	as17svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
575	PCDEPHOS	N	1	3372	3372	Primary care department - hospital	C.81.	as17svc2	1=yes, 0=no
576	PCDEPSYS	N	1	3373	3373	Primary care department - health system	C.81.	as17svc2	1=yes, 0=no
577	PCDEPVEN	N	1	3374	3374	Primary care department - joint venture	C.81.	as17svc2	1=yes, 0=no
578	PSYLSHOS	N	1	3375	3375	Psychiatric consultation/liaison services - hospital	C.82.a.	as17svc2	1=yes, 0=no
579	PSYLSSYS	N	1	3376	3376	Psychiatric consultation/liaison services - health system	C.82.a.	as17svc2	1=yes, 0=no
580	PSYLSVEN	N	1	3377	3377	Psychiatric consultation/liaison services - joint venture	C.82.a.	as17svc2	1=yes, 0=no
581	PSCBD	N	4	3378	3381	Psychiatric pediatric care beds	C.82.b.	as17svc2	
582	PSYCAHOS	N	1	3382	3382	Psychiatric pediatric care - hospital	C.82.b.	as17svc2	1=yes, 0=no
583	PSYCASYS	N	1	3383	3383	Psychiatric pediatric care - health system	C.82.b.	as17svc2	1=yes, 0=no
584	PSYCAVEN	N	1	3384	3384	Psychiatric pediatric care - joint venture	C.82.b.	as17svc2	1=yes, 0=no
585	PSGBD	N	4	3385	3388	Psychiatric geriatric services beds	C.82.c.	as17svc2	
586	PSYGRHOS	N	1	3389	3389	Psychiatric geriatric services - hospital	C.82.c.	as17svc2	1=yes, 0=no
587	PSYGRSYS	N	1	3390	3390	Psychiatric geriatric services - health system	C.82.c.	as17svc2	1=yes, 0=no
588	PSYGRVEN	N	1	3391	3391	Psychiatric geriatric services - joint venture	C.82.c.	as17svc2	1=yes, 0=no
589	PSYEDHOS	N	1	3392	3392	Psychiatric education services - hospital	C.82.d.	as17svc2	1=yes, 0=no
590	PSYEDSYS	N	1	3393	3393	Psychiatric education services - health system	C.82.d.	as17svc2	1=yes, 0=no
591	PSYEDVEN	N	1	3394	3394	Psychiatric education services - joint venture	C.82.d.	as17svc2	1=yes, 0=no
592	PSYEMHOS	N	1	3395	3395	Psychiatric emergency services - hospital	C.82.e.	as17svc2	1=yes, 0=no
593	PSYEMSYS	N	1	3396	3396	Psychiatric emergency services - health system	C.82.e.	as17svc2	1=yes, 0=no
594	PSYEMVEN	N	1	3397	3397	Psychiatric emergency services - joint venture	C.82.e.	as17svc2	1=yes, 0=no
595	PSYOPHOS	N	1	3398	3398	Psychiatric outpatient services - hospital	C.82.f.	as17svc2	1=yes, 0=no
596	PSYOPSYS	N	1	3399	3399	Psychiatric outpatient services - health system	C.82.f.	as17svc2	1=yes, 0=no
597	PSYOPVEN	N	1	3400	3400	Psychiatric outpatient services - joint venture	C.82.f.	as17svc2	1=yes, 0=no
598	PSYOIHOS	N	1	3401	3401	Psychiatric intensive outpatient services - hospital	C.82.g.	as17svc2	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
599	PSYOISYS	N	1	3402	3402	Psychiatric intensive outpatient services - health system	C.82.g.	as17svc2	1=yes, 0=no
600	PSYOIVEN	N	1	3403	3403	Psychiatric intensive outpatient services - joint venture	C.82.g.	as17svc2	1=yes, 0=no
601	PSYPHAHOS	N	1	3404	3404	Psychiatric partial hospitalization services/adult - hospital	C.82.h.	as17svc2	1=yes, 0=no
602	PSYPHASYS	N	1	3405	3405	Psychiatric partial hospitalization services/adult - health system	C.82.h.	as17svc2	1=yes, 0=no
603	PSYPHAVEN	N	1	3406	3406	Psychiatric partial hospitalization services/adult - joint venture	C.82.h.	as17svc2	1=yes, 0=no
604	PSYPHCHOS	N	1	3407	3407	Psychiatric partial hospitalization services/pediatric - hospital	C.82.i.	as17svc2	1=yes, 0=no
605	PSYPHCSYS	N	1	3408	3408	Psychiatric partial hospitalization services/pediatric - health system	C.82.i.	as17svc2	1=yes, 0=no
606	PSYPHCVEN	N	1	3409	3409	Psychiatric partial hospitalization services/pediatric - joint venture	C.82.i.	as17svc2	1=yes, 0=no
607	PSYTRAHOS	N	1	3410	3410	Psychiatric residential treatment/adult - hospital	C.82.j.	as17svc2	1=yes, 0=no
608	PSYTRASYS	N	1	3411	3411	Psychiatric residential treatment/adult - health system	C.82.j.	as17svc2	1=yes, 0=no
609	PSYTRAVEN	N	1	3412	3412	Psychiatric residential treatment/adult - joint venture	C.82.j.	as17svc2	1=yes, 0=no
610	PSYTRPHOS	N	1	3413	3413	Psychiatric residential treatment/pediatric - hospital	C.82.k.	as17svc2	1=yes, 0=no
611	PSYTRPSYS	N	1	3414	3414	Psychiatric residential treatment/pediatric - health system	C.82.k.	as17svc2	1=yes, 0=no
612	PSYTRPVEN	N	1	3415	3415	Psychiatric residential treatment/pediatric - joint venture	C.82.k.	as17svc2	1=yes, 0=no
613	CTSCNHOS	N	1	3416	3416	Computed-tomography (CT) scanner - hospital	C.83.a.	as17svc3	1=yes, 0=no
614	CTSCNSYS	N	1	3417	3417	Computed-tomography (CT) scanner - health system	C.83.a.	as17svc3	1=yes, 0=no
615	CTSCNVEN	N	1	3418	3418	Computed-tomography (CT) scanner - joint venture	C.83.a.	as17svc3	1=yes, 0=no
616	DRADFHOS	N	1	3419	3419	Diagnostic radioisotope facility - hospital	C.83.b.	as17svc3	1=yes, 0=no
617	DRADFSYS	N	1	3420	3420	Diagnostic radioisotope facility - health system	C.83.b.	as17svc3	1=yes, 0=no
618	DRADFVEN	N	1	3421	3421	Diagnostic radioisotope facility - joint venture	C.83.b.	as17svc3	1=yes, 0=no
619	EBCTHOS	N	1	3422	3422	Electron Beam Computed Tomography (EBCT) - hospital	C.83.c.	as17svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
620	EBCTSYS	N	1	3423	3423	Electron Beam Computed Tomography (EBCT) - health system	C.83.c.	as17svc3	1=yes, 0=no
621	EBCTVEN	N	1	3424	3424	Electron Beam Computed Tomography (EBCT) - joint venture	C.83.c.	as17svc3	1=yes, 0=no
622	FFDMHOS	N	1	3425	3425	Full-field digital mammography - hospital	C.83.d.	as17svc3	1=yes, 0=no
623	FFDMSYS	N	1	3426	3426	Full-field digital mammography - health system	C.83.d.	as17svc3	1=yes, 0=no
624	FFDMVEN	N	1	3427	3427	Full-field digital mammography - joint venture	C.83.d.	as17svc3	1=yes, 0=no
625	MRIHOS	N	1	3428	3428	Magnetic resonance imaging (MRI) - hospital	C.83.e.	as17svc3	1=yes, 0=no
626	MRISYS	N	1	3429	3429	Magnetic resonance imaging (MRI) - health system	C.83.e.	as17svc3	1=yes, 0=no
627	MRIVEN	N	1	3430	3430	Magnetic resonance imaging (MRI) - joint venture	C.83.e.	as17svc3	1=yes, 0=no
628	IMRIHOS	N	1	3431	3431	Intraoperative magnetic resonance imaging - hospital	C.83.f.	as17svc3	1=yes, 0=no
629	IMRISYS	N	1	3432	3432	Intraoperative magnetic resonance imaging - health system	C.83.f.	as17svc3	1=yes, 0=no
630	IMRIVEN	N	1	3433	3433	Intraoperative magnetic resonance imaging - joint venture	C.83.f.	as17svc3	1=yes, 0=no
631	MEGHOS	N	1	3434	3434	Magnetoencephalography (MEG) - hospital	C.83.g.	as17svc3	1=yes, 0=no
632	MEGSYS	N	1	3435	3435	Magnetoencephalography (MEG) - health system	C.83.g.	as17svc3	1=yes, 0=no
633	MEGVEN	N	1	3436	3436	Magnetoencephalography (MEG) - joint venture	C.83.g.	as17svc3	1=yes, 0=no
634	MSCTHOS	N	1	3437	3437	Multislice spiral computed tomography < 64 slice - hospital	C.83.h.	as17svc3	1=yes, 0=no
635	MSCTSYS	N	1	3438	3438	Multislice spiral computed tomography < 64 slice - health system	C.83.h.	as17svc3	1=yes, 0=no
636	MSCTVEN	N	1	3439	3439	Multislice spiral computed tomography < 64 slice - joint venture	C.83.h.	as17svc3	1=yes, 0=no
637	MSCTGHOS	N	1	3440	3440	Multi-slice spiral computed tomography 64 + slice - hospital	C.83.i.	as17svc3	1=yes, 0=no
638	MSCTGSYS	N	1	3441	3441	Multi-slice spiral computed tomography 64 + slice - health system	C.83.i.	as17svc3	1=yes, 0=no
639	MSCTGVEN	N	1	3442	3442	Multi-slice spiral computed tomography 64 + slice - joint venture	C.83.i.	as17svc3	1=yes, 0=no
640	PETHOS	N	1	3443	3443	Positron emission tomography (PET) - hospital	C.83.j.	as17svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
641	PETSYS	N	1	3444	3444	Positron emission tomography (PET) - health system	C.83.j.	as17svc3	1=yes, 0=no
642	PETVEN	N	1	3445	3445	Positron emission tomography (PET) - joint venture	C.83.j.	as17svc3	1=yes, 0=no
643	PETCTHOS	N	1	3446	3446	Positron emission tomography/CT (PET/CT) - hospital	C.83.k.	as17svc3	1=yes, 0=no
644	PETCTSYS	N	1	3447	3447	Positron emission tomography/CT (PET/CT) - health system	C.83.k.	as17svc3	1=yes, 0=no
645	PETCTVEN	N	1	3448	3448	Positron emission tomography/CT (PET/CT) - joint venture	C.83.k.	as17svc3	1=yes, 0=no
646	SPECTHOS	N	1	3449	3449	Single photon emission computerized tomography (SPECT) - hospital	C.83.l.	as17svc3	1=yes, 0=no
647	SPECTSYS	N	1	3450	3450	Single photon emission computerized tomography (SPECT) - health system	C.83.l.	as17svc3	1=yes, 0=no
648	SPECTVEN	N	1	3451	3451	Single photon emission computerized tomography (SPECT) - joint venture	C.83.l.	as17svc3	1=yes, 0=no
649	ULTSNHOS	N	1	3452	3452	Ultrasound - hospital	C.83.m.	as17svc3	1=yes, 0=no
650	ULTSNSYS	N	1	3453	3453	Ultrasound - health system	C.83.m.	as17svc3	1=yes, 0=no
651	ULTSNVEN	N	1	3454	3454	Ultrasound - joint venture	C.83.m.	as17svc3	1=yes, 0=no
652	IGRTHOS	N	1	3455	3455	Image-guided radiation therapy - hospital	C.84.a.	as17svc3	1=yes, 0=no
653	IGRTSYS	N	1	3456	3456	Image-guided radiation therapy - health system	C.84.a.	as17svc3	1=yes, 0=no
654	IGRTVEN	N	1	3457	3457	Image-guided radiation therapy - joint venture	C.84.a.	as17svc3	1=yes, 0=no
655	IMRTHOS	N	1	3458	3458	Intensity-modulated radiation therapy (IMRT) - hospital	C.84.b.	as17svc3	1=yes, 0=no
656	IMRTSYS	N	1	3459	3459	Intensity-modulated radiation therapy (IMRT) - health system	C.84.b.	as17svc3	1=yes, 0=no
657	IMRTVEN	N	1	3460	3460	Intensity-modulated radiation therapy (IMRT) - joint venture	C.84.b.	as17svc3	1=yes, 0=no
658	PTONHOS	N	1	3461	3461	Proton beam therapy - hospital	C.84.c.	as17svc3	1=yes, 0=no
659	PTONSYS	N	1	3462	3462	Proton beam therapy - health system	C.84.c.	as17svc3	1=yes, 0=no
660	PTONVEN	N	1	3463	3463	Proton beam therapy - joint venture	C.84.c.	as17svc3	1=yes, 0=no
661	BEAMHOS	N	1	3464	3464	Shaped beam radiation system - hospital	C.84.d.	as17svc3	1=yes, 0=no
662	BEAMSYS	N	1	3465	3465	Shaped beam radiation system - health system	C.84.d.	as17svc3	1=yes, 0=no
663	BEAMVEN	N	1	3466	3466	Shaped beam radiation system - joint venture	C.84.d.	as17svc3	1=yes, 0=no
664	SRADHOS	N	1	3467	3467	Stereotactic radiosurgery - hospital	C.84.e.	as17svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
665	SRADSYS	N	1	3468	3468	Stereotactic radiosurgery - health system	C.84.e.	as17svc3	1=yes, 0=no
666	SRADVEN	N	1	3469	3469	Stereotactic radiosurgery - joint venture	C.84.e.	as17svc3	1=yes, 0=no
667	RETIRHOS	N	1	3470	3470	Retirement housing - hospital	C.85.	as17svc3	1=yes, 0=no
668	RETIRSYS	N	1	3471	3471	Retirement housing - health system	C.85.	as17svc3	1=yes, 0=no
669	RETIRVEN	N	1	3472	3472	Retirement housing - joint venture	C.85.	as17svc3	1=yes, 0=no
670	ROBOHOS	N	1	3473	3473	Robotic surgery - hospital	C.86.	as17svc3	1=yes, 0=no
671	ROBOSYS	N	1	3474	3474	Robotic surgery - health system	C.86.	as17svc3	1=yes, 0=no
672	ROBOVEN	N	1	3475	3475	Robotic surgery - joint venture	C.86.	as17svc3	1=yes, 0=no
673	RURLHOS	N	1	3476	3476	Rural health clinic - hospital	C.87.	as17svc3	1=yes, 0=no
674	RURLSYS	N	1	3477	3477	Rural health clinic - health system	C.87.	as17svc3	1=yes, 0=no
675	RURLVEN	N	1	3478	3478	Rural health clinic - joint venture	C.87.	as17svc3	1=yes, 0=no
676	SLEPHOS	N	1	3479	3479	Sleep center - hospital	C.88.	as17svc3	1=yes, 0=no
677	SLEPSYS	N	1	3480	3480	Sleep center - health system	C.88.	as17svc3	1=yes, 0=no
678	SLEPVEN	N	1	3481	3481	Sleep center - joint venture	C.88.	as17svc3	1=yes, 0=no
679	SOCWKHOS	N	1	3482	3482	Social work services - hospital	C.89.	as17svc3	1=yes, 0=no
680	SOCWKSYS	N	1	3483	3483	Social work services - health system	C.89.	as17svc3	1=yes, 0=no
681	SOCWKVEN	N	1	3484	3484	Social work services - joint venture	C.89.	as17svc3	1=yes, 0=no
682	SPORTHOS	N	1	3485	3485	Sports medicine - hospital	C.90.	as17svc3	1=yes, 0=no
683	SPORTSYS	N	1	3486	3486	Sports medicine - health system	C.90.	as17svc3	1=yes, 0=no
684	SPORTVEN	N	1	3487	3487	Sports medicine - joint venture	C.90.	as17svc3	1=yes, 0=no
685	SUPPGHOS	N	1	3488	3488	Support groups - hospital	C.91.	as17svc3	1=yes, 0=no
686	SUPPGSYS	N	1	3489	3489	Support groups - health system	C.91.	as17svc3	1=yes, 0=no
687	SUPPGVEN	N	1	3490	3490	Support groups - joint venture	C.91.	as17svc3	1=yes, 0=no
688	SWBDHOS	N	1	3491	3491	Swing bed services - hospital	C.92.	as17svc3	1=yes, 0=no
689	SWBDSYS	N	1	3492	3492	Swing bed services - health system	C.92.	as17svc3	1=yes, 0=no
690	SWBDVEN	N	1	3493	3493	Swing bed services - joint venture	C.92.	as17svc3	1=yes, 0=no
691	TEENSHOS	N	1	3494	3494	Teen outreach services - hospital	C.93.	as17svc3	1=yes, 0=no
692	TEENSSYS	N	1	3495	3495	Teen outreach services - health system	C.93.	as17svc3	1=yes, 0=no
693	TEENSVEN	N	1	3496	3496	Teen outreach services - joint venture	C.93.	as17svc3	1=yes, 0=no
694	TOBHOS	N	1	3497	3497	Tobacco treatment services - hospital	C.94.	as17svc3	1=yes, 0=no
695	TOBSYS	N	1	3498	3498	Tobacco treatment services - health system	C.94.	as17svc3	1=yes, 0=no
696	TOBVEN	N	1	3499	3499	Tobacco treatment services - joint venture	C.94.	as17svc3	1=yes, 0=no
697	COFVHOS	N	1	3500	3500	Telehealth consultation and office visits - hospital	C.95.a.	as17svc3	1=yes, 0=no
698	COFVSYS	N	1	3501	3501	Telehealth consultation and office visits - health system	C.95.a.	as17svc3	1=yes, 0=no
699	COFVVEN	N	1	3502	3502	Telehealth consultation and office visits - joint venture	C.95.a.	as17svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
700	EICUHOS	N	1	3503	3503	Telehealth eICU - hospital	C.95.b.	as17svc3	1=yes, 0=no
701	EICUSYS	N	1	3504	3504	Telehealth eICU - health system	C.95.b.	as17svc3	1=yes, 0=no
702	EICUVEN	N	1	3505	3505	Telehealth eICU - joint venture	C.95.b.	as17svc3	1=yes, 0=no
703	STRCHOS	N	1	3506	3506	Telehealth stroke care - hospital	C.95.c.	as17svc3	1=yes, 0=no
704	STRCSYS	N	1	3507	3507	Telehealth stroke care - health system	C.95.c.	as17svc3	1=yes, 0=no
705	STRCVEN	N	1	3508	3508	Telehealth stroke care - joint venture	C.95.c.	as17svc3	1=yes, 0=no
706	ADTRTHOS	N	1	3509	3509	Telehealth psychiatric and addiction treatment - hospital	C.95.d.	as17svc3	1=yes, 0=no
707	ADTRTSYS	N	1	3510	3510	Telehealth psychiatric and addiction treatment - health system	C.95.d.	as17svc3	1=yes, 0=no
708	ADTRTVEN	N	1	3511	3511	Telehealth psychiatric and addiction treatment - joint venture	C.95.d.	as17svc3	1=yes, 0=no
709	PDISHOS	N	1	3512	3512	Telehealth remote patient monitoring post-discharge - hospital	C.95.e.1.	as17svc3	1=yes, 0=no
710	PDISSYS	N	1	3513	3513	Telehealth remote patient monitoring post-discharge - health system	C.95.e.1.	as17svc3	1=yes, 0=no
711	PDISVEN	N	1	3514	3514	Telehealth remote patient monitoring post-discharge - joint venture	C.95.e.1.	as17svc3	1=yes, 0=no
712	CHCARHOS	N	1	3515	3515	Telehealth remote patient monitoring ongoing chronic care management - hospital	C.95.e.2.	as17svc3	1=yes, 0=no
713	CHCARSYS	N	1	3516	3516	Telehealth remote patient monitoring ongoing chronic care management - health system	C.95.e.2.	as17svc3	1=yes, 0=no
714	CHCARVEN	N	1	3517	3517	Telehealth remote patient monitoring ongoing chronic care management - joint venture	C.95.e.2.	as17svc3	1=yes, 0=no
715	OTBONHOS	N	1	3518	3518	Bone marrow transplant - hospital	C.96.a.	as17svc3	1=yes, 0=no
716	OTBONSYS	N	1	3519	3519	Bone marrow transplant - health system	C.96.a.	as17svc3	1=yes, 0=no
717	OTBONVEN	N	1	3520	3520	Bone marrow transplant - joint venture	C.96.a.	as17svc3	1=yes, 0=no
718	HARTHOS	N	1	3521	3521	Heart transplant - hospital	C.96.b.	as17svc3	1=yes, 0=no
719	HARTSYS	N	1	3522	3522	Heart transplant - health system	C.96.b.	as17svc3	1=yes, 0=no
720	HARTVEN	N	1	3523	3523	Heart transplant - joint venture	C.96.b.	as17svc3	1=yes, 0=no
721	KDNYHOS	N	1	3524	3524	Kidney transplant - hospital	C.96.c.	as17svc3	1=yes, 0=no
722	KDNYSYS	N	1	3525	3525	Kidney transplant -health system	C.96.c.	as17svc3	1=yes, 0=no
723	KDNYVEN	N	1	3526	3526	Kidney transplant - joint venture	C.96.c.	as17svc3	1=yes, 0=no
724	LIVRHOS	N	1	3527	3527	Liver transplant - hospital	C.96.d.	as17svc3	1=yes, 0=no
725	LIVRSYS	N	1	3528	3528	Liver transplant - health system	C.96.d.	as17svc3	1=yes, 0=no
726	LIVRVEN	N	1	3529	3529	Liver transplant - joint venture	C.96.d.	as17svc3	1=yes, 0=no
727	LUNGHOS	N	1	3530	3530	Lung transplant - hospital	C.96.e.	as17svc3	1=yes, 0=no
728	LUNGSYS	N	1	3531	3531	Lung transplant - health system	C.96.e.	as17svc3	1=yes, 0=no
729	LUNGVEN	N	1	3532	3532	Lung transplant - joint venture	C.96.e.	as17svc3	1=yes, 0=no
730	TISUHOS	N	1	3533	3533	Tissue transplant - hospital	C.96.f.	as17svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
731	TISUSYS	N	1	3534	3534	Tissue transplant - health system	C.96.f.	as17svc3	1=yes, 0=no
732	TISUVEN	N	1	3535	3535	Tissue transplant - joint venture	C.96.f.	as17svc3	1=yes, 0=no
733	OTOTHHOS	N	1	3536	3536	Other transplant - hospital	C.96.g.	as17svc3	1=yes, 0=no
734	OTOTHSYS	N	1	3537	3537	Other transplant - health system	C.96.g.	as17svc3	1=yes, 0=no
735	OTOTHVEN	N	1	3538	3538	Other transplant - joint venture	C.96.g.	as17svc3	1=yes, 0=no
736	TPORTHOS	N	1	3539	3539	Transportation to health services - hospital	C.97.	as17svc3	1=yes, 0=no
737	TPORTSYS	N	1	3540	3540	Transportation to health services - health system	C.97.	as17svc3	1=yes, 0=no
738	TPORTVEN	N	1	3541	3541	Transportation to health services - joint venture	C.97.	as17svc3	1=yes, 0=no
739	URGCCHOS	N	1	3542	3542	Urgent care center - hospital	C.98.	as17svc3	1=yes, 0=no
740	URGCCSYS	N	1	3543	3543	Urgent care center - health system	C.98.	as17svc3	1=yes, 0=no
741	URGCCVEN	N	1	3544	3544	Urgent care center - joint venture	C.98.	as17svc3	1=yes, 0=no
742	VWRKHOS	N	1	3545	3545	Violence prevention programs for the workplace - hospital	C.99.a.	as17svc3	1=yes, 0=no
743	VWRKSYS	N	1	3546	3546	Violence prevention programs for the workplace - health system	C.99.a.	as17svc3	1=yes, 0=no
744	VWRKVEN	N	1	3547	3547	Violence prevention programs for the workplace - joint venture	C.99.a.	as17svc3	1=yes, 0=no
745	VCMMHOS	N	1	3548	3548	Violence prevention programs for the community - hospital	C.99.b.	as17svc3	1=yes, 0=no
746	VCMMSYS	N	1	3549	3549	Violence prevention programs for the community - health system	C.99.b.	as17svc3	1=yes, 0=no
747	VCMMVEN	N	1	3550	3550	Violence prevention programs for the community - joint venture	C.99.b.	as17svc3	1=yes, 0=no
748	VRCSHOS	N	1	3551	3551	Virtual colonoscopy - hospital	C.100.	as17svc3	1=yes, 0=no
749	VRCSSYS	N	1	3552	3552	Virtual colonoscopy - health system	C.100.	as17svc3	1=yes, 0=no
750	VRCSVEN	N	1	3553	3553	Virtual colonoscopy - joint venture	C.100.	as17svc3	1=yes, 0=no
751	VOLSVHOS	N	1	3554	3554	Volunteer services department - hospital	C.101.	as17svc3	1=yes, 0=no
752	VOLSVSYS	N	1	3555	3555	Volunteer services department - health system	C.101.	as17svc3	1=yes, 0=no
753	VOLSVVEN	N	1	3556	3556	Volunteer services department - joint venture	C.101.	as17svc3	1=yes, 0=no
754	WOMHCHOS	N	1	3557	3557	Women's health center/services - hospital	C.102.	as17svc3	1=yes, 0=no
755	WOMHCSYS	N	1	3558	3558	Women's health center/services - health system	C.102.	as17svc3	1=yes, 0=no
756	WOMHCVEN	N	1	3559	3559	Women's health center/services - joint venture	C.102.	as17svc3	1=yes, 0=no
757	WMGTHOS	N	1	3560	3560	Wound management services - hospital	C.103.	as17svc3	1=yes, 0=no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
758	WMGTSYS	N	1	3561	3561	Wound management services - health system	C.103.	as17svc3	1=yes, 0=no
759	WMGTVEN	N	1	3562	3562	Wound management services - joint venture	C.103.	as17svc3	1=yes, 0=no
760	EXPTOT	Y	15	3563	3577	Total facility expenses, excluding bad debt	E.3.m.	as17util1	Total expenses
761	EXPTHA	Y	15	3578	3592	Hospital total expenses, excluding bad debt		as17util1	Calculated Field: Total expenses less nursing home unit expense
762	EXPTLA	Y	15	3593	3607	Nursing home expenses, excluding bad debt	E.3.m.	as17util1	Total expenses (nursing home unit)
763	DPEXA	N	10	3608	3617	Depreciation expense	E.3.h.	as17util1	Expense
764	INTEXA	N	10	3618	3627	Interest expense	E.3.i.	as17util1	Expense
765	PHREXA	N	10	3628	3637	Pharmacy expense	E.3.j.	as17util1	Expense
766	SUPEXA	N	10	3638	3647	Supply expense	E.3.k.	as17util1	Expense
767	OTHEXPA	N	10	3648	3657	All other expenses	E.3.l.	as17util1	Expense
768	NPAYBEN	Y	10	3658	3667	Total facility employee benefits	E.3.g.	as17util1	Employee benefits
769	PAYTOT	Y	10	3668	3677	Total facility payroll expenses	E.3.f.	as17util1	Payroll expenses
770	PAYTOTH	Y	10	3678	3687	Hospital unit payroll expenses		as17util1	Calculated Field: Total facility payroll expenses less nursing home facility payroll expenses
771	NPAYBENH	Y	10	3688	3697	Hospital unit employee benefits		as17util1	Calculated Field: Total facility employee benefits expenses less nursing home facility employee benefits expenses
772	PAYTOTLT	Y	10	3698	3707	Nursing home payroll expenses	E.3.f.	as17util1	Payroll expenses (nursing home unit)
773	NPAYBENL	Y	10	3708	3717	Nursing home employee benefits	E.3.g.	as17util1	Employee benefits (nursing home unit)
774	LBEDSA	N	6	3718	3723	Licensed beds total facility	E.1.a.	as17util1	Total licensed beds
775	BDTOT	NA	4	3724	3727	Total facility beds set up and staffed at the end of reporting period	E.1.b.	as17util1	Beds set up and staffed (total facility)
776	ADMTOT	Y	6	3728	3733	Total facility admissions	E.1.e.	as17util1	Admissions (total facility)
777	IPDTOT	Y	8	3734	3741	Total facility inpatient days	E.1.f.	as17util1	Inpatient days (total facility)
778	BDH	N	4	3742	3745	Hospital unit beds set up and staffed		as17util1	Calculated Field: Total facility beds less nursing home unit beds
779	ADMH	N	6	3746	3751	Hospital unit admissions		as17util1	Calculated Field: Total facility admissions less nursing home unit admissions
780	IPDH	N	8	3752	3759	Hospital unit inpatient days		as17util1	Calculated Field: Total facility inpatient days less nursing home unit inpatient days
781	LBEDLA	N	6	3760	3765	Nursing home licensed beds	E.1.a.	as17util1	Licensed beds (nursing home unit)
782	BDLT	N	4	3766	3769	Nursing home beds set up and staffed	E.1.b.	as17util1	Nursing home beds set up and staffed
783	ADMLT	N	6	3770	3775	Nursing home admissions	E.1.e.	as17util1	Nursing home admissions
784	IPDLT	N	8	3776	3783	Nursing home inpatient days	E.1.f.	as17util1	Nursing home inpatient days
785	MCRDC	Y	6	3784	3789	Total facility Medicare discharges	E.2.a1.	as17util1	Medicare discharges (total facility)
786	MCRIPD	Y	8	3790	3797	Total facility Medicare days	E.2.b1.	as17util1	Medicare inpatient days (total facility)

