SERVICE ANNUAL SURVEY
U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

SA-62000A

(09-11-2013)

2013 ANNUAL SERVICES REPORT

General Medical and Surgical Hospitals, Private

~~~	221 0=00021					
Due	Date					
Need help or l	have questions?					
	77-787-9860					
(8:30 a.m 5:	:00 p.m. ET, M-F)		136		SAS_H	
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Visit econhelp.	Ü		0221	19		
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this questionna	ire to answer					
the questions a report to the U.						
Bureau. By the	same law,					
YOUR CENSU CONFIDENTIA						
seen only by pe	ersons sworn					
	onfidentiality of information and					
may be used or	nly for statistical					
purposes. Unde information tha	er the same law,					
cannot be used	for taxation,					
	nvestigation and m release under					
the Freedom of	Information Act.					
Further, copies retained in you	of your response r files are immune					
from legal proc	ess.					
Return via Ir	nternet:		Return vi			To view Survey Results:
econhelp.cens	sus.gov/sas		U.S. Census			<u>census.gov/services</u>
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			GENERAL INS	TRUCTION	ONS	
	gnificant change i	•				
		or acquired in 20	)13, report data o	only for t	he period the establish	ments were operated by
this fir		if book figures a	na mat available			
	tes are acceptable		are not available.			
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	data on an accru			В	il. Mil. Thou.	Dol.
	s should be round	•		В		
• If a fig	ure is \$1,030,280,	156 it should be r	eported as ——	<b></b> ▶	1030280	456
Include						
	or all Services esta uction operations				olesale, Manufacturing 3.	, Mining, and
	•	•	•	-		nt(s) such as warehouses,
garage	es, central adminis	trative offices, ar	nd repair services	S.		
1 A. MAII	LING ADDRESS					
ls thi	s firm's name and	I mailing address	the same as sho	own in th	ne mailing address abo	ve?
0035	Yes					
0033	No - Enter co	rrections in the r	nailing address a	above		

B. SURVEY COVERAGE Did this firm provide the business activities described below?  This report covers all domestic locations operated by your company and its subsidiaries primarily engaged in providing diagnostic and medical treatment (both surgical and nonsurgical) to inpatients with any of a wide variety of medical conditions. These locations, known and licensed as general medical and surgical hospitals, maintain inpatient beds and provide patients with food services that meet nutritional requirements.  No - Specify this firm's business activity 7    No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's business activity 7   No - Specify this firm's busin	This report covers all domestic locations operated by your company and its subsidiaries primarily engaged in providing diagnostic and medical treatment (both surgical and nonsurgical) to inpatients with any of a wide variety of medical conditions. These locations, known and licensed as general medical and surgical hospitals, maintain inpatient beds and provide patients with food services that meet nutritional requirements.    Yes	Did th										
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providing diagnostic and medical treatment (both surgical and nonsurgical) to inpatients with any of a wide variety of medical conditions. These locations, known and licensed as general medical and surgical hospitals, maintain inpatient beds and provide patients with food services that meet nutritional requirements.    Yes	providing diagnostic and medical treatment (both surgical and nonsurgical) to inpatients with any of a wide variety of medical conditions. These locations, known and licensed as general medical and surgical hospitals, maintain inpatient beds and provide patients with food services that meet nutritional requirements.    Yes	This repor	is firm provide	the busines	ss activities	described	below?					
