

Office of Statewide Health Planning and Development
HOSPITAL ANNUAL DISCLOSURE REPORT
SUMMARY OF CHANGES
FOR REPORT PERIODS ENDING ON OR AFTER JUNE 30, 2004

In July 2003, the Office adopted regulations that changed the hospital annual reporting requirements from the previous disclosure cycle. These changes were provided to each hospital in Hospital Transmittal Letter No. 10, issued in August 2003. Below is a summary of the changes to the 30th year (2004-05) Hospital Annual Disclosure Report.

Report Page 0 – General information and Certification

- Added Hospital Web-site Address (line 16), Organization Name of report preparer (line 24), and Business E-mail Address of report preparer (line 27). As a result of these changes, several other items were re-numbered.

Report Page 1 – Hospital Description

- Added indicators (column 1, lines 45, 50, and 55) if the hospital has a Neonatal Intensive Care Unit (NICU) that has been approved as a standard by the California Children’s Services (CCS) Branch of the Department of Health Services. There are three approved standards: Regional, Community, or Intermediate. Standards for NICUs are located in Chapter 3.25 of the CCS Manual of Procedures.

Report Page 2 – Services Inventory

- The number of service codes was reduced from nine (9) to four (4). A cross-reference between the former and current codes follows:

For Report Periods Ended Before June 30, 2004		For Report Periods Ended On or After June 30, 2004	
Service Code	Description	Service Code	Description
1	Separately organized, staffed, and equipped unit of hospital.	1	Service is available at the hospital.
2	Service maintained in hospital.	1	Service is available at the hospital.
3	Service contracted, but hospital based.	1	Service is available at the hospital.
4	Service not maintained in hospital, but available from outside contractor or other hospital.	2	Service is available through arrangement at another health care entity.
5	Service not maintained in hospital, but shared with another hospital under contract.	2	Service is available through arrangement at another health care entity.
6	Service not available.	3	Service is not available.

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Service Code	Description	Service Code	Description
7	Special code for clinical services.	4	Special code for clinical services provided in emergency department.
8	Service available, but not billed by hospital.	1	Service is available at the hospital.
9	Service available, but not used during reporting cycle.	1	Service is available at the hospital.

Report Page 4 - Patient Utilization Statistics

- Added a Live Birth Summary (lines 600 through 625) to report live natural births and Cesarean Section births in various hospital locations. Previously, only deliveries performed in Labor and Delivery were reported. Hospitals are now required to report live Natural Births (column 2) and Cesarean Section births (column 3) that occurred in Labor and Delivery (line 600), Surgery and Recovery (line 605), Alternate Birthing Center (line 610), Obstetrics Acute (line 615), and Emergency Services and other areas within the hospital (line 620).
- The standard unit of measure (SUM) for several revenue/cost centers was changed to simplify data collection and reporting:

Revenue/Cost Center	Line No.	Former SUM	Revised SUM
Cardiology Services	285	RVS units	Procedures
Radiology-Diagnostic	300	RVS units	Procedures
Radiology-Therapeutic	305	RVS units	Procedures
Nuclear Medicine	310	RVS units	Procedures
Magnetic Resonance Imaging	315	MRI Minutes	MRI Procedures
Ultrasonography	320	RVS units	Procedures
Respiratory Therapy	325	RT Treatments	RT Adj. Patient Days
Physical Therapy	360	30 minute Sessions	15 minute Sessions
Occupational Therapy	370	30 minute Sessions	15 minute Sessions

Report Page 18 - Trial balance Worksheet and Supplemental Expense Information – Non-Revenue Producing Centers

- The standard unit of measure (SUM) for three cost centers was changed to simplify data collection and reporting:

Cost Center	Line No.	Former SUM	Revised SUM
Communications	135	Avg. No. Hospital Employees	Paid Hospital FTEs
General Accounting	155	Avg. No. Hospital Employees	Paid Hospital FTEs
Personnel	225	Avg. No. Hospital Employees	Paid Hospital FTEs
Nursing Administration	260	Avg. No. Nursing Personnel	Prod. Nursing FTEs