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
787	MCDDC	Y	6	3798	3803	Total facility Medicaid discharges	E.2.c1.	as17util1	Medicaid discharges (total facility)
788	MCDIPD	Y	8	3804	3811	Total facility Medicaid days	E.2.d1.	as17util1	Medicaid Inpatient days (total facility)
789	MCRDCH	N	6	3812	3817	Hospital unit Medicare discharges		as17util1	Calculated Field: Total facility Medicare discharges less nursing home unit Medicare discharges
790	MCRIPDH	N	8	3818	3825	Hospital unit Medicare days		as17util1	Calculated Field: Total facility Medicare days less nursing home unit Medicare days
791	MCDDCH	N	6	3826	3831	Hospital unit Medicaid discharges		as17util1	Calculated Field: Total facility Medicaid discharges less nursing home unit Medicaid discharges
792	MCDIPDH	N	8	3832	3839	Hospital unit Medicaid days		as17util1	Calculated Field: Total facility Medicaid days less nursing home unit Medicaid days
793	MCRDCLT	N	6	3840	3845	Nursing home Medicare discharges	E.2.a1.	as17util1	Medicare discharges (nursing home unit)
794	MCRIPDLT	N	8	3846	3853	Nursing home Medicare days	E.2.b1.	as17util1	Medicare inpatient days (nursing home unit)
795	MCDDCLT	N	6	3854	3859	Nursing home Medicaid discharges	E.2.c1.	as17util1	Medicaid discharges (nursing home unit)
796	MCDIPDLT	N	8	3860	3867	Nursing home Medicaid days	E.2.d1.	as17util1	Medicaid inpatient days (nursing home unit)
797	BASSIN	NA	4	3868	3871	Bassinets set up and staffed	E.1.c.	as17util1	Bassinets set up and staffed
798	BIRTHS	Y	6	3872	3877	Total births (excluding fetal deaths)	E.1.d.	as17util1	Births (exclude fetal deaths)
799	SUROPIP	Y	6	3878	3883	Inpatient surgical operations	E.1.i.	as17util1	Inpatient surgeries
800	SUROPOP	Y	6	3884	3889	Outpatient surgical operations	E.1.k.	as17util1	Outpatient surgeries
801	SUROPTOT	Y	6	3890	3895	Total surgical operations		as17util1	Calculated Field: Inpatient surgical operations + outpatient surgical operations
802	VEM	Y	8	3896	3903	Emergency department visits	E.1.g.	as17util1	Emergency department visits
803	VOTH	Y	8	3904	3911	Other outpatient visits		as17util1	Calculated Field: Total outpatient visits less emergency department visits
804	VTOT	Y	8	3912	3919	Total outpatient visits	E.1.h.	as17util1	Total outpatient visits
Note: Numbers in parentheses below indicate survey questionnaire columns									
805	FTMDTF	Y	5	3920	3924	Full-time physicians and dentists	E.10.a.(1)	as17util1	Full-time physicians and dentists
806	FTRES	Y	5	3925	3929	Full-time medical and dental residents and interns	E.10.c.(1)	as17util1	Full-time medical and dental residents/interns
807	FTTRAN84	Y	5	3930	3934	Full-time other trainees	E.10.d.(1)	as17util1	Full-time other trainees
808	FTRNTF	Y	5	3935	3939	Full-time registered nurses	E.10.e.(1)	as17util1	Full-time registered nurses
809	FTLPNTF	Y	5	3940	3944	Full-time licensed practical (vocational) nurses	E.10.f.(1)	as17util1	Full-time licensed practical (vocational) nurses
810	FTAST	Y	5	3945	3949	Full-time nursing assistive personnel	E.10.g.(1)	as17util1	Full-time nursing assistive personnel
811	FTRAD	Y	5	3950	3954	Full-time radiology technicians	E.10.h.(1)	as17util1	Full-time radiology technicians
812	FTLAB	Y	5	3955	3959	Full-time laboratory technicians	E.10.i.(1)	as17util1	Full-time laboratory technicians
813	FTPHR	Y	5	3960	3964	Full-time pharmacists, licensed	E.10.j.(1)	as17util1	Full-time pharmacists, licensed
814	FTPHT	Y	5	3965	3969	Full-time pharmacy technicians	E.10.k.(1)	as17util1	Full-time pharmacy technicians