No - Specify this firm's business activity 7    Not Applicable.  ORGANIZATIONAL CHANGE   A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2013?    Yes	No - Specify this firm's business activity 7    Not Applicable.  ORGANIZATIONAL CHANGE   A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2013?    Yes	providing of medical	diagnostic and m conditions. Thes	nedical treatm se locations,	nent (both su known and l	irgical and no licensed as ge	nsurgical) to inpeneral medical a	oatients nd surg	with ar	ny of a	wide va	
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ORGANIZATIONAL CHANGE  A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2013?  Yes  OND - Go to   B. Which of the following organizational changes occurred in 2013?  Check all that apply. If more than one organizational change occurred during the reporting period, explain in  Acquisition  Date of organizational change	ORGANIZATIONAL CHANGE  A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2013?  Yes  OND - Go to   B. Which of the following organizational changes occurred in 2013?  Check all that apply. If more than one organizational change occurred during the reporting period, explain in  Acquisition  Date of organizational change		0002									
ORGANIZATIONAL CHANGE  A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2013?  Yes  OND - Go to   B. Which of the following organizational changes occurred in 2013?  Check all that apply. If more than one organizational change occurred during the reporting period, explain in  Acquisition  Date of organizational change	ORGANIZATIONAL CHANGE  A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2013?  Yes  OND - Go to   B. Which of the following organizational changes occurred in 2013?  Check all that apply. If more than one organizational change occurred during the reporting period, explain in  Acquisition  Date of organizational change	Not Applic	able.									
A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2013?  Yes  No - Go to   B. Which of the following organizational changes occurred in 2013?  Check all that apply. If more than one organizational change occurred during the reporting period, explain in   Acquisition  Date of organizational change	A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2013?  Yes  One No - Go to   B. Which of the following organizational changes occurred in 2013?  Check all that apply. If more than one organizational change occurred during the reporting period, explain in   Acquisition  Date of organizational change			NGF								
Yes   No - Go to	Yes					-l		-4 <b>:</b> 4	- : 20	122		
Acquisition Sale AND Interdetailed information below Divestiture  Divestiture  Date of organizational change	Acquisition Sale AND Interdetailed information below Divestiture  Divestiture  Divestiture  Divestiture  Divestiture  Double of organizational change  AND Enter detailed information below  Divestiture  Divestiture  Divestiture  City, town, village, etc.  State ZIP Code		of the followin					the rep	oorting	period,	explai	n in <b>T</b> D.
Date of organizational change	Date of organizational change	_	)		Ū	J	J	·	_		- 1	
Sale  AND  Enter detailed information below  Divestiture  Out Name of company  Out Name of co	Sale  AND  Enter detailed information below  Divestiture  Out Name of company  Out Name of company  Out Name of company  Out Name of company  City, town, village, etc.  State ZIP Code	L	Acquisition	Data of o	raanizationa	d change			0010			
Divestiture    Divestiture   Enter detailed information below 7	Divestiture    Divestiture   Enter detailed information below 7	0004	Sale		ngamzanona	r change			. 0018			
Divestiture  Divestiture  Out Name of company  Address (Number and street, P.O. Box, etc.)  City, town, village, etc.  State ZIP Code	Divestiture  Out Name of company  Out Name of company  Out Name of company  Out Plin (9 digits)  Address (Number and street, P.O. Box, etc.)  City, town, village, etc.	0091	Merger									
Name of company  Oo19 EIN (9 digits)  Address (Number and street, P.O. Box, etc.)  City, town, village, etc.  State ZIP Code	Name of company  Outs   EIN (9 digits)  Address (Number and street, P.O. Box, etc.)  City, town, village, etc.  State   ZIP Code			Enter det	tailed informa	ation below <b>,</b>	•					
Address (Number and street, P.O. Box, etc.)  City, town, village, etc.  State ZIP Code	Address (Number and street, P.O. Box, etc.)  City, town, village, etc.  State ZIP Code		Divestiture									
City, town, village, etc.  State ZIP Code	City, town, village, etc.  State ZIP Code								0019 EI	N (9 dia	its)	
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City, town, village, etc.  State ZIP Code	City, town, village, etc.  State ZIP Code	0017 Na	ame of company							- and		
				eet, P.O. Box,	etc.)							
				eet, P.O. Box, o	etc.)					<b>-</b>		
		Addres	s (Number and stre	eet, P.O. Box, o	etc.)			State		-		
		Addres	s (Number and stre	eet, P.O. Box, o	etc.)			State		-		
		Addres	s (Number and stre	eet, P.O. Box, o	etc.)			State		-		
		Addres	s (Number and stre	eet, P.O. Box, o	etc.)			State		-		
		Addres	s (Number and stre	eet, P.O. Box, o	etc.)			State		-		
		Addres	s (Number and stre	eet, P.O. Box, o	etc.)			State		-		
		Addres	s (Number and stre	eet, P.O. Box, o	etc.)			State		-		

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4	NOT	E: C	rING PERIOD Calendar year data is preferred. If it is not available, please report for the fiscal tincludes at least six months of data for the 2013 calendar year.			
