

CENTER FOR HEALTH INFORMATION AND ANALYSIS

501 BOYLSTON STREET  
BOSTON, MA 02116



## **Instructions for Financial and Bed Utilization Submissions**

### **GENERAL INSTRUCTIONS**

#### **TABLE OF CONTENTS**

<b><u>SECTIONS</u></b>	<b>PAGE</b>
<b>Section I: Quarterly and Annual Financial Submissions</b>	
Standards	1
Submission Requirements	1
Comments	1
Dues Dates- Quarterly Reports	1
Reporting Requirements	1
Due Dates –Annual Financial Statements	2
<b>Section II: Data Explanations/Definitions for Quarterly and Annual Submissions</b>	
Balance Sheet	2
Statement of Operations	7
Statement of Cash Flows	11
<b>Section III: Bed Information: Definitions and Instructions</b>	12
<b>Section IV: Utilization Information: Definitions and Instructions</b>	14

## **Section I: Quarterly and Annual Financial Submissions**

### **Standards**

These are the instructions for the Quarterly and Annual Financial submissions. These filings represent cumulative, year-to-date data from the hospital's Balance Sheet, Statement of Operations and Statement of Cash Flow. These statements must be prepared in accordance with Generally Accepted Accounting Principles (**GAAP**).

### **Submission Requirements**

Each hospital is required to file all data electronically via *CHIA-INET*. To submit data, hospitals should complete a Data Reporting Agreement for their organization, and separate User Agreements for those individuals, either employees or agents/contractors, who will be inputting/sending data via the Web site. Once these forms have been signed and returned to CHIA, each user will be issued a Logon ID and password, with instructions on how to get to appropriate Web site for submission of data. For more information see <http://www.chiamass.gov/information-for-data-submitters-hospital-financial-performance-data/>

### **Comments**

A hospital may wish to disclose information it feels would provide explanation and clarification of data presented and provide CHIA staff and the public with additional useful information that might not be evident from the financial statements alone.

In addition hospitals must provide footnotes and explanations of any non-compliance with GAAP or FASB, which affects the filing's contents. All such disclosures can be entered into a "Comment" box provided on the Web screen at the end of the Quarterly or Annual Financial submissions; below the Statement of Cash Flow (the comment area is limited to 5,000 characters.)

### **Due Dates – Quarterly Report**

Each Acute Hospital shall file its Quarterly Hospital Standardized Financial Filing within 45 days after the end of each quarter.

### **Reporting Requirements**

In addition, each Acute Hospital must submit an Annual Hospital Standardized Financial Filing for its fiscal year, which must reconcile with Audited Hospital Statements or Consolidating Schedules filed pursuant to 957 CMR 9.05 (1). If the data in the annual financial filing differs from the hospital's or parent organization's consolidated Audited

Financial Statements, the hospital must file reconciliations electronically. Hospital must report any subsequent changes to its Audited Financial Statements.

**Due Dates- Annual Report**

Each hospital shall file its Annual Hospital Standardized Financial Filing electronically within 100 days of the end of its fiscal year.

**Audited Financial Statements-Reporting Requirements**

Each Acute shall submit a copy of its Audited Financial Statements if an independent financial statement audit occurs at the hospital-level.

Each parent organization shall submit a copy of the consolidated- level Audited Financial Statements as well as a Consolidating Schedule if an independent financial statement audit occurs at a consolidated level above that of the hospital. Consolidating Schedules must be accompanied by a signed statement by the consolidated entity’s Chief Financial Officer attesting that the information contained in the Consolidating Schedules fairly represents, in all material respects, the financial condition and results of operations of the subsidiary organizations.

**Due Date**

Audited Financial Statements shall be filed electronically within 100 days after the end of the hospital’s fiscal year, or that of the parent organization if 957 CMR 9.05(1) (b) applies

**Section II: Data Explanations/Definitions for Quarterly and Annual Financial Submissions** Explanations and definitions of each data item required for both the Quarterly Financial and the Annual Financial submissions appear below.

*NOTE: For financial items below, unless otherwise indicated, the format should be fixed, with no decimal places and no commas or other non-numeric indicators. Report data in whole dollars.*

**Balance Sheet**

<b><u>Line #</u></b>	<b><u>Data Item</u></b>	<b><u>Explanation/Definition</u></b>
4	Balance Sheet	Heading - non input.
5	Current Assets	Heading - non input.