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
815	FTRESP	Y	5	3970	3974	Full-time respiratory therapists	E.10.l.(1)	as17util1	Full-time respiratory therapists
816	FTOTHTF	Y	5	3975	3979	Full-time all other personnel	E.10.m.(1)	as17util1	Full-time all other personnel
817	FTTOT	Y	5	3980	3984	Full-time total personnel	E.10.n.(1)	as17util1	Full-time total facility personnel
818	PTMDTF	Y	5	3985	3989	Part-time physicians and dentists	E.10.a.(2)	as17util1	Part-time physicians and dentists
819	PTRES	Y	5	3990	3994	Part-time medical and dental residents and interns	E.10.c.(2)	as17util1	Part-time medical and dental residents/interns
820	PTTRAN84	Y	5	3995	3999	Part-time other trainees	E.10.d.(2)	as17util1	Part-time other trainees
821	PTRNTF	Y	5	4000	4004	Part-time registered nurses	E.10.e.(2)	as17util1	Part-time registered nurses
822	PTLPNTF	Y	5	4005	4009	Part-time licensed practical (vocational) nurses	E.10.f.(2)	as17util1	Part-time licensed practical (vocational) nurses
823	PTAST	Y	5	4010	4014	Part-time nursing assistive personnel	E.10.g.(2)	as17util1	Part-time nursing assistive personnel
824	PTRAD	Y	5	4015	4019	Part-time radiology technicians	E.10.h.(2)	as17util1	Part-time radiology technicians
825	PTLAB	Y	5	4020	4024	Part-time laboratory technicians	E.10.i.(2)	as17util1	Part-time laboratory technicians
826	PTPHR	Y	5	4025	4029	Part-time pharmacists, licensed	E.10.j.(2)	as17util1	Part-time pharmacists, licensed
827	PTPHT	Y	5	4030	4034	Part-time pharmacy technicians	E.10.k.(2)	as17util1	Part-time pharmacy technicians
828	PTRESP	Y	5	4035	4039	Part-time respiratory therapists	E.10.l.(2)	as17util1	Part-time respiratory therapists
829	PTOTHTF	Y	5	4040	4044	Part-time all other personnel	E.10.m.(2)	as17util1	Part-time all other personnel
830	PTTOT	Y	5	4045	4049	Part-time total personnel	E.10.n.(2)	as17util1	Part-time total facility personnel
831	FTTOTH	Y	5	4050	4054	Total full-time hospital unit personnel		as17util1	Calculated Field: Total full-time facility personnel less total full-time nursing home personnel
832	PTTOTH	Y	5	4055	4059	Total part-time hospital unit personnel		as17util1	Calculated Field: Total part-time facility personnel less total part-time nursing home personnel
833	FTRNLT	N	5	4060	4064	Total full-time nursing home type unit/facility registered nurses	E.10.o.(1)	as17util1	Total full-time nursing home type unit/facility registered nurses
834	PTRNLT	N	5	4065	4069	Total part-time nursing home type unit/facility registered nurses	E.10.o.(2)	as17util1	Total part-time nursing home type unit/facility registered nurses
835	FTTOTLT	Y	5	4070	4074	Total Full-time nursing home personnel	E.10.p.(1)	as17util1	Total full-time nursing home personnel
836	PTTOTLT	Y	5	4075	4079	Total Part-time nursing home personnel	E.10.p.(2)	as17util1	Total part-time nursing home personnel
837	FTED	N	8	4080	4087	Physicians and dentists FTE	E.10.a.(3)	as17util1	Physicians and dentists FTE (Reported)
838	FTER	N	8	4088	4095	Medical and dental residents FTE	E.10.c.(3)	as17util1	Medical and dental residents FTE (Reported)
839	FTET	N	8	4096	4103	Other trainees FTE	E.10.d.(3)	as17util1	Other trainees FTE (Reported)
840	FTEN	N	8	4104	4111	Registered nurses FTE	E.10.e.(3)	as17util1	Registered nurses FTE (Reported)
841	FTEP	N	8	4112	4119	Licensed practical (vocational) nurses FTE	E.10.f.(3)	as17util1	Licensed practical (vocational) nurses FTE (Reported)
842	FTEAP	N	8	4120	4127	Nursing assistive personnel FTE	E.10.g.(3)	as17util1	Nursing assistive personnel FTE (Reported)
843	FTERAD	N	8	4128	4135	Radiology technicians FTE	E.10.h.(3)	as17util1	Radiology technicians FTE (Reported)
844	FTELAB	N	8	4136	4143	Laboratory technicians FTE	E.10.i.(3)	as17util1	Laboratory technicians FTE (Reported)

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
845	FTEPH	N	8	4144	4151	Pharmacists, licensed FTE	E.10.j.(3)	as17util1	Pharmacists, licensed FTE (Reported)
846	FTEPHT	N	8	4152	4159	Pharmacy technicians FTE	E.10.k.(3)	as17util1	Pharmacy technicians FTE (Reported)
847	FTERESP	N	8	4160	4167	Respiratory therapists FTE	E.10.l.(3)	as17util1	Respiratory therapists FTE (Reported)
848	FTEO	N	8	4168	4175	All other personnel FTE	E.10.m.(3)	as17util1	All other personnel FTE (Reported)
849	FTETF	N	8	4176	4183	Total facility personnel FTE	E.10.n.(3)	as17util1	Total facility personnel FTE (Reported)
850	FTERNLT	N	8	4184	4191	Nursing home type unit/facility registered nurses FTE	E.10.o.(3)	as17util1	Nursing home registered nurses FTE (Reported)
851	FTEU	N	8	4192	4199	Nursing home personnel FTE	E.10.p.(3)	as17util1	Nursing home personnel FTE (Reported)
852	VMD	N	8	4200	4207	Physician and dentists- vacancies	E.10.a.(4)	as17util1	Physician and dentists - vacancies
853	VRES	N	8	4208	4215	Medical and dental residents/interns- vacancies	E.10.c.(4)	as17util1	Medical and dental residents/interns- vacancies
854	VTTRN	N	8	4216	4223	Other trainees - vacancies	E.10.d.(4)	as17util1	Other trainees - vacancies
855	VRN	N	8	4224	4231	Registered nurses - vacancies	E.10.e.(4)	as17util1	Registered nurses - vacancies
856	VLPN	N	8	4232	4239	Licensed practical (vocational) nurses - vacancies	E.10.f.(4)	as17util1	Licensed practical (vocational) nurses - vacancies
857	VAST	N	8	4240	4247	Nursing assistive personnel - vacancies	E.10.g.(4)	as17util1	Nursing assistive personnel - vacancies
858	VRAD	N	8	4248	4255	Radiology technicians - vacancies	E.10.h.(4)	as17util1	Radiology technicians - vacancies
859	VLAB	N	8	4256	4263	Laboratory technicians - vacancies	E.10.i.(4)	as17util1	Laboratory technicians - vacancies
860	VPHR	N	8	4264	4271	Pharmacists, licensed - vacancies	E.10.j.(4)	as17util1	Pharmacists, licensed - vacancies
861	VPHT	N	8	4272	4279	Pharmacy technicians - vacancies	E.10.k.(4)	as17util1	Pharmacy technicians - vacancies
862	VRSP	N	8	4280	4287	Respiratory therapists - vacancies	E.10.l.(4)	as17util1	Respiratory therapists - vacancies
863	VOTHL	N	8	4288	4295	All other personnel - vacancies	E.10.m.(4)	as17util1	All other personnel - vacancies
864	VTOTL	N	8	4296	4303	Total facility personnel - vacancies	E.10.n.(4)	as17util1	Total facility personnel - vacancies
865	VRNH	N	8	4304	4311	Nursing home type unit/facility registered nurses- vacancies	E.10.o.(4)	as17util1	Nursing home type unit/facility registered nurses- vacancies
866	VTNH	N	8	4312	4319	Total nursing home type unit/facility personnel - vacancies	E.10.p.(4)	as17util1	Total nursing home type unit/facility personnel - vacancies
867	ERNFTE	N	8	4320	4327	Number of direct patient care RN FTEs	E.10.q.	as17util1	Number of FTEs (among employed RNs) involved in direct patient care
868	ADC	NA	8	4328	4335	Average daily census		as17util1	Inpatient Days / Days Covered
869	ADJADM	NA	8	4336	4343	Adjusted admissions		as17util1	Admissions + (Admissions * (Outpatient Revenue/Inpatient Revenue))
870	ADJPD	NA	8	4344	4351	Adjusted patient days		as17util1	Inpatient Days + (Inpatient Days * (Outpatient Revenue/Inpatient Revenue))
871	ADJADC	NA	8	4352	4359	Adjusted average daily census		as17util1	Adjusted Patient Days/Number of Days in Reporting Period
872	ADJPDH	NA	8	4360	4367	Adjusted patient days hospital unit		as17util1	Inpatient days hospital + (Inpatient days hospital* (Outpatient Revenue/Inpatient Revenue))
873	ADJADCH	NA	8	4368	4375	Adjusted average daily census hospital unit		as17util1	Adjusted Patient Days Hospital Unit/Number of Days in Reporting Period
874	FTERNH	NA	8	4376	4383	Registered nurses FTE hospital unit		as17util1	Calculated Field: Total facility RN FTE less nursing home unit RN FTE

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
875	FTEMD	NA	8	4384	4391	Full time equivalent physicians and dentists		as17util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
876	FTERN	NA	8	4392	4399	Full time equivalent registered nurses		as17util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
877	FTELPN	NA	8	4400	4407	Full time equivalent licensed practical or vocational nurses		as17util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
878	FTERES	NA	8	4408	4415	Full time equivalent medical and dental residents and interns		as17util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
879	FTETRAN	NA	8	4416	4423	Full time equivalent other trainees		as17util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
880	FTETTRN	NA	8	4424	4431	Full time equivalent total trainees		as17util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
881	FTEOTH94	NA	8	4432	4439	Full time equivalent all other personnel		as17util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
882	FTEH	NA	8	4440	4447	Full time equivalent hospital unit total personnel		as17util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
883	FTENH	NA	8	4448	4455	Full time equivalent nursing home total personnel		as17util1	All full time equivalent personnel fields are calculated by adding full-time personnel to 0.5 * related part-time personnel.
884	FTE	NA	8	4456	4463	Full time equivalent total personnel		as17util1	Excludes medical and dental residents, interns and other trainees
885	OPRA	N	4	4464	4467	Number of operating rooms	E.1.j.	as17util1	Number of operating rooms
886	EADMTOT	NA	1	4468	4468	(Estimation Flag) Admissions		as17util1	0=reported, 1=estimated, 2=expanded
887	EIPDTOT	NA	1	4469	4469	(Estimation Flag) Inpatient days		as17util1	0=reported, 1=estimated, 2=expanded
888	EADMH	NA	1	4470	4470	(Estimation Flag) Hospital unit admissions		as17util1	0=reported, 1=estimated, 2=expanded