	Wha	at ti	me period is covered by the data provided in this report?		20	13
				В	eginni	ng Date
			Calendar year	Month	Day	Year
	0006					
		Ш	Fiscal or partial year - Report beginning and ending dates			
					Ending	g Date
				Month	Day	<b>y Date</b> Year
				Month		i
			8000	Month		i
5		_	O008  ATUS is establishment operated on a not-for-profit basis?	Month		i

B.	Was all or part of the income of this establishment or organization exempt from Federal income
	taxes under section 501 of the Internal Revenue Code?

	Yes
0030	No

☐ No - *Go to* **6** 

0031



## 6 SALES, RECEIPTS, OR REVENUE

### What were the revenues for this firm in 2013?

#### Include:

- Report gross billings, except where noted elsewhere on the form.
- · Dues and assessments from members and affiliates.
- E-commerce revenue.

#### Exclude:

- Transfers made within the company.
- Taxes collected directly from customers or clients and paid directly to a local, state, or federal tax agency.

#### **INSTRUCTIONS FOR TAXABLE FIRMS**

#### Include:

- Amounts received for work subcontracted to others.
- For locations that were sold or acquired during a year, only report for the periods that this firm operated the locations.
- Revenue from services performed by domestic locations of foreign parent firms, subsidiaries, branches, etc.

- Rents from and revenue of separately operated departments, concessions, etc., which are leased to others.
- · Commissions from vending machine operators.
- Revenue of foreign subsidiaries (those located outside the U.S., i.e., outside the 50 states, District of Columbia, U.S. Commonwealth Territories, or U.S. Possessions).

#### **INSTRUCTIONS FOR TAX-EXEMPT FIRMS**

#### Include:

- Program service revenue for services provided in the applicable period, whether or not payment was received in the applicable period.
- Gross sales of merchandise minus returns and allowances.
- Income from interest, dividends, gross rents (including display space rentals and share of receipts from departments operated by other companies), royalties, and other investments.
- Gross contributions, gifts, and grants (whether or not restricted for use in operations).
- Commissions earned from the sale of merchandise owned by others (including commissions from vending machine operators).
- Gross receipts from fundraising activities.

#### **Exclude:**

- Gross receipts of departments or concessions operated by other companies.
- Amounts transferred to operating funds from capital or reserve funds.

		if None	\$ Bil.	Mil.	Thou.	Dol.
	Care Revenue - Using net patient ees of funding in each of the following					
Government, and Wor from worker's compensa Include fee-for-service r (exclude part C); fee-for- Medicaid managed care Health Insurance Prorgra entities (e.g., state and land Medical Programs o (CHAMPVA), Departmen	Medicare, Medicaid, Other ker's Compensation) - Report revenue ation and all government entities. The evenue from Medicare parts A, B, and D service revenue from Medicaid (exclude plans); funding from the State Children's arm (SCHIP); and all other government ocal medical assistance, Civilian Health of the Department of Veteran's Affairs to f Defense, TRICARE, Substance Abuse ces Administration (SAMHSA), Indian c.)	4100				
Report health benefits pand auto insurance; and individuals and financed or self-insured plans; HN health insurance; Medica	ludes Health, Property, and Auto) - aid for by property/casualty insurance benefits paid for by employers and/or by insurance premiums, such as group MO; Federal, State, and Local government are Part C and Supplemental Insurance; care plans	4101				1 1
	- Payments from patients and their					
		4171				
	- Patients' assigned Social Security	4172				

2013

Mark "X"

_								
6	S	ALES, RECEIPTS, OR REVENUE - Continued						
				Mark "X"		:	2013	
				if None	\$ Bil.	Mil.	Thou.	Dol.