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
889	EIPDH	NA	1	4471	4471	(Estimation Flag) Hospital unit inpatient days		as17util1	0=reported, 1=estimated, 2=expanded
890	EADMLT	NA	1	4472	4472	(Estimation Flag) Nursing home unit admissions		as17util1	0=reported, 1=estimated, 2=expanded
891	EIPDLT	NA	1	4473	4473	(Estimation Flag) Nursing home unit inpatient days		as17util1	0=reported, 1=estimated, 2=expanded
892	EMCRDC	NA	1	4474	4474	(Estimation Flag) Medicare inpatient discharges		as17util1	0=reported, 1=estimated, 2=expanded
893	EMCRIPD	NA	1	4475	4475	(Estimation Flag) Medicare inpatient days		as17util1	0=reported, 1=estimated, 2=expanded
894	EMCDDC	NA	1	4476	4476	(Estimation Flag) Medicaid inpatient discharges		as17util1	0=reported, 1=estimated, 2=expanded
895	EMCDIPD	NA	1	4477	4477	(Estimation Flag) Medicaid inpatient days		as17util1	0=reported, 1=estimated, 2=expanded
896	EMCRDCH	NA	1	4478	4478	(Estimation Flag) Hospital unit Medicare inpatient discharges		as17util1	0=reported, 1=estimated, 2=expanded
897	EMCRIPDH	NA	1	4479	4479	(Estimation Flag) Hospital unit Medicare inpatient days		as17util1	0=reported, 1=estimated, 2=expanded
898	EMCDDCH	NA	1	4480	4480	(Estimation Flag) Hospital unit Medicaid inpatient discharges		as17util1	0=reported, 1=estimated, 2=expanded
899	EMCDIPDH	NA	1	4481	4481	(Estimation Flag) Hospital unit Medicaid inpatient days		as17util1	0=reported, 1=estimated, 2=expanded
900	EMCRDCLT	NA	1	4482	4482	(Estimation Flag) Nursing home unit Medicare inpatient discharges		as17util1	0=reported, 1=estimated, 2=expanded
901	EMCRPDLT	NA	1	4483	4483	(Estimation Flag) Nursing home unit Medicare inpatient days		as17util1	0=reported, 1=estimated, 2=expanded
902	EMCDDCLT	NA	1	4484	4484	(Estimation Flag) Nursing home unit Medicaid inpatient discharges		as17util1	0=reported, 1=estimated, 2=expanded
903	EMCDPDLT	NA	1	4485	4485	(Estimation Flag) Nursing home unit Medicaid inpatient days		as17util1	0=reported, 1=estimated, 2=expanded
904	EBIRTHS	NA	1	4486	4486	(Estimation Flag) Births		as17util1	0=reported, 1=estimated, 2=expanded
905	ESUROPIP	NA	1	4487	4487	(Estimation Flag) Inpatient surgical operations		as17util1	0=reported, 1=estimated, 2=expanded
906	ESUROPOP	NA	1	4488	4488	(Estimation Flag) Outpatient surgical operations		as17util1	0=reported, 1=estimated, 2=expanded
907	ESUROPTO	NA	1	4489	4489	(Estimation Flag) Total surgical operations		as17util1	0=reported, 1=estimated, 2=expanded
908	EVEM	NA	1	4490	4490	(Estimation Flag) Outpatient visits emergency		as17util1	0=reported, 1=estimated, 2=expanded
909	EVOTH	NA	1	4491	4491	(Estimation Flag) Outpatient visits other		as17util1	0=reported, 1=estimated, 2=expanded
910	EVTOT	NA	1	4492	4492	(Estimation Flag) Outpatient visits total		as17util1	0=reported, 1=estimated, 2=expanded

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
911	EPAYTOT	NA	1	4493	4493	(Estimation Flag) Total payroll expenses		as17util1	0=reported, 1=estimated, 2=expanded
912	ENPAYBEN	NA	1	4494	4494	(Estimation Flag) Employee benefits		as17util1	0=reported, 1=estimated, 2=expanded
913	EPAYTOTH	NA	1	4495	4495	(Estimation Flag) Hospital unit payroll expenses		as17util1	0=reported, 1=estimated, 2=expanded
914	ENPYBENH	NA	1	4496	4496	(Estimation Flag) Hospital unit employee benefits		as17util1	0=reported, 1=estimated, 2=expanded
915	EPYTOTLT	NA	1	4497	4497	(Estimation Flag) Nursing home unit payroll expenses		as17util1	0=reported, 1=estimated, 2=expanded
916	ENPBENLT	NA	1	4498	4498	(Estimation Flag) Nursing home unit employee benefits		as17util1	0=reported, 1=estimated, 2=expanded
917	EFTMDTF	NA	1	4499	4499	(Estimation Flag) Full-time physicians and dentists		as17util1	0=reported, 1=estimated, 2=expanded
918	EFTRES	NA	1	4500	4500	(Estimation Flag) Full-time medical and dental residents		as17util1	0=reported, 1=estimated, 2=expanded
919	EFTTRN84	NA	1	4501	4501	(Estimation Flag) Full-time other trainees		as17util1	0=reported, 1=estimated, 2=expanded
920	EFTRNTF	NA	1	4502	4502	(Estimation Flag) Full-time registered nurses		as17util1	0=reported, 1=estimated, 2=expanded
921	EFTLPNTF	NA	1	4503	4503	(Estimation Flag) Full-time licensed practical or vocational nurses		as17util1	0=reported, 1=estimated, 2=expanded
922	EFTAST	NA	1	4504	4504	(Estimation Flag) Full-time nursing assistive personnel		as17util1	0=reported, 1=estimated, 2=expanded
923	EFTRAD	NA	1	4505	4505	(Estimation Flag) Full-time radiology technicians		as17util1	0=reported, 1=estimated, 2=expanded
924	EFTLAB	NA	1	4506	4506	(Estimation Flag) Full-time laboratory technicians		as17util1	0=reported, 1=estimated, 2=expanded
925	EFTPHR	NA	1	4507	4507	(Estimation Flag) Full-time pharmacists, licensed		as17util1	0=reported, 1=estimated, 2=expanded
926	EFTPHT	NA	1	4508	4508	(Estimation Flag) Full-time pharmacy technicians		as17util1	0=reported, 1=estimated, 2=expanded
927	EFTRESP	NA	1	4509	4509	(Estimation Flag) Full-time respiratory therapists		as17util1	0=reported, 1=estimated, 2=expanded
928	EFTOTHTF	NA	1	4510	4510	(Estimation Flag) Full-time all other personnel		as17util1	0=reported, 1=estimated, 2=expanded
929	EFTTOT	NA	1	4511	4511	(Estimation Flag) Full-time total personnel		as17util1	0=reported, 1=estimated, 2=expanded
930	EPTMDTF	NA	1	4512	4512	(Estimation Flag) Part-time physicians and dentists		as17util1	0=reported, 1=estimated, 2=expanded
931	EPTRES	NA	1	4513	4513	(Estimation Flag) Part-time medical and dental residents		as17util1	0=reported, 1=estimated, 2=expanded
932	EPTTRN84	NA	1	4514	4514	(Estimation Flag) Part-time other trainees		as17util1	0=reported, 1=estimated, 2=expanded

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
933	EPTRNTF	NA	1	4515	4515	(Estimation Flag) Part-time registered nurses		as17util1	0=reported, 1=estimated, 2=expanded
934	EPTLPNTF	NA	1	4516	4516	(Estimation Flag) Part-time licensed practical or vocational nurses		as17util1	0=reported, 1=estimated, 2=expanded
935	EPTAST	NA	1	4517	4517	(Estimation Flag) Part-time nursing assistive personnel		as17util1	0=reported, 1=estimated, 2=expanded
936	EPTRAD	NA	1	4518	4518	(Estimation Flag) Part-time radiology technicians		as17util1	0=reported, 1=estimated, 2=expanded
937	EPTLAB	NA	1	4519	4519	(Estimation Flag) Part-time laboratory technicians		as17util1	0=reported, 1=estimated, 2=expanded
938	EPTPHR	NA	1	4520	4520	(Estimation Flag) Part-time pharmacists, licensed		as17util1	0=reported, 1=estimated, 2=expanded
939	EPTPHT	NA	1	4521	4521	(Estimation Flag) Part-time pharmacy technicians		as17util1	0=reported, 1=estimated, 2=expanded
940	EPTRESP	NA	1	4522	4522	(Estimation Flag) Part-time respiratory therapists		as17util1	0=reported, 1=estimated, 2=expanded
941	EPTOTHTF	NA	1	4523	4523	(Estimation Flag) Part-time all other personnel		as17util1	0=reported, 1=estimated, 2=expanded
942	EPTTOT	NA	1	4524	4524	(Estimation Flag) Part-time total personnel		as17util1	0=reported, 1=estimated, 2=expanded
943	EFTTOTH	NA	1	4525	4525	(Estimation Flag) Hospital unit total full time		as17util1	0=reported, 1=estimated, 2=expanded
944	EPTTOTH	NA	1	4526	4526	(Estimation Flag) Hospital unit total part time		as17util1	0=reported, 1=estimated, 2=expanded
945	EFTTOTLT	NA	1	4527	4527	(Estimation Flag) Nursing home unit total full time		as17util1	0=reported, 1=estimated, 2=expanded
946	EPTTOTLT	NA	1	4528	4528	(Estimation Flag) Nursing home unit total part time		as17util1	0=reported, 1=estimated, 2=expanded
947	EEXPTOT	NA	1	4529	4529	(Estimation Flag) Total expenses		as17util1	0=reported, 1=estimated, 2=expanded
948	EXPTHB	NA	1	4530	4530	(Estimation Flag) Hospital unit total expenses, excluding bad debt		as17util1	0=reported, 1=estimated, 2=expanded
949	EXPTLB	NA	1	4531	4531	(Estimation Flag) Nursing home total expenses, excluding bad debt		as17util1	0=reported, 1=estimated, 2=expanded
950	TECAR	N	8	4532	4539	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total employed	E.11.a.1.	as17util2	Number of physicians with privileges
951	TEMER	N	8	4540	4547	Emergency medicine - total employed	E.11.b.1.	as17util2	Number of physicians with privileges
952	TEHSP	N	8	4548	4555	Hospitalist - total employed	E.11.c.1.	as17util2	Number of physicians with privileges
953	TEINT	N	8	4556	4563	Intensivist - total employed	E.11.d.1.	as17util2	Number of physicians with privileges
954	TEGST	N	8	4564	4571	Radiologist/pathologist/ anesthesiologist - total employed	E.11.e.1.	as17util2	Number of physicians with privileges
955	TEOTH	N	8	4572	4579	Other specialists - total employed	E.11.f.1.	as17util2	Number of physicians with privileges

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
956	TETOT	N	8	4580	4587	Total - total employed	E.11.g.1.	as17util2	Number of physicians with privileges
957	TCCAR	N	8	4588	4595	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total individual contract	E.11.a.2.	as17util2	Number of physicians with privileges
958	TCMER	N	8	4596	4603	Emergency medicine - total individual contract	E.11.b.2.	as17util2	Number of physicians with privileges
959	TCHSP	N	8	4604	4611	Hospitalist - total individual contract	E.11.c.2.	as17util2	Number of physicians with privileges
960	TCINT	N	8	4612	4619	Intensivist - total individual contract	E.11.d.2.	as17util2	Number of physicians with privileges
961	TCGST	N	8	4620	4627	Radiologist/pathologist/anesthesiologist - total individual contract	E.11.e.2.	as17util2	Number of physicians with privileges
962	TCOTH	N	8	4628	4635	Other specialist - total individual contract	E.11.f.2.	as17util2	Number of physicians with privileges
963	TCTOT	N	8	4636	4643	Total - individual contract	E.11.g.2.	as17util2	Number of physicians with privileges
964	TGCAR	N	8	4644	4651	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total group contract	E.11.a.3.	as17util2	Number of physicians with privileges
965	TGMER	N	8	4652	4659	Emergency medicine - total group contract	E.11.b.3.	as17util2	Number of physicians with privileges
966	TGHSP	N	8	4660	4667	Hospitalist - total group contract	E.11.c.3.	as17util2	Number of physicians with privileges
967	TGINT	N	8	4668	4675	Intensivist - total group contract	E.11.d.3.	as17util2	Number of physicians with privileges
968	TGGST	N	8	4676	4683	Radiologist/pathologist/anesthesiologist - total group contract	E.11.e.3.	as17util2	Number of physicians with privileges
969	TGOTH	N	8	4684	4691	Other specialist - total group contract	E.11.f.3.	as17util2	Number of physicians with privileges
970	TGTOT	N	8	4692	4699	Total - total group contract	E.11.g.3.	as17util2	Number of physicians with privileges
971	NECAR	N	8	4700	4707	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - not employed or under contract	E.11.a.4.	as17util2	Number of physicians with privileges
972	NEMER	N	8	4708	4715	Emergency medicine - not employed or under contract	E.11.b.4.	as17util2	Number of physicians with privileges
973	NEHSP	N	8	4716	4723	Hospitalist - not employed or under contract	E.11.c.4.	as17util2	Number of physicians with privileges
974	NEINT	N	8	4724	4731	Intensivist - not employed or under contract	E.11.d.4.	as17util2	Number of physicians with privileges
975	NEGST	N	8	4732	4739	Radiologist/pathologist/anesthesiologist - not employed or under contract	E.11.e.4.	as17util2	Number of physicians with privileges
976	NEOTH	N	8	4740	4747	Other specialist - not employed or under contract	E.11.f.4.	as17util2	Number of physicians with privileges
977	NETOT	N	8	4748	4755	Total - not employed or under contract	E.11.g.4.	as17util2	Number of physicians with privileges

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
978	TPCAR	N	8	4756	4763	Primary care (general practitioner, general internal medicine, family practice, general pediatrics, obstetrics/gynecology, geriatrics) - total privileged	E.11.a.5.	as17util2	Number of physicians with privileges
979	TPMER	N	8	4764	4771	Emergency medicine - total privileged	E.11.b.5.	as17util2	Number of physicians with privileges
980	TPHSP	N	8	4772	4779	Hospitalist - total privileged	E.11.c.5.	as17util2	Number of physicians with privileges
981	TPINT	N	8	4780	4787	Intensivist - total privileged	E.11.d.5.	as17util2	Number of physicians with privileges
982	TPGST	N	8	4788	4795	Radiologist/pathologist/anesthesiologist - total privileged	E.11.e.5.	as17util2	Number of physicians with privileges
983	TPOTH	N	8	4796	4803	Other specialist - total privileged	E.11.f.5.	as17util2	Number of physicians with privileges
984	TPRTOT	N	8	4804	4811	Total - total privileged	E.11.g.5.	as17util2	Number of physicians with privileges
985	HSPTL	N	1	4812	4812	Hospitalists provide care	E.12.a.	as17util2	1 = yes, 0 = no
986	FTEHSP	N	8	4813	4820	Hospitalists FTE	E.12.b.	as17util2	Hospitalists FTE
987	INTCAR	N	1	4821	4821	Intensivists provide care	E.13.a.	as17util2	1 = yes, 0 = no
988	FTEMSI	N	8	4822	4829	Intensivists FTE Medical-surgical intensive care	E.13.b.1.	as17util2	Intensivists FTE Medical-surgical intensive care
989	FTECIC	N	8	4830	4837	Intensivists FTE Cardiac intensive care	E.13.b.2.	as17util2	Intensivists FTE Cardiac intensive care
990	FTENIC	N	8	4838	4845	Intensivists FTE Neonatal intensive care	E.13.b.3.	as17util2	Intensivists FTE Neonatal intensive care
991	FTEPIC	N	8	4846	4853	Intensivists FTE Pediatric intensive care	E.13.b.4.	as17util2	Intensivists FTE Pediatric intensive care
992	FTEOIC	N	8	4854	4861	Intensivists FTE Other intensive care	E.13.b.5.	as17util2	Intensivists FTE Other intensive care
993	FTEINT	N	8	4862	4869	Intensivists FTE Total	E.13.b.6.	as17util2	Intensivists FTE Total
994	CLSMSI	N	1	4870	4870	Closed medical surgical intensive care	E.13.b.1.	as17util2	1 = yes
995	CLSCIC	N	1	4871	4871	Closed cardiac intensive care	E.13.b.2.	as17util2	1 = yes
996	CLSNIC	N	1	4872	4872	Closed neonatal intensive care	E.13.b.3.	as17util2	1 = yes
997	CLSPIC	N	1	4873	4873	Closed pediatric intensive care	E.13.b.4.	as17util2	1 = yes
998	CLSOIC	N	1	4874	4874	Closed other intensive care	E.13.b.5.	as17util2	1 = yes
999	APRN	N	1	4875	4875	Do Advanced practice nurses/physician assistants provide care for patients in your hospital?	E.14.a.	as17util2	1 = yes, 0 = no
1000	FTAPRN	N	8	4876	4883	Full-time advanced practice nurses	E.14.b.	as17util2	Number of full-time advanced practice nurses
1001	PTAPRN	N	8	4884	4891	Part-time advanced practice nurses	E.14.b.	as17util2	Number of part-time advanced practice nurses
1002	FTEAPN	N	8	4892	4899	FTE Advanced practice nurses	E.14.b.	as17util2	Number of advanced practice nurse FTEs
1003	FTPHRN	N	8	4900	4907	Full-time physician assistants	E.14.b.	as17util2	Number of full-time physician assistants

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
1004	PTPHRN	N	8	4908	4915	Part-time physician assistants	E.14.b.	as17util2	Number of part-time physician assistants
1005	FTEPHRN	N	8	4916	4923	FTE Physician assistants	E.14.b.	as17util2	Number of physician assistant FTEs
1006	APCAR	N	1	4924	4924	Primary care advanced practice nurses/physician assistants	E.14.c.	as17util2	1 = yes, 0 = no
1007	APANES	N	1	4925	4925	Anesthesia services advanced practice nurses/physician assistants	E.14.c.	as17util2	1 = yes, 0 = no
1008	APEMER	N	1	4926	4926	Emergency department care advanced practice nurses/physician assistants	E.14.c.	as17util2	1 = yes, 0 = no
1009	APSPC	N	1	4927	4927	Other specialty care advanced practice nurses/physician assistants	E.14.c.	as17util2	1 = yes, 0 = no
1010	APED	N	1	4928	4928	Patient education advanced practice nurses/physician assistants	E.14.c.	as17util2	1 = yes, 0 = no
1011	APCASE	N	1	4929	4929	Case management advanced practice nurses/physician assistants	E.14.c.	as17util2	1 = yes, 0 = no
1012	APOTH	N	1	4930	4930	Other advanced practice nurses/physician assistants		as17util2	1 = yes, 0 = no
1013	FORNRSA	N	1	4931	4931	Did your facility hire more foreign-educated nurses to help fill RN vacancies in 2017 vs. 2016?	E.15.a.	as17util2	0=did not hire, 1=more, 2=less, 3=same
1014	AFRICA	N	1	4932	4932	From which countries/continents are you recruiting foreign-educated nurses? Africa	E.15.b.	as17util2	1 = yes, 0 = no
1015	KOREA	N	1	4933	4933	From which countries/continents are you recruiting foreign-educated nurses? South Korea	E.15.b.	as17util2	1 = yes, 0 = no
1016	CANADA	N	1	4934	4934	From which countries/continents are you recruiting foreign-educated nurses? Canada	E.15.b.	as17util2	1 = yes, 0 = no
1017	PH	N	1	4935	4935	From which countries/continents are you recruiting foreign-educated nurses? Philippines	E.15.b.	as17util2	1 = yes, 0 = no
1018	CHINA	N	1	4936	4936	From which countries/continents are you recruiting foreign-educated nurses? China	E.15.b.	as17util2	1 = yes, 0 = no
1019	INDIA	N	1	4937	4937	From which countries/continents are you recruiting foreign-educated nurses? India	E.15.b.	as17util2	1 = yes, 0 = no
1020	OFRNRS	N	1	4938	4938	From which countries/continents are you recruiting foreign-educated nurses? Other	E.15.b.	as17util2	1 = yes, 0 = no

Item No.	Field Name	Estimated	Length	Start	End	Field Description	Survey Question	Access Table	Notes
1021	RNSCH	N	10	4939	4948	If your hospital hired RNs during the reporting period, how many were new graduates from nursing schools?	F.4.	as17util2	Number of new graduate RNs
1022	PLNTA	N	10	4949	4958	Property, plant and equipment at cost	E.7.a.	as17util2	Property, plant and equipment at cost
1023	ADEPRA	N	10	4959	4968	Accumulated depreciation	E.7.b.	as17util2	Accumulated depreciation
1024	ASSNET	N	10	4969	4978	Net property, plant and equipment	E.7.c.	as17util2	Net property, plant and equipment
1025	GFEET	N	10	4979	4988	Total gross square feet of your physical plant	E.7.d.	as17util2	Total gross square feet
1026	CEAMT	N	10	4989	4998	Total capital expenses	E.8.	as17util2	Total capital expenses
1027	ITEXPA	N	10	4999	5008	IT operating expense	E.9.a.	as17util2	IT operating expense
1028	ITBUGT	N	10	5009	5018	IT capital expense	E.9.b.	as17util2	IT capital expense
1029	ITFTE	N	10	5019	5028	Number of employed IT staff (in FTEs)	E.9.c.	as17util2	Number of employed IT staff (in FTEs)
1030	OSFTE	N	10	5029	5038	Number of outsourced IT staff (in FTEs)	E.9.d.	as17util2	Number of outsourced IT staff (in FTEs)
1031	ENDMARK	N	1	5039	5039	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
91	Children's cancer

Appendix C - Census Division and State Code Descriptions

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

Appendix D - Bed Size Code Descriptions

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

Appendix F - City Rank Code List

Code	City	State	Code	City	State	Code	City	State
1	New York	NY	35	Sacramento	CA	69	Plano	TX
2	Los Angeles	CA	36	Mesa	AZ	70	Newark	NJ
3	Chicago	IL	37	Kansas City	MO	71	Lincoln	NE
4	Houston	TX	38	Atlanta	GA	72	Orlando	FL
5	Phoenix	AZ	39	Long Beach	CA	73	Irvine	CA
6	Philadelphia	PA	40	Omaha	NE	74	Toledo	OH
7	San Antonio	TX	41	Raleigh	NC	75	Jersey City	NJ
8	San Diego	CA	42	Colorado Springs	CO	76	Chula Vista	CA
9	Dallas	TX	43	Miami	FL	77	Durham	NC
10	San Jose	CA	44	Virginia Beach	VA	78	Fort Wayne	IN
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	Fort Worth	TX	49	New Orleans	LA	83	Lubbock	TX
16	Indianapolis	IN	50	Wichita	KS	84	Chandler	AZ
17	Charlotte	NC	51	Cleveland	OH	85	Scottsdale	AZ
18	Seattle	WA	52	Tampa	FL	86	Reno	NV
19	Denver	CO	53	Bakersfield	CA	87	Glendale	AZ
20	Washington	DC	54	Aurora	CO	88	Norfolk	VA
21	Boston	MA	55	Anaheim	CA	89	Winston-Salem	NC
22	El Paso	TX	56	Honolulu	HI	90	North Las Vegas	NV
23	Detroit	MI	57	Santa Ana	CA	91	Gilbert	AZ
24	Nashville	TN	58	Riverside	CA	92	Chesapeake	VA
25	Memphis	TN	59	Corpus Christi	TX	93	Irving	TX
26	Portland	OR	60	Lexington	KY	94	Hialeah	FL
27	Oklahoma City	OK	61	Stockton	CA	95	Garland	TX
28	Las Vegas	NV	62	Saint Louis	MO	96	Fremont	CA
29	Louisville	KY	63	Saint Paul	MN	97	Richmond	VA
30	Baltimore	MD	64	Henderson	NV	98	Boise	ID
31	Milwaukee	WI	65	Pittsburgh	PA	99	Baton Rouge	LA
32	Albuquerque	NM	66	Cincinnati	OH	100	Des Moines	IA
33	Tucson	AZ	67	Anchorage	AK			
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 2017 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 wer
- 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.

Discontinuation of AHA's Registration Program

Starting with the FY2017 AHA Annual Survey Database, the AHA will no longer employ its own methodology to classify hospitals as registered. We will use the following definition, which is more generally known and accepted:

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

As a result of the application of the new, broader hospital definition, the *Summary of Changes,* a reconciliation between two Annual Survey years, no longer categorizes hospitals as 'Registered' and 'Nonregistered'.

CLASSIFICATION	TOTAL	UNITED STATES	ASSOCIATED AREAS
2016 TOTAL	**6,239**	**6,168**	**71**
DELETIONS			
Changed to inpatient care other than a hospital	4	4	
Changed to an outpatient facility	7	7	
Closed	45	45	
Demerged/Dissolution			
Duplicate record			
Merged to form a new hospital			
Merged into a hospital already on file	14	14	
Temporarily inactive record/Under construction	2	2	
TOTAL DELETIONS	**72**	**72**	**-**
ADDITIONS			
Demerger result			
Merger result			
Newly added	115	114	1
Previously closed/reopened			
Changed to hospital from other inpatient care			
TOTAL ADDITIONS	**115**	**114**	**1**
2017 TOTAL	**6,282**	**6,210**	**72**

2016 VS 2017 DELETIONS

The following hospitals have been deleted from the FY2017 AHA Annual Survey Database.

ID	Name	City	State	Reason for Deletion	Merger information - Parent organization
6140014	Curahealth Hospital Boston	Brighton	MA	Closed	
6141670	Curahealth Boston North Shore	Peabody	MA	Closed	
6150001	Memorial Hospital of Rhode Island	Pawtucket	RI	Closed	
6160015	Wellspring Foundation	Bethlehem	CT	Residential Treatment Facility	
6210400	New York-Presbyterian/Lawrence Hospital	Bronxville	NY	Unit of 6210024	New York-Presbyterian Hospital - New York, NY
6214612	TLC Health Network - Lake Shore Hospital	Irving	NY	Unit of 6211470	Brooks Memorial Hospital - Dunkirk, NY
6214950	Moses Ludington Hospital	Ticonderoga	NY	Unit of 6211490	The University of Vermont Health Network Elizabethtown Community Hospital - Elizabethtown, NY
6221270	Runnells Center for Rehabilitation and Healthcare	Berkeley Heights	NJ	Nursing Facility	
6320417	Warwick Manor Behavioral Health	East New Market	MD	Psychiatric Facility	
6341136	Pioneer Community Hospital of Patrick	Stuart	VA	Closed	
6349040	Woodrow Wilson Rehabilitation Center	Fishersville	VA	Ambulatory Care Facility	
6360710	FirstHealth Moore Regional Hospital - Hamlet	Hamlet	NC	Closed	
6361363	Our Community Hospital	Scotland Neck	NC	Closed	
6380031	Select Specialty Hospital-Atlanta	Atlanta	GA	Closed	
6380039	Select Specialty Hospital - Northeast Atlanta	Atlanta	GA	Closed	
6380464	Chestatee Regional Hospital	Dahlonega	GA	Closed	
6390211	Atlantic Shores Hospital	Fort Lauderdale	FL	Closed	
6390281	Campbellton Graceville Hospital	Graceville	FL	Closed	
6390508	Fishermen's Hospital	Marathon	FL	Temporarily Closed	
6410056	Kindred Hospital of Central Ohio	Mansfield	OH	Closed	
6411550	Oakwood Correctional Facility	Lima	OH	Closed	
6411670	Affinity Medical Center	Massillon	OH	Closed	
6420013	Kindred Hospital Indianapolis South	Greenwood	IN	Closed	
6420035	Kindred Hospital of Northern Indiana	Mishawaka	IN	Closed	
6430435	RML Specialty Hospital	Chicago	IL	Unit of 6431925	RML Specialty Hospital - Hinsdale, IL
6440028	Great Lakes Specialty Hospital-Grand Rapids	Grand Rapids	MI	Closed	
6440042	Kindred Hospital Detroit	Detroit	MI	Closed	
6441178	Spectrum Health Special Care Hospital	Grand Rapids	MI	Closed	
6510100	NorthKey Community Care	Covington	KY	Psychiatric Facility	
6510180	Ireland Army Community Hospital	Fort Knox	KY	Ambulatory Care Facility	
6510450	Shriners Hospitals for Children-Lexington	Lexington	KY	Ambulatory Surgical Facility	
6520033	Select Specialty Hospital-Knoxville	Knoxville	TN	Unit of 6520034	Select Specialty Hospital-North Knoxville - Powell, TN
6520213	Copper Basin Medical Center	Copperhill	TN	Closed	
6520410	Tennova Healthcare Regional Hospital of Jackson	Jackson	TN	Unit of 6524010	West Tennessee Healthcare North Hospital - Jackson, TN
6520655	Peninsula Hospital	Louisville	TN	Unit of 6520530	Parkwest Medical Center - Knoxville, TN
6530535	RMC Jacksonville	Jacksonville	AL	Closed	
6539030	J. Paul Jones Hospital	Camden	AL	Urgent Care Center	
6620131	Continuing Care Hospital at St. Luke's	Cedar Rapids	IA	Closed	
6670495	Rainbow Mental Health Facility	Kansas City	KS	Closed	
6720013	LifeCare Hospitals of Shreveport	Shreveport	LA	Closed	
6720094	WK Bossier Health Center	Bossier City	LA	Unit of 6720877	Willis-Knighton Medical Center - Shreveport, LA
6720134	Promise Hospital of Baton Rouge - Mid-City Campus	Baton Rouge	LA	Unit of 6720135	Promise Hospital of Baton Rouge - Ochsner Campus - Baton Rouge, LA
6720207	Calcasieu Oaks Geriatric Psychiatric Hospital	Lake Charles	LA	Unit of 6720147	South Cameron Memorial Hospital - Cameron, LA

2016 VS 2017 DELETIONS

The following hospitals have been deleted from the FY2017 AHA Annual Survey Database.