1.	re	ET REVENUE - Patient Care Revenue - Using net patient venues, report your sources of funding in each of the following tegories - Continued						
	e.	Other patient care revenue - Include all other revenue for patient care not included in lines 1a through 1d - Specify						
			4103					
2.	NI	ET REVENUE - Non-Patient Care Revenue						
	а	Contributions, gifts, and grants received	17//1		'		' '	
		Investment and property income - Include interest and	17-71					
		dividends. <b>Exclude</b> gains (losses) from assets sold	1742					
	C.	All other non-patient care revenue - Include other operating and non-operating revenue (e.g., gift shop sales, cafeteria sales, parking lot receipts, florist receipts) - Specify the primary source of revenue below						
			4105					
3.		OTAL NET REVENUE um of lines 1a through 2c	. 1800					
Ø	GI	ROSS PATIENT REVENUE						
						:	2013	
					\$ Bil.	Mil.	Thou.	Dol.
		ross patient revenue - Include the full-established rates (charges) rvices rendered to inpatients and outpatients		4012				1 1
8	E-	COMMERCE						
	ar	commerce is the sale of goods and services where the buyer places e negotiated, over an Internet, mobile device (M-Commerce), extran mparable online system. Payment may or may not be made online.	et, EDI	der, or th network	ne price k, electr	and term onic mail,	s of the sa or other	le
	A.	Did this firm have any e-commerce revenue in 2013?						
		Yes						
		0011 No - <i>Go to</i>						
						:	2013	
					\$ Bil.	Mil.	Thou.	Dol.
	D	What was the total e-commerce revenue in 2013?		000-				
	Ð.	winat was the total e-commerce revenue in 2013?		2000				
9	Œ	Not Applicable.						

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# 12 OPERATING EXPENSES

### What were the operating expenses for this firm in 2013?

#### **Exclude:**

- Transfers made within the company.
- Capitalized expenses.
- Interest.
- · Bad debt.
- Impairment.
- Income tax.

#### **Gross annual payroll**

**Include** salaries and wages, commissions, dismissal pay, bonuses, employee contributions to Social Security, income tax withholding, union dues, group insurance premiums, savings bonds, cash equivalent in-kind, allowances, holiday pay, vacation pay, sick leave, stock purchase plans, and employee contributions to pension plans. **Exclude** the cost of leased employees, employer's cost for fringe benefits, and temporary staff obtained from temporary help services. For unincorporated businesses, **exclude** profit or other compensation of proprietors or partners.

#### All other operating expenses

**Include** travel and entertainment; postage, shipping or delivery services; warehousing and storage services; royalties; security services; janitorial and grounds maintenance services; purchased transportation with operators; and other expenses not reported elsewhere.

		Mark "X" if None	<b>4</b> D'I		2013	
1. I	Personnel Costs	II None	\$ Bil.	Mil.	Thou.	Dol.
•	wages for all employees as reported on this firm's IRS Form 941, Employer's Quarterly Federal Tax Return, line 5(c) for the four quarters that correspond to the survey period or IRS Form 944 Employer's Annual Federal Tax Return, line 4(c). <b>Include</b> the spread on stock options that are taxable to employees as wages . 1821			1 1		
ı	<ul> <li>Employer's cost for fringe benefits - Employer's cost for legally required programs and programs not required by law:</li> </ul>					
	<ol> <li>Health insurance - Insurance premiums for hospital plans, medical plans, and single service plans (e.g., dental, vision, prescription drugs). Include premium equivalents for self- insured plans and fees paid to third-party administrators (TPAs). Exclude employee contributions</li></ol>					
	2. Pension plans:					
	a. Defined benefit pension plans - Costs for both qualified and unqualified defined pension plans. Pension plans that specify the benefit to be paid to employees upon retirement, generally either a specific amount or a percentage of compensation. Employer contributions are based on actuarial computations that include the employee's compensation and years of service and are not allocated to specific accounts maintained for employees 1842					1 1
	b. Defined contribution plans - Costs under defined contribution plans. Pension plans that define the employer contributions to a separate account provided for each employee. The employee "benefit" at retirement depends on the amount contributed and the results of the account's activity. Examples include profit sharing plans, money purchase (e.g., 401k, 403b) and stock bonus plans (e.g., ESOPs)					
	3. Payroll taxes, employer paid insurance premiums (except health), and other employer benefits - Include legally-required fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, Medicare). Include benefits for life insurance, "quality of life" benefits (e.g., childcare assistance, subsidized commuting), employer contributions to pre-tax benefit accounts (e.g., health savings accounts), education assistance, and other benefits not specified above. Exclude disbursements from trusts or funds to satisfy health insurance claims				1 1	

M	OPERATING EXPENSES - Continued					
•		Markety			2013	
		Mark "X" if None	\$ Bil.	Mil.	Thou.	Dol.
1.	Personnel Costs - Continued					
	c. Temporary staff and leased employee expense - Total costs					
	paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel. <b>Include</b> all charges for payroll, benefits,			1 1		
	and services					
2.	Expensed Materials, Parts, and Supplies (not for resale)					
	<ul> <li>a. Medical supplies - Materials and supplies used in providing medical services to others. Report medical equipment in line 2b . 4011</li> </ul>					
	b. Expensed equipment - Expensed computer hardware and other					
	equipment (e.g., copiers, fax machines, telephones, shop and lab equipment, CPUs, monitors). Report packaged software in line <b>3a.</b>					
	Report leased and rented equipment in line 3i					
	<ul> <li>c. Expensed purchases of other materials, parts, and supplies - Materials and supplies used in providing services to</li> </ul>					
	others; materials and parts used in repairs; office and janitorial					
	supplies; small tools; containers and other packaging materials; and motor fuels					
3.	Expensed Purchased Services					
	a. Expensed purchases of software - Purchases of prepackaged,					
	custom coded, or vendor customized software. <b>Include</b> software developed or customized by others, web-design services and					
	purchases, licensing agreements, upgrades of software, and maintenance fees related to software upgrades and alterations		'			' '
	b. Data processing and other purchased computer services -					
	<b>Include</b> web hosting, computer facilities management services,					
	computer input preparation, data storage, computer time rental, optical scanning services, and other computer-related advice					
	and services, including training. <b>Exclude</b> expensed integrated systems, repair and maintenance of computer equipment, payroll					
	processing and credit card transaction fees, and expenses for		'			
	telecommunication services (e.g., Internet, connectivity, telephone) 1845  c. Purchased communication services - Telephone, cellular, and					
	fax services; computer-related communications (e.g., Internet,					
	connectivity, online), and other wired and wireless communication services					
	d. Purchased repairs and maintenance to machinery and					
	equipment - Expensed repair and maintenance services to machinery, vehicles, equipment, and computer hardware.					
	Exclude materials, parts, and supplies used for repairs and			1 1		1 1
	maintenance performed by this firm's employees					
	structures, and offices - Include repair and maintenance to					
	integral parts of buildings (e.g., elevators, heating systems). <b>Exclude</b> materials, parts, and supplies used for repairs and					
	maintenance performed by this firm's employees. Report janitorial and grounds maintenance services in line <b>4c</b>		'			1 1
	f. Purchased electricity - If the cost of electricity is included in					
	lease or rental payments, report in line 3j					
	g. Purchased fuels (except motor fuels) - Fuel for heating, power, or generating electricity (e.g., natural gas, propane, oil,					
	coal). If the costs are included in lease or rental payments, report			1 1		1 1
	in line <b>3j</b>					
	h. Water, sewer, refuse removal, and other utility payments - Include the cost of hazardous waste removal. If the costs of these					1 1
	utilities are included in lease or rental payments, report in line 3j 1852	Ш				
	<ul> <li>Lease and rental payments for machinery, equipment, and other tangible items - Include lease and rental of transportation</li> </ul>					
	equipment without operators and penalties incurred for broken leases. <b>Exclude</b> capital and financing lease agreements and					
	licensing/leasing of software					
	j. Lease and rental payments for land, buildings, structures,					
	store spaces, and offices - Include penalties incurred for broken leases					
	k. Purchased advertising and promotional services - Include					
	marketing and public relations services					
	CONTINUE WITH 🚯 ON PAGE 8					

) OI	PERATING EXPENSES - Continued					
	FERATING EXPENSES - Continued					
		Mark "X"	4 50		2013	
		if None	\$ Bil.	Mil.	Thou.	Dol.