ID	Name	City	State	Reason for Deletion	Merger information - Parent organization
6720364	Compass Behavioral Center of Crowley	Crowley	LA	Closed	
6720379	Acadia Optima Hospital	Lafayette	LA	Unit of 6720390	Vermilion Behavioral Health Systems - Lafayette, LA
6730016	AMG Specialty Hospital-Edmond	Edmond	OK	Closed	
6730026	AMG Specialty Hospital-Tulsa	Tulsa	OK	Closed	
6740109	Care Regional Medical Center	Aransas Pass	TX	Closed	
6740143	Plum Creek Specialty Hospital	Amarillo	TX	Closed	
6740161	Lifecare Hospitals of South Texas-North McAllen	McAllen	TX	Closed	
6740273	Memorial Hermann Surgical Hospital - First Colony	Sugar Land	TX	Ambulatory Surgical Center	
6740283	Abilene Behavioral Health	Abilene	TX	Closed	
6740286	Nix Community General Hospital	Dilley	TX	Closed	
6740294	Kindred Hospital-White Rock	Dallas	TX	Closed	
6740305	Select Specialty Hospital-South Dallas	Dallas	TX	Closed	
6740351	Kindred Rehabilitation Hospital Arlington	Arlington	TX	Closed	
6740393	Cook Children's Northeast Hospital	Hurst	TX	Urgent Care Center	
6740843	Houston County Medical Center	Crockett	TX	Closed	
6740888	Hopebridge Hospital	Houston	TX	Closed	
6740920	Lakeway Regional Medical Center	Lakeway	TX	Unit of 6740381	Baylor Scott & White Medical Center - Round Rock - Round Rock, TX
6740958	Victory Medical Center Landmark	San Antonio	TX	Closed	
6740979	Walnut Hill Medical Center	Dallas	TX	Closed	
6741029	Bay Area Regional Medical Center	Webster	TX	Closed	
6741054	Weimar Medical Center	Weimar	TX	Closed	
6742327	CHRISTUS Good Shepherd Medical Center	Longview	TX	Unit of 6742430	CHRISTUS Good Shepherd Medical Center-Marshall - Longview, TX
6743320	Stamford Memorial Hospital	Stamford	TX	Ambulatory Care Center	
6860042	Gilbert Hospital	Gilbert	AZ	Closed	
6860056	Yavapai Regional Medical Center - East	Prescott Valley	AZ	Unit of 6860320	Yavapai Regional Medical Center - Prescott, AZ
6860256	Abrazo Maryvale Campus	Phoenix	AZ	Closed	
6930440	Coalinga Regional Medical Center	Coalinga	CA	Closed	
6931510	Pacific Alliance Medical Center	Los Angeles	CA	Closed	
6933721	Tulare Regional Medical Center	Tulare	CA	Temporarily Closed	

2016 vs 2017 ADDITIONS   v 1.1
The following hospitals have been added to the FY 2017 AHA Annual Survey Database

ID	Name	City	State	Reason for Addition
6040374	Professional Hospital Guaynabo	Guaynabo	PR	Newly added
6130379	Vermont Psychiatric Care Hospital	Berlin	VT	Newly added
6140218	Dr. Solomon Carter Fuller Mental Health Center	Boston	MA	Newly added
6140219	Cape Cod & Island Community Mental Health Center	Pocasset	MA	Newly added
6140459	Southcoast Behavioral Health	Dartmouth	MA	Newly added
6210266	Terence Cardinal Cooke Health Care Center	New York	NY	Newly added
6210511	Kirby Forensic Psychiatric Center	New York	NY	Newly added
6220448	Columbus Hospital LTACH	Newark	NJ	Newly added
6220472	Northbrook Behavioral Health Hospital	Blackwood	NJ	Newly added
6220475	Hudson County Meadowview Psychiatric Hospital	Secaucus	NJ	Newly added
6220478	CareOne at Hacksensack University Medical Center at Pascack Valley	Westwood	NJ	Newly added
6229151	CareOne at Trinitas Regional Medical Center	Elizabeth	NJ	Newly added
6230288	Lancaster Rehabilitation Hospital	Lancaster	PA	Newly added
6230294	Roxbury Treatment Center	Shippensburg	PA	Newly added
6230497	Haven Behavioral Hospital of Eastern Pennsylvania	Reading	PA	Newly added
6230504	Barix Clinics of Pennsylvania	Langhorne	PA	Newly added
6230506	Kirkbride Center	Philadelphia	PA	Newly added
6230552	St. Luke's Monroe	Stroudsburg	PA	Newly added
6230554	PAM Specialty Hospital of Wilkes-Barre	Wilkes Barre	PA	Newly added
6230557	Haven Behavioral Hospital of Philadelphia	Philadelphia	PA	Newly added
6230561	Reading Hospital Rehabilitation at Wyomissing	Wyomissing	PA	Newly added
6230562	St. Mary Rehabilitation Hospital	Langhorne	PA	Newly added
6310390	HEALTHSOUTH Rehabilitation Hospital of Middletown	Middletown	DE	Newly added
6340234	Select Specialty Hospital Hampton Roads	Newport News	VA	Newly added
6349171	Hiram W. Davis Medical Center	Petersburg	VA	Newly added
6369139	Carolinas ContinueCARE Hospital at University	Charlotte	NC	Newly added
6370195	South Carolina Department of Corrections Hospital	Columbia	SC	Newly added
6379102	Rebound Behavioral Health	Lancaster	SC	Newly added
6380508	Lakeview Behavioral Health	Norcross	GA	Newly added
6390406	Wekiva Springs	Jacksonville	FL	Newly added
6390423	Eastside Psychiatric Hospital	Tallahassee	FL	Newly added
6399257	Orlando VA Medical Center	Orlando	FL	Newly added
6410294	Ohio Valley Surgical Hospital	Springfield	OH	Newly added
6410296	Surgical Hospital at Southwoods	Youngstown	OH	Newly added
6410505	The Woods at Parkside	Gahanna	OH	Newly added
6410521	Access Hospital Dayton	Dayton	OH	Newly added
6410525	Ridgeview Behavioral Hospital	Middle Point	OH	Newly added
6410526	Beckett Springs	West Chester	OH	Newly added
6410564	UH Rehabilitation Hospital	Beachwood	OH	Newly added
6410568	Rehabilitation Hospital of Northwest Ohio	Toledo	OH	Newly added
6410571	Sequel Pomegranate Health Systems	Columbus	OH	Newly added
6410576	Cambridge Behavioral Hospital	Cambridge	OH	Newly added
6410577	ClearVista Health and Wellness	Lorain	OH	Newly added
6420478	Four County Counseling Center	Logansport	IN	Newly added
6420479	Meridian Health Services	Muncie	IN	Newly added
6420514	NeuroPsychiatric Hospital of Indianapolis	Indianapolis	IN	Newly added
6429157	Doctors NeuroPsychiatric Hospital and Research Institute	Bremen	IN	Newly added
6440517	Pioneer Specialty Hospital	Pontiac	MI	Newly added
6520447	Unity Psychiatric Care-Clarksville	Clarksville	TN	Newly added
6520481	Crestwyn Behavioral Health	Memphis	TN	Newly added
6529209	Big South Fork Medical Center	Oneida	TN	Newly added
6530431	St. Vincent's Chilton Hospital	Clanton	AL	Newly added
6540439	HealthSouth Rehabilitation of Gulfport	Gulfport	MS	Newly added
6610236	Community Behavioral Health Hospital - Bemidji	Bemidji	MN	Newly added
6610443	PrairieCare - Brooklyn Park	Maple Grove	MN	Newly added
6660450	Nebraska Penal and Correctional Hospital	Lincoln	NE	Newly added
6670472	Rehabilitation Hospital of Overland Park	Overland Park	KS	Newly added
6720184	Baton Rouge Behavioral Hospital	Baton Rouge	LA	Newly added

2016 vs 2017 ADDITIONS   v 1.1
The following hospitals have been added to the FY 2017 AHA Annual Survey Database

6720501	Cypress Pointe Surgical Hospital	Hammond	LA	Newly added
6720683	Pathway Rehabilitation Hospital	Bossier City	LA	Newly added
6720717	Beacon Behavioral Hospital	Bunkie	LA	Newly added
6720719	AMG Specialty Hospital-Zachary	Zachary	LA	Newly added
6720722	Compass Behavioral Center of Lafayette	Lafayette	LA	Newly added
6729126	Seaside Behavioral Center	New Orleans	LA	Newly added
6729129	Beacon Behavioral Hospital	Lutcher	LA	Newly added
6729130	AMG Physical Rehabilitation Hospital	Covington	LA	Newly added
6729131	Apollo Behavioral Health Hospital	Baton Rouge	LA	Newly added
6729132	Allegiance Behavioral Health Centers of Monroe	West Monroe	LA	Newly added
6730493	St. John Rehabilitation Hospital	Broken Arrow	OK	Newly added
6730496	Sayre Memorial Hospital	Sayre	OK	Newly added
6739137	Oakwood Springs	Oklahoma City	OK	Newly added
6739138	Muscogee Creek Nation Physical Rehabilitation Center	Okmulgee	OK	Newly added
6740653	Nexus Specialty Hospital The Woodlands	The Woodlands	TX	Newly added
6740912	Texas Star Recovery	Austin	TX	Newly added
6741044	William P. Clements, Jr. University Hospital	Dallas	TX	Newly added
6741046	The Hospitals of Providence Transmountain Campus	El Paso	TX	Newly added
6741049	Wellbridge Healthcare Greater Dallas	Plano	TX	Newly added
6741063	AD Hospital East	Houston	TX	Newly added
6741066	Westpark Springs	Richmond	TX	Newly added
6741079	Accel Rehabilitation Hospital of Plano	Plano	TX	Newly added
6741088	First Texas Hospital	Lewisville	TX	Newly added
6741089	Cleveland Emergency Hospital	Cleveland	TX	Newly added
6741091	Houston Methodist The Woodlands Hospital	The Woodlands	TX	Newly added
6741096	PAM Rehabilitation Hospital of Victoria	Victoria	TX	Newly added
6741099	Eminent Medical Center	Richardson	TX	Newly added
6741108	Houston Behavioral Healthcare Hospital	Houston	TX	Newly added
6741111	Sacred Oak Medical Center	Houston	TX	Newly added
6810398	Bozeman Health Big Sky Medical Center	Big Sky	MT	Newly added
6820410	Rehabilitation Hospital of the Northwest	Post Falls	ID	Newly added
6820411	St. Luke's Nampa	Nampa	ID	Newly added
6830384	Summit Medical Center	Casper	WY	Newly added
6830389	Aspen Mountain Medical Center	Rock Springs	WY	Newly added
6849221	OrthoColorado Hospital	Lakewood	CO	Newly added
6849225	UCHealth Broomfield Hospital	Broomfield	CO	Newly added
6849226	UCHealth Grandview Hospital	Colorado Springs	CO	Newly added
6849231	Denver Springs	Englewood	CO	Newly added
6850397	Haven Behavioral Senior Care of Albuquerque	Albuquerque	NM	Newly added
6860264	Valley Hospital Phoenix	Phoenix	AZ	Newly added
6860445	Palo Verde Behavioral Health	Tucson	AZ	Newly added
6860479	Santa Cruz Valley Regional Hospital	Green Valley	AZ	Newly added
6860483	Hacienda Children's Hospital	Mesa	AZ	Newly added
6860486	Quail Run Behavioral Health	Phoenix	AZ	Newly added
6869152	Guidance Center	Flagstaff	AZ	Newly added
6869154	CCC at PineView Hospital	Lakeside	AZ	Newly added
6869155	Aurora Behavioral Health System East	Tempe	AZ	Newly added
6870325	Highland Ridge Hospital	Midvale	UT	Newly added
6870373	Provo Canyon Behavioral Hospital	Orem	UT	Newly added
6880435	Henderson Hospital	Henderson	NV	Newly added
6880440	Mountain's Edge Hospital	Las Vegas	NV	Newly added
6920226	Cedar Hills Hospital	Portland	OR	Newly added
6930503	Fairview Developmental Center	Costa Mesa	CA	Newly added
6930724	HealthSouth Rehabilitation Hospital of Modesto	Modesto	CA	Newly added
6930741	Aurora Santa Rosa Hospital	Santa Rosa	CA	Newly added
6932275	Ojai Valley Community Hospital	Ojai	CA	Newly added
6930123	Arroyo Grande Community Hospital	Arroyo Grande	CA	Newly added

ID	NAME	CITY	STATE	MERGER RESULT	PARENT ID	PARENT ORGANIZATION
6210400	New York-Presbyterian/Lawrence Hospital	Bronxville	NY	Merged into another hospital	6210024	New York-Presbyterian Hospital - New York, NY
6214612	TLC Health Network - Lake Shore Hospital	Irving	NY	Merged into another hospital	6211470	Brooks Memorial Hospital - Dunkirk, NY
6214950	Moses Ludington Hospital	Ticonderoga	NY	Merged into another hospital	6211490	The University of Vermont Health Network Elizabethtown Community Hospital - Elizabethtown, NY
6430435	RML Specialty Hospital	Chicago	IL	Merged into another hospital	6431925	RML Specialty Hospital - Hinsdale, IL
6520033	Select Specialty Hospital-Knoxville	Knoxville	TN	Merged into another hospital	6520034	Select Specialty Hospital-North Knoxville - Powell, TN
6520410	Tennova Healthcare Regional Hospital of Jackson	Jackson	TN	Merged into another hospital	6524010	West Tennessee Healthcare North Hospital - Jackson, TN
6520655	Peninsula Hospital	Louisville	TN	Merged into another hospital	6520530	Parkwest Medical Center - Knoxville, TN
6720094	WK Bossier Health Center	Bossier City	LA	Merged into another hospital	6720877	Willis-Knighton Medical Center - Shreveport, LA
6720134	Promise Hospital of Baton Rouge - Mid-City Campus	Baton Rouge	LA	Merged into another hospital	6720135	Promise Hospital of Baton Rouge - Ochsner Campus - Baton Rouge, LA
6720207	Calcasieu Oaks Geriatric Psychiatric Hospital	Lake Charles	LA	Merged into another hospital	6720147	South Cameron Memorial Hospital - Cameron, LA
6720379	Acadia Optima Hospital	Lafayette	LA	Merged into another hospital	6720390	Vermilion Behavioral Health Systems - Lafayette, LA
6740920	Lakeway Regional Medical Center	Lakeway	TX	Merged into another hospital	6740381	Baylor Scott & White Medical Center - Round Rock - Round Rock, TX
6742327	CHRISTUS Good Shepherd Medical Center	Longview	TX	Merged into another hospital	6742430	CHRISTUS Good Shepherd Medical Center-Marshall - Longview, TX
6860056	Yavapai Regional Medical Center - East	Prescott Valley	AZ	Merged into another hospital	6860320	Yavapai Regional Medical Center - Prescott, AZ

2017 AHA Annual Survey
American Hospital Association

> **Please return to:**
> **AHA Annual Survey**
> **155 N Wacker Drive**
> **Suite 400**
> **Chicago IL 60606**

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

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

1. Reporting Period used (beginning and ending date) …… __ __ / __ __ / __ __ __ __   to __ __ / __ __ / __ __ __ __
<div align="center">Month   Day   Year   Month   Day   Year</div>

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 ……… __ __ / __ __ / __ __ __ __
<div align="center">Month   Day   Year</div>

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 E(1b), beds set up and staffed on page 11.*

	(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-chemical 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-chemical dependency care services				
a. Alcoholism-chemical dependency pediatric services .. (#Beds_____)	☐	☐	☐	☐
b. Alcoholism-chemical dependency outpatient services.....................	☐	☐	☐	☐
c. Alcoholism-chemical dependency partial hospitalization 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. 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	☐	☐	☐	☐
54. Community health education	☐	☐	☐	☐

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
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 consultation-liaison services	☐	☐	☐	☐
b. Psychiatric pediatric care (#Beds_____)	☐	☐	☐	☐
c. Psychiatric geriatric care (#Beds_____)	☐	☐	☐	☐
d. Psychiatric education services	☐	☐	☐	☐
e. Psychiatric emergency services	☐	☐	☐	☐
f. Psychiatric outpatient services	☐	☐	☐	☐
g. Psychiatric intensive outpatient services	☐	☐	☐	☐
h. Psychiatric partial hospitalization services – adult	☐	☐	☐	☐
i. Psychiatric partial hospitalization services – pediatric	☐	☐	☐	☐
j. Psychiatric residential treatment – adult	☐	☐	☐	☐
k. Psychiatric residential treatment – pediatric	☐	☐	☐	☐

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. Telehealth				
a. Consultation and office visits	☐	☐	☐	☐
b. eICU	☐	☐	☐	☐
c. Stroke care	☐	☐	☐	☐
d. Psychiatric and addiction treatment	☐	☐	☐	☐
e. Remote patient monitoring				
1. Post-discharge	☐	☐	☐	☐
2. Ongoing chronic care management	☐	☐	☐	☐

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. Transplant services				
a. Bone marrow	☐	☐	☐	☐
b. Heart	☐	☐	☐	☐
c. Kidney	☐	☐	☐	☐
d. Liver	☐	☐	☐	☐
e. Lung	☐	☐	☐	☐
f. Tissue	☐	☐	☐	☐
g. Other	☐	☐	☐	☐
97. Transportation to health services	☐	☐	☐	☐
98. Urgent care center	☐	☐	☐	☐
99. Violence prevention programs				
a. For the workplace	☐	☐	☐	☐
b. For the community	☐	☐	☐	☐
100. Virtual colonoscopy	☐	☐	☐	☐
101. Volunteer services department	☐	☐	☐	☐
102. Women's health center/services	☐	☐	☐	☐
103. Wound management services	☐	☐	☐	☐

104. Does your organization routinely integrate behavioral health services in the following care areas?
Integration ranges from co-located physical and behavioral health providers, with some screening and treatment planning, to fully integrated care where behavioral and physical health providers function as a true team in a shared practice.

	Yes	No
a. Emergency services	☐	☐
b. Primary care services	☐	☐
c. Acute inpatient care	☐	☐
d. Extended care	☐	☐

105. 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 _____)	☐	☐	☐	☐

106. Looking across all the relationships identified in question 105, 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)

_____ number of physicians

C. FACILITIES AND SERVICES (continued)

107a. Does your hospital participate in any joint venture arrangements with physicians or physician groups?   YES ☐   NO ☐

107b. 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   _____

107c. 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   _____

107d. Does your hospital participate in joint venture arrangements with organizations other than physician groups?   YES ☐   NO ☐

D. INSURANCE AND ALTERNATIVE PAYMENT MODELS

INSURANCE

1. Does your hospital/system have a health plan license?   Yes ☐   No ☐

    a. If yes, in what states?   States: _____

    b. Does your hospital/system partner with an insurer to offer insurance products?   Yes ☐   No ☐

    c. Does your hospital/system offer insurance products (either via ownership or joint ventures)?   Yes ☐   No ☐

    d. If yes, please indicate the insurance products and the total medical enrollment (check all that apply)

Insurance Products	Hospital	System	JV	Medical Enrollment	No	Do not know
1. Medicare Advantage	☐	☐	☐	_____	☐	☐
2. Medicaid Managed Care	☐	☐	☐	_____	☐	☐
3. Health Insurance Marketplace ("exchange")	☐	☐	☐	_____	☐	☐
4. Other Individual Market	☐	☐	☐	_____	☐	☐
5. Small Group	☐	☐	☐	_____	☐	☐
6. Large Group	☐	☐	☐	_____	☐	☐

If you have answered 'no' to all parts of question 1, please skip to question 5.

2. Does your **health plan** make capitated payments to physicians either within or outside of your network for specific groups or enrollees?

    a. Physicians within your network   Yes ☐   No ☐   Do not know ☐

    b. Physicians outside your network   Yes ☐   No ☐   Do not know ☐

3. Does your **health plan** make bundled payments to providers in your network or to outside providers?

    a. Providers within your network   Yes ☐   No ☐   Do not know ☐

    b. Providers outside your network   Yes ☐   No ☐   Do not know ☐

4. Does your **health plan** offer shared risk contracts to either providers in your network or to outside providers? (i.e., other than capitation or bundled payment.)

    a. Providers within your network   Yes ☐   No ☐   Do not know ☐

    b. Providers outside your network   Yes ☐   No ☐   Do not know ☐

D. INSURANCE AND ALTERNATIVE PAYMENT MODELS (continued)

ALTERNATIVE PAYMENT MODELS

5. What percentage of your **hospital's** patient revenue is paid on a capitated basis?   _____ %

    a. In total, how many enrollees do you serve under capitated contracts?   Total enrollees: _____

6. Does your **hospital** participate in a bundled payment program involving care settings outside of the hospital (e.g., physician, outpatient, post-acute)?   Yes ☐   No ☐

    a. If yes, does your **hospital** share upside or downside risk for any of those outside providers?   Yes ☐   No ☐

    b. If yes, what percentage of the **hospital's** patient revenue is paid through bundled payment arrangements?   _____ %

7. What percentage of your **hospital's** patient revenue is paid on a shared risk basis (other than capitated or bundled payments)?   _____ %

8. 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 ☐

9. Does your **hospital** have contracts with commercial payors where payment is tied to performance on quality/safety metrics?   Yes ☐   No ☐

10. Has your **hospital** or **health care system** established an accountable care organization (ACO)?   Yes ☐   No ☐

    a. If yes, please indicate the patient populations that are served in the ACO. (check all that apply)

      1. ☐ Medicaid

      2. ☐ Medicare

      3. ☐ Privately insured

      4. ☐ Direct-to-Employer

      5. ☐ Other, please specify: _____

11. Do any hospitals and/or physician groups with your system, or the system itself, plan to participate in any of the following risk arrangements in the next three years? (check all that apply)

    a. ☐ Shared savings/losses

    b. ☐ Bundled payment

    c. ☐ Capitation

    d. ☐ ACO (ownership)

    e. ☐ ACO (joint venture)

    f. ☐ Health plan (ownership)

    g. ☐ Health plan (joint venture)

    h. ☐ Other, please specify: _____

    i. ☐ None

12. Does your hospital/system have an established medical home program?

    a. Hospital   Yes ☐   No ☐

    b. System   Yes ☐   No ☐

13. Has your hospital/system established a clinically integrated network?

    a. Hospital   Yes ☐   No ☐

    b. System   Yes ☐   No ☐

E. 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 E3f. (Please refer to specific definitions on pages 25-27.)

> **Fill out column (2) if hospital owns and operates a nursing home type unit/facility.**
> **Column (1) should be the combined total of hospital plus nursing home unit/facility.**

1. BEDS AND UTILIZATION

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

2. MEDICARE/MEDICAID UTILIZATION

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

3. FINANCIAL

	(1) Total Facility	(2) Nursing Home Unit/Facility
*a. Net patient revenue **(treat bad debt as a deduction from gross revenue)**	_____.00	_____.00
*b. Tax appropriations	_____.00	
*c. Other operating revenue	_____.00	
*d. Nonoperating revenue	_____.00	
*e. TOTAL REVENUE (add 3a thru 3d)	_____.00	_____.00
f. Payroll expense (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

.

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

4. REVENUE BY TYPE

*a. Total gross inpatient revenue.. _____.00

*b. Total gross outpatient revenue.. _____.00

*c. Total gross patient revenue .... _____.00

5. UNCOMPENSATED CARE & 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 & 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 Graduate Medical Education (GME) payments.......		_____.00
d) Medicaid Disproportionate Share Hospital Payments (DSH) .		_____.00
e) Medicaid Supplemental Payments (not including Medicaid Disproportionate Share Hospital (DSH) Payments		_____.00
f) Other Medicaid..		_____.00
g) Total (a thru f)...	_____.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 12. Total net should equal 3a on page 11.)

	(1) Inpatient	(2) Outpatient
*d. If you report Medicaid Supplemental Payments on line 6.a(2)e, please break the payment total into inpatient and outpatient care.	_____.00	_____.00

*e. If you are a government owned facility (control codes 12-16), does your facility participate in the Medicaid intergovernmental transfer or certified public expenditures program?   Yes ☐   No ☐

	(1) Gross	(2) Net
*f. If yes, please report gross and net revenue.	_____.00	_____.00

Are the financial data on pages 11-13 from your audited financial statement?	Yes ☐	No ☐

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

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

9. INFORMATION TECHNOLOGY AND CYBERSECURITY

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. What percentage of your IT budget is spent on security?.. _____%

*f. Which of the following cybersecurity measures does your hospital or health system currently deploy?
(check all that apply)

1. Annual risk assessment... ☐

2. Incident response plan .... ☐

3. Intrusion detection systems .... ☐

4. Mobile device encryption .... ☐

5. Mobile device data wiping... ☐

6. Penetration testing to identify security vulnerabilities .... ☐

7. Strong password requirements .... ☐

8. Two-factor authentication .... ☐

*g. Does your hospital or health system board oversight of risk management and reduction specifically include consideration of cybersecurity risk? Yes ☐ No ☐ Unsure ☐

*h. Does your hospital or health system have cybersecurity insurance? Yes ☐ No ☐ Unsure ☐

*i. Is your hospital or health system participating in cybersecurity information-sharing activities with an outside information sharing and analysis organization to identify threats and vulnerabilities? Yes ☐ No ☐ Unsure ☐

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

For members of the Catholic Health Association of the United States (CHA), AHA will also share these data with CHA unless there are objections expressed by checking this box ☐

The state/metropolitan/regional associations and CHA may not release these data without written permission from the hospital.

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

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 and nursing home type unit/facility, if applicable.

Nursing home type unit/facility personnel should also be 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 (E.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

E. 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. <u>The sum of the physicians reported in 11a-11f should equal the total number of privileged physicians (11g) in the hospital.</u>

	(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 E.11.c)

b. If yes, please report the total number of full-time equivalent (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 E.11.d)

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? (if no, please skip to 15) YES ☐   NO ☐

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 2017 vs. 2016?

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 ☐

F. SUPPLEMENTAL INFORMATION

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

1a. If yes, please indicate the type of service offered along with the number of satellite facilities providing that service.

                                                                Number of facilities
   a. Primary care clinic   ☐   _____
   b. Specialty clinic   ☐   _____
   c. Urgent care   ☐   _____
   d. Ambulatory surgery   ☐   _____
   e. Rehabilitation   ☐   _____
   f. Psychiatric care   ☐   _____
   g. Substance abuse/chemical dependency   ☐   _____
   h. Skilled nursing   ☐   _____
   i. Residential care   ☐   _____
   j. Other extended care   ☐   _____
   k. Laboratory   ☐   _____
   l. Diagnostic imaging center   ☐   _____
   m. Other, please specify:_____ ☐   _____

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)_____	☐	☐	☐

6. Does your hospital have an established patient and family advisory council that meets regularly to actively engage the perspectives of patients and families?   YES ☐   NO ☐

F. SUPPLEMENTAL INFORMATION (continued)

7. Does your hospital have a policy or guidelines that facilitate unrestricted access, 24 hours a day, to hospitalized patients by family and other partners in care according to patient preference?

    a. ☐ Exists across all units

    b. ☐ Exists across some units

    c. ☐ Does not exist in any hospital unit

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.

_____

_____

_____

_____

_____

_____

_____

_____

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.

<div align="center">

THANK YOU

</div>

SECTION A
REPORTING PERIOD
Instructions

INSTRUCTIONS AND DEFINITIONS FOR THE 2017 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, 2017 should be shown as 01/01/2017. Number of days should equal the time span between the two dates that the hospital was open. If you are reporting for less than 365 days, utilization and finances should be presented for days reported only.
2. **Were you in operation 12 full months at the end of your reporting period?** If you are reporting for less than 365 days, utilization and finances should be presented for days reported only.
3. **Number of days open during reporting period**: Number of days should equal the time span between the two dates that the hospital was open.