	xpensed Purchased Services - Continued					
I.	Purchased professional and technical services - Include management consulting, accounting, auditing, bookkeeping, legal, actuarial, payroll processing, architectural, engineering, and					
	other professional services. <b>Exclude</b> salaries paid to your own employees for these services	355				
m	I. Professional liability insurance - The cost of professional liability insurance. Include professional liability insurance premiums and amounts set aside for self-insurance	010		1 1		
Of	ther Operating Expenses					
a.	Depreciation and amortization charges - Include depreciation charges taken against tangible assets owned and used by this firm, tangible assets and improvements owned by this firm within leaseholds, tangible assets obtained through capital lease agreements, and amortization charges against intangible assets (e.g., patents, copyrights). <b>Exclude</b> impairment	331			1 1	
b.	Governmental taxes and license fees - Payments to					
	government agencies for taxes and licenses. <b>Include</b> business and property taxes. <b>Exclude</b> income taxes and sales and excise taxes collected from customers	332		1 1		
C.	All other operating expenses - All other operating expenses not reported above, unless specifically excluded in the general instructions. Include office postage paid and package delivery. Exclude purchases of merchandise for resale and non-operating expenses. If this item is greater than 20% of the total	-				
	operating expenses, specify the primary source of the expenses below					
		250	'			
Ŧ	OTAL OPERATING EXPENSES	359				
	um of lines <b>1a through 4c</b>	900				
	ITEREST EXPENSE					
• ( • ( • (	That was the interest expense for this firm's establishments as desis?  **Kclude: Transfers made within the company. Capitalized expenses. Impairment. Bad debt. Income tax.	lefined in <b>(</b>	<b>B</b> and	operate	d on a tax	-exem
• ( • ( • (	That was the interest expense for this firm's establishments as desis?  **Kclude: Transfers made within the company. Capitalized expenses. Impairment. Bad debt.		<b>B</b> and			-exem _l
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**REMARKS** - Please use this space to explain any significant year-to-year changes, to clarify responses, or indicate where data were estimated.

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### **2013 Annual Services Report**

### **Item Specific Instructions**

# 6 NET REVENUE - Patient Care Revenue

# Line 1a - Government (includes Medicare, Medicaid, Other Government, and Worker's Compensation)

There are two types of payments that may be received from Medicare: fee-for-service payments under the traditional Medicare arrangement (Parts A, B, and D payments), and capitated payments (fixed payment per member per month) under Medicare Advantage, or Medicare Managed Care, also sometimes known as Medicare Part C.

Only include fee-for-service payments under traditional Medicare (Parts A, B, and D payments) in the Medicare category. For a current list of intermediaries and carriers that make these payments on behalf of Medicare, please see: <a href="mailto:cms.hhs.gov/ContractingGeneralInformation/">cms.hhs.gov/ContractingGeneralInformation/</a>.

Payments made to Medicare under arrangement with a private health insurance plan (for Medicare beneficiaries in managed care plans, or HMO's) should be included with Line 1b - Private insurance.

For a current list of Medicare managed care plans, please see: cms.hhs.gov/MCRAdvPartDEnroIData/PDMCPDO/list.asp

#### Medicaid

There are two types of payments received from state Medicaid programs: fee-for-service payments and capitated payments (fixed payment per member per month) under various Medicaid Managed Care plans.

Only include fee-for-service payments and the State Children's Health Insurance Program (SCHIP) in the Medicaid category. SCHIP is a joint federal/state program that provides health insurance for children in families that do not have any health insurance coverage that are not eligible for Medicaid. Payments from Medicaid managed care plans should be included with Line 1b - Private insurance.

For a current list of SCHIP programs, please see: aspe.hhs.gov/health/schip2/ReportSTLevel.asp?page=1

For a current list of Medicaid managed care plans, please see: <a href="mailto:cms.hhs.gov/MedicaidDataSourcesGenInfo/06">cms.hhs.gov/MedicaidDataSourcesGenInfo/06</a> DescStateProg.asp

#### Other government

This category includes all health care expenditures that are channeled through any program established by public law other than Medicare and Medicaid. These programs can be financed either by the federal government or state and local governments, or through a combination of both.

Other federal and state programs include, but are not limited to, the Department of Defense's TRICARE program, Maternal and Child Health Programs, The Department of Veterans Affairs (VA) including the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA), Vocational Rehabilitation Programs, the Substance Abuse and Mental Health Services Administration (SAMHSA), Indian Health Service (IHS), and state and local General Medical Assistance programs.

State and local General Medical Assistance programs vary from state to state. These programs provide funding on behalf of needy persons who do not qualify for federally-financed programs. The programs can be administered by a local agency under state supervision or a state Medicaid agency.

### **2013 Annual Services Report**

### **Item Specific Instructions**

# 6 NET REVENUE - Patient Care Revenue - (Continued)

### Worker's compensation

There are two types of Worker's Compensation programs; those for federal employees or their dependents who are injured at work or acquire an occupational illness, and those for all other employees.

For federal employees or their dependents, the Department of Labor's Office of Workers' Compensation Programs (OWCP) administers four major disability compensation programs which provide wage replacement, medical treatment, vocational rehabilitation, and other benefits.

- 1. The Energy Employees Occupational Illness Compensation Program. This program started July 31, 2001.
- 2. Federal Employees' Compensation Program.
- 3. Longshore and Harbor Workers' Compensation Program.
- 4. Black Lung Benefits Program.

For non-federal employees, workers' compensation programs are available in all 50 states and in the District of Columbia. These programs are designed and administered by the state and are financed almost exclusively by employers.

### Line 1b - Private insurance (includes Health, Property, and Auto)

**Private health insurance** - Included in Private Health Insurance are payments for health benefits that are paid for by private companies, whose plans are purchased by employers and/or individuals and financed by premiums. Examples of Private Health Insurance payments include:

- Medical service plans (Blue Cross/Blue Shield, group hospital plans, etc.).
- Third party direct contract insurers.
- Self-insured plans offered by employers and other groups who assume the major cost of health insurance for their employees or members.
- Employee health insurance by Federal (FEHBP), state, and local governments.
- Managed care plans: HMO's, PPO's, and POS's.
- Medicaid and Medicare managed care payments.

For a current list of Medicare managed care plans, please see: <a href="mailto:cms.hhs.gov/MCRAdvPartDEnrolData/PDMCPDO/list.asp/">cms.hhs.gov/MCRAdvPartDEnrolData/PDMCPDO/list.asp/</a>

For a current list of Medicaid managed care plans, please see: cms.hhs.gov/MedicaidDataSourcesGenInfo/06 DescStateProg.asp

 Medigap policies (Medicare Supplement insurance) that are purchased separately as a supplement to Medicare.

**Property/Casualty and auto insurance -** Health portion of property and casualty insurance plans include payments related to health care paid for by non-health insurance plans, such as homeowners insurance or automobile insurance plans.

#### Lines 1c and 1d - Patient out-of-pocket

Patient, self-pay, or out-of-pocket payments consist of direct payments for health care goods and services not covered by insurance, and can be in the form of deductibles and co-insurance. May be transferred from Health Savings Accounts, Medical Savings Accounts, or Flexible Spending Accounts. These payments can be from patients or their families, or they may be designated from the patient's Social Security benefit checks or a patient's annuities.

For Medicare, Medicaid, and other public programs, patients' deductibles and co-insurance should be included in Patient payments, as long as the payment is coming directly from the beneficiary and not from a third-party payer. For example, if Medigap policies, or supplementary insurance policies for Medicare beneficiaries, pay for co-insurance or deductibles on behalf of the beneficiary, these are considered Private Health Insurance payments and not Patient payments.