SECTION B
ORGANIZATIONAL STRUCTURE
Instructions and Definitions

1. **CONTROL**
   Check the box to the left of the type of organization that is responsible for establishing policy for overall operation of the hospital.
   Government, nonfederal.
   State. Controlled by an agency of state government.
   County. Controlled by an agency of county government.
   City. Controlled by an agency of municipal government.
   City-County. Controlled jointly by agencies of municipal and county governments.
   Hospital district or authority. Controlled by a political subdivision of a state, county, or city created solely for the purpose of establishing and maintaining medical care or health-related care institutions.
   Nongovernment, not for profit. Controlled by not-for-profit organizations, including religious organizations (Catholic hospitals, for example), community hospitals, cooperative hospitals, hospitals operated by fraternal societies, and so forth.
   Investor owned, for profit. Controlled on a for profit basis by an individual, partnership, or a profit making corporation.
   Government, federal. Controlled by an agency or department of the federal government.
2. **SERVICE**
   Indicate the ONE category that best describes the type of service that your hospital provides to the majority of patients.
   General medical and surgical. Provides diagnostic and therapeutic services to patients for a variety of medical conditions, both surgical and nonsurgical.
   Hospital unit of an institution. Provides diagnostic and therapeutic services to patients in an institution.
   Hospital unit within a facility for persons with intellectual disabilities. Provides diagnostic and therapeutic services to persons with intellectual disabilities.
   Surgical. An acute care specialty hospital where 2/3 or more of its inpatient claims are for surgical/diagnosis related groups.
   Psychiatric. Provides diagnostic and therapeutic services to patients with mental or emotional disorders.
   Tuberculosis and other respiratory diseases. Provides medical care and rehabilitative services to patients for whom the primary diagnosis is tuberculosis or other respiratory diseases.
   Cancer. Provides medical care to patients for whom the primary diagnosis is cancer.
   Heart. Provides diagnosis and treatment of heart disease.
   Obstetrics and gynecology. Provides medical and surgical treatment to pregnant women and to mothers following delivery. Also provides diagnostic and therapeutic services to women with diseases or disorders of the reproductive organs.
   Eye, ear, nose, and throat. Provides diagnosis and treatment of diseases and injuries of the eyes, ears, nose, and throat.
   Rehabilitation. Provides a comprehensive array of restoration services for people with disabilities and all support services necessary to help them attain their maximum functional capacity.
   Orthopedic. Provides corrective treatment of deformities, diseases, and ailments of the locomotive apparatus, especially affecting the limbs, bones, muscles, and joints.
   Chronic disease. Provides medical and skilled nursing services to patients with long-term illnesses who are not in an acute phase, but who require an intensity of services not available in nursing homes.
   Intellectual disabilities. Provides health-related care on a regular basis to patients with developmental or intellectual disabilities who cannot be treated in a skilled nursing unit.
   Acute long-term care hospital. Provides high acuity interdisciplinary services to medically complex patients that require more intensive recuperation and care than can be provided in a typical nursing facility.
   Alcoholism and other chemical dependency. Provides diagnostic and therapeutic services to patients with alcoholism or other drug dependencies.
3. **OTHER**
   a. **Children admissions.** A hospital whose primary focus is the health and treatment of children and adolescents.
   b. **Subsidiary.** A company that is wholly controlled by another or one that is more than 50% owned by another organization.
   c. **Contract managed.** General day-to-day management of an entire organization by another organization under a formal contract. Managing organization reports directly to the board of trustees or owners of the managed organization; managed organization retains total legal responsibility and ownership of the facility's assets and liabilities.
   d. **Network.** A group of hospitals, physicians, other providers, insurers and/or community agencies that voluntarily work together to coordinate and deliver health services.

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 partnership 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-chemical 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 E(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-chemical dependency care services.**
    a. **Alcoholism-chemical dependency pediatric care services.** Provides diagnosis and therapeutic services to pediatric 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. Please report staffed beds. The beds reported here should also be reported under 13, alcoholism-chemical dependency care. This line item should be a breakout of the pediatric beds only.
    b. **Alcoholism-chemical 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.
    c. **Alcoholism-chemical dependency partial hospitalization services.** Organized hospital services providing intensive day/evening outpatient services of three hour or more duration, distinguished from other outpatient visits of one hour.
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. **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.

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 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.
    b. **Psychiatric pediatric services.** The branch of medicine focused on the diagnosis, treatment and prevention of mental, emotional and behavioral disorders in pediatric patients. Please report the number of staffed beds. The beds reported here should be included in the staffed bed count for 14 psychiatric care.
    c. **Psychiatric geriatric services.** Provides care to elderly patients with mental or emotional disorders, including those admitted for diagnosis and those admitted for treatment. Please report the number of staffed beds. The beds reported here should be included in the staffed bed count for 14 psychiatric care.
    d. **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.
    e. **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.
    f. **Psychiatric outpatient services.** Provides medical care, including diagnosis and treatment, of psychiatric outpatients.
    g. **Psychiatric intensive outpatient services.** A prescribed course of treatment in which the patient receives outpatient care no less than three times a week (which might include more than one service/day)
    h-i. **Psychiatric partial hospitalization program – adult/pediatric.** Organized hospital services providing intensive day/evening outpatient services of three hours or more duration, distinguished from other outpatient visits of one hour.
    j-k. **Psychiatric residential treatment – adult/pediatric.** 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. **Telehealth.** A broad variety of technologies and tactics to deliver virtual medical, public health, health education delivery and support services using telecommunications technologies. Telehealth is used more commonly as it describes the wide range of diagnosis and management, education, and other related fields of health care. This includes, but are not limited to: dentistry, counseling, physical and occupational therapy, home health, chronic disease monitoring and management, disaster management and consumer and professional education.

b. **eICU.** An electronic intensive care unit (eICU), also referred to as a tele-ICU, is a form of telemedicine that uses state of the art technology to provide an additional layer of critical care service. The goal of an eICU is to optimize clinical experience and facilitate 24-hour a day care by ICU caregivers.

c. **Stroke care.** Stroke telemedicine is a consultative modality that facilitates the care of patients with acute stroke by specialists at stroke centers.

d. **Psychiatric and addiction treatment.** Telepsychiatry can involve a range of services including psychiatric evaluations, therapy, patient education, and medication management.

e. **Remote patient monitoring.** The use of digital technologies to collect medical and other forms of health data from individuals in one location and electronically transmit the information securely to health care providers in a different location for assessment and recommendation.

96. **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'.

97. **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.

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

99. **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.

100. **Virtual colonoscopy.** Noninvasive screening procedure used to visualize, analyze and detect cancerous or potentially cancerous polyps in the colon.
101. **Volunteer services department.** An organized hospital department responsible for coordinating the services of volunteers working within the institution.
102. **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.
103. **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.
104. Integration ranges from co-located physical and behavioral health providers, with some screening and treatment planning, to fully integrated care where behavioral and physical health providers function as a true team in a shared practice.
105. **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.
106. Of all physician arrangements listed in question 105 (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 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). *Joint contracting* does not include contracting between physicians participating in an independent practice.
107. **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.

SECTION D
INSURANCE AND ALTERNATIVE PAYMENT MODELS
Definitions

5. **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 payer 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.
6. **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.
7. **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
10. **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 payer establishes a target budget for one or more years for the total costs of care for the agreed-upon patient population, the payer 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.
12. **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.
13. **Clinically integrated network.** A clinically integrated network is a collection of healthcare providers, such as physicians, hospitals, and post-acute care treatment providers, that come together to improve patient care and reduce overall healthcare costs. Clinically integrated networks rely on evidence-based care guidelines to provide high-quality care across participating providers.

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

For the purposes of this survey, a nursing home type unit/facility provides **long-term care for the elderly or other patients requiring chronic care** in a non-acute setting in any of the following categories: *Skilled nursing care *Intermediate care *Other long-term care (see page 19) The nursing home type unit/facility is to be owned and operated by the hospital. Only one legal entity may be vested with title to the physical property or operate under the authority of a duly executed lease of the physical property.

1.   **a.** **Total licensed beds.** Report the total number of beds authorized by the state licensing (certifying) agency.
    b. **Beds set up and staffed.** Report the number of beds regularly available (those set up and staffed for use) at the end of the reporting period. Report only operating beds, not constructed bed capacity. Include all bed facilities that are set up and staffed for use by inpatients that have no other bed facilities, such as pediatric bassinets, isolation units and quiet rooms. Exclude newborn bassinets and bed facilities for patients receiving special procedures for a portion of their stay and who have other bed facilities assigned to or reserved for them. Exclude, for example, labor room, post anesthesia, or postoperative recovery room beds, psychiatric holding beds, observation beds, and beds that are used only as holding facilities for patients prior to their transfer to another hospital.
    c. **Bassinets set up and staffed.** Report the number of normal newborn bassinets. Do not include neonatal intensive care or intermediate care bassinets. These should be reported on page 3, C6 and C7.
    d. **Births.** Total births should exclude fetal deaths.
    e. **Admissions.** Include the number of adult and pediatric admissions (exclude births). This figure should include all patients admitted during the reporting period, including neonatal and swing admissions.
    f. **Inpatient days.** Report the number of adult and pediatric days of care rendered during the entire reporting period. Do not include days of care rendered for normal infants born in the hospital, but do include those for their mothers. Include days of care for infants born in the hospital and transferred into a neonatal care unit. Also include swing bed inpatient days. An inpatient day of care (also commonly referred to as a <u>patient day</u> or a <u>census day</u>, or by some federal hospitals as an <u>occupied bed day</u>) is a period of service between the census-taking hours on two successive calendar days, the day of discharge being counted only when the patient was admitted the same day.
    g. **Emergency department visits.** Should reflect the number of visits to the emergency unit. Emergency outpatients can be admitted to the inpatient areas of the hospital, but they are still counted as emergency visits and subsequently as inpatient admissions.
    h. **Total outpatient visits.** A visit by a patient who is not lodged in the hospital while receiving medical, dental, or other services. Each appearance of an outpatient in each unit constitutes one visit regardless of the number of diagnostic and/or therapeutic treatments that the patient receives. Total outpatient visits should include all clinic visits, referred visits, observation services, outpatient surgeries (also reported on line E1k), home health service visits, and emergency department visits (also reported on line E1g).
        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, and pharmacy.
        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 payers, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. 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 (E7b).
    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 payer, 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 PAYER**

    6a1. Medicare. Should agree with the Medicare utilization reported in questions E2a1-E2b2.

    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 E2c1-E2d2.

    6a2a. Fee for service patient revenue. Do not include Medicaid disproportionate share payments (DSH) or other Medicaid supplemental payments. Report in 'net' column only.

    6a2c. Medicaid Graduate Medical Education (GME) payments. Payments for the cost of approved graduate medical education (GME) programs. Report in 'net' column only.

    6a2d. Medicaid disproportionate share payment (DSH). DSH minus associated provider taxes or assessments. Report in 'Net' column only.

    6a2e. 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.

    6a2f. Other Medicaid. Any Medicaid payments such as delivery system reform incentive program (DSRIP) payments that are not included in lines 6a2a-e. Report in 'net' column only.

    6e. Medicaid Intergovernmental Transfers (IGT) or certified public expenditure program. Exchange of public funds between different levels of government (e.g., county, city, or another state agency) to the state Medicaid agency.

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 and Cybersecurity.**

    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. **Cybersecurity.** Measures taken to protect against the criminal or unauthorized use of electronic data.

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 leave blank.

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 equithom.

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 F. 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
6. **Patient and family advisory council.** Advisory council dedicated to the improvement of quality in patient and family care. The advisory council is comprised of past/present patients, family members, and hospital staff.

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 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:

See Cardiac electrophysiology. [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-chemical 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].

Alcohol-chemical dependency partial hospitalization services: Organized hospital services providing intensive day/evening outpatient services of three hour or more duration, distinguisehd from other outpatient visits of one hour. [ACLPRHOS].

Alcohol-chemical dependency pediatric hospitalization services: Provides diagnosis and therapeutic services to pediatric 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. [ALCPDHOS].

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: 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 category: Hospitals are categorized by the number of beds set-up and staffed for use at the end of the reporting period. The eight categories are: 6-24 beds, 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: A facility that performs, or is responsible for the collection, processing, testing or distribution of blood and components. [BLDOHOS].

Bone Marrow transplant: 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. The three major categories are government (including federal, state, and local); nongovernment (nonprofit); and investor-owned (for-profit). [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].

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].

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.

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. 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. [ENRHOS].

Equity model: An arrangement that 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].

Expenses: *See Total facility expenses.*

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: A corporation, organized as a hospital affiliate or subsidiary, that purchases both 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. 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. [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].

Group practice without walls:
In this organization, the hospital sponsors the formation of a physician group or provides capital to physicians to establish one. The group shares administrative expenses, although the physicians remain independent practitioners. [GPWWHOS].

Group Purchasing Organization (GPO):
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. [GROUP].

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].

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

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. [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].

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: In this arrangement, physicians are salaried by the hospital or other 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. The figure is derived by dividing the number of inpatient days by the number of admissions. [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:
Hospitals participating in a group that may include other hospitals, physicians, other providers, insurers, and/or community agencies that work together to coordinate and deliver a broad spectrum of services to the community. [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].

Nursing-home-type unit/facility: A unit/ facility that primarily offers the following type of services to a majority of all admissions:

• *Skilled nursing:* The provision of medical and nursing care services, health-related services, and social services under the supervision of a registered nurse on a 24-hour basis.

• *Intermediate care:* The provision, on a regular basis, of health-related care and services to individuals who do not require the degree of care or treatment that a skilled nursing unit is designed to provide.

• *Personal care:* The provision of general supervision and direct personal care services for residents who require assistance in activities of daily living but who do not need nursing services or inpatient care. Medical and nursing services are available as needed.

• Sheltered/residential care: The provision of general supervision and protective services for residents who do not need nursing services or continuous personal care services in the conduct of daily life. Medical and nursing services are available as needed.

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: 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): 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 should include all clinic visits, referred visits, observation services, outpatient surgeries, and emergency room visits. [VOTH]. *Also see Total outpatient visits.*

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: *See Cardiac electrophysiology.* [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):

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].

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 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 intensive outpatient

services: A prescribed course of treatment in which the patient receives outpatient care no less than three times a week (which might include more than one service/day). [PSYOIHOS].

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 pediatric care: Provides care

to emotionally disturbed children and adolescents, including those admitted for diagnosis and those admitted for treatment. [PSYCAHOS].

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 nurses: Number that represents

the registered nurses working for the hospital. A nurse who has graduated from an approved school of nursing and who is currently registered by the state. RNs 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

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): 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): Surgical services provided to patients who remain in the hospital overnight. 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: Hospitals belonging to a corporate body that owns and/or manages health provider facilities or health-related subsidiaries. The system may also own non-health-related facilities. [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].

Telehealth:

Consultation and office visits - A broad variety of technologies and tactics to deliver virtual medical, public health, health education delivery and support services using telecommunications technologies. Telehealth is used more commonly as it describes the wide range of diagnosis and management, education, and other related fields of health care. This includes, but are not limited to: dentistry, counseling, physical and occupational therapy, home health, chronic disease monitoring and management, disaster management and consumer and professional education. [COFVHOS].

eICU – An electronic intensive care unit also referred to as a tele-ICU is a form of telemedicine that uses state of the art technology to provide an additional layer of critical care service. The goal of an eICU is to optimize clinical experience and facilitate 24-hour a day care by ICU caregivers. [EICUHOS].

Stroke care – Stroke telemedicine is a consultative modality that facilitates the care of patients with acute stroke by specialists at stroke centers. [STRCHOS]

Psychiatric and addiction treatment – Telepsychiatry can involve a range of services including psychiatric evaluations, therapy patient education, and medication management. [ADTRTHOS].

Remote patient monitoring – The use of digital technologies to collect medical and other forms of health data from individuals in one location and electronically transmit the information securely to health care providers in a different location for assessment and recommendation. [PDISHOS].

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/cessation program: 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 expenses for the reporting period including payroll, non-payroll, and all operating expenses. *Payroll expenses* include all salaries and wages. *Non-payroll expenses* are all professional fees and those salary expenditures excluded from payroll. *Labor related expenses* are defined as payroll expenses plus employee benefits. *Non-labor related expenses* are all other non-payroll expenses. Bad debt has been reclassified from an expense to a deduction from revenue in accordance with the revised AICPA Audit Guide. [EXPTOT].

Total facility payroll expenses: Includes all salaries and wages. 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. All professional fees and salary expenditures excluded from payroll, such as employee benefits, are defined as non-payroll expenses and are included in *total expenses*. [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].