6	Cash and Cash Equivalents	Cash Equivalents are short term, highly liquid investments (including note receivables) with a maturity of 3 months or less, excluding amounts whose use is limited by Board designation or other arrangements under trust agreements or with third party payers.
7	Short-term	Investments in equity or fixed-income securities with a maturity of 3 to 12 months.
8	Current Assets -Whose Use is Limited	Any current portion of assets whose use is limited, as board-designated, trustee-held, and other designations.
9	Receivables	Heading -non input
10	Net Patient Accounts Receivable	Patient accounts receivable, less an allowance for uncollectible and contractual adjustments
11	Due From Affiliates	Transferred funds (including loans, advances transfers and equity contributions made) that are expected to be received from affiliated entities within the current accounting period.
12	Third party Settlements Receivable	Includes amounts reported as current that represent final settlements due to the hospital.
12.1	Other Current Assets	Includes receivables and all other current assets except those cited in 10, 11 & 12.
16	Total Current Assets	Total of rows 6 through 15.
<b>17</b>	<b>Noncurrent Assets</b>	<b>Heading - non input.</b>

18	Noncurrent Assets - Whose Use is Limited	Any noncurrent portion of assets, whose use is limited, either identified as board-designated, trustee-held, and other designations.
19	Contribution Receivables	Includes contributions, pledges, gifts, and bequests from donors that are not expected to be collected during the current period
19.1	Interest in Net Assets	FASB Statement #136 requires interest in net assets of a beneficiary organization if those entities have an on-going economic interest in one another. This beneficial interest is executed in the form of contribution through transfers or promise to transfer cash and investments, as well as other assets, such as land, building, use of facilities or utilities, materials and supplies.
22	Investment In Affiliates	Amount recorded as equity investments in other entities, which are related to the hospital.
25	Gross Property, Plant and Equipment	Gross value of land, buildings, equipment, construction in progress, and capitalized leases.
26	Accumulated Depreciation	Includes depreciation of PP&E and amortization of capitalized leases.
27	Net PP&E	Net amount of land, buildings, equipment, construction in progress, and capitalized leases.
27.1	Other Non-current Assets	All other non-current assets.
28	Total Non-current Assets	Total of rows 18, 19,19.1, 22,27,27.1.

29	Total Assets	Total of rows 16 and 28.
<b>30</b>	<b>Liabilities and Net Assets</b>	<b>Heading - non input.</b>
31	Current Liabilities	Heading - non input.
32	Current Long-Term Debt	Current portion of long-term debt, capital leases and notes payable.
34	Current Liability- Estimated Third Party Settlements	Amounts received from third parties which may be in excess of allowable amounts and may therefore be paid back to third parties or else resolved favorably and recognized as revenue in the future. Also the current portion of deferred revenue.
35	Current Liability- Due to Affiliates	Transferred funds (including loans, advances, transfers and equity contributions received) that are expected to be paid or returned to affiliated entities with in the current accounting period.
36	Other Current Liabilities	All other current liabilities.
37	Total Current Liabilities	Total of row 32 through 36.
<b>38</b>	<b>Non-current Liabilities</b>	<b>Heading- non input.</b>
39	Long-Term Debt	Includes long-term debt (don not include current portion), obligations under capital leases and notes payable.

42	Non-current Liability- Due to Affiliates	Transferred funds (including loans, advances, transfers and equity contributions received) that are expected to be paid or returned to affiliated entities, beyond the current accounting cycle.
44	Other Non-current Liabilities	All other non-current liabilities.
45	Total Non-current Liabilities	Total of row 39 through 44.
46	Total Liabilities	Total of rows 37 and 45.
<b>47</b>	<b>Net Assets</b>	<b>Heading - non input.</b>
48	Unrestricted Net Assets	The part of net asset that is neither permanently restricted nor temporarily restricted by donor imposed stipulations.
49	Temporarily Restricted Net Assets	The part of the net assets resulting from (i) contributions and other assets whose use is limited by donor imposed stipulations that either expire with the passage of time or can be fulfilled and removed by actions pursuant to those stipulations, (ii) other assets enhancement and diminishment subject to same kind of stipulations, or (iii) reclassification to (or from) other classes of net assets as a consequence of donor-imposed stipulations, their fulfillment and removal by actions pursuant to those stipulations.

50	Permanently Restricted Net Assets	The part of the net assets resulting from (i) contributions and other assets whose use is limited by donor imposed stipulations that neither expire with the passage of time nor can be fulfilled and removed by actions of the organization, (ii) other asset enhancements and diminishments subject to the same kind of stipulations, and (iii) reclassification to (or from) other classes of net assets as a consequence of donor-imposed stipulations
51	Total Net Assets	Total of rows 48 through 50.
52	Total Liabilities and Net Assets	Total of rows 46 and 51.
<b>53</b>	<b>Statement of Operations</b>	<b>Heading - non input.</b>
54	Unrestricted Revenue, Gains and Other Support	Heading - non input.
55	Net Patient Service Revenue (including Premium Revenue)	Total inpatient and outpatient revenue after deductions for free care charges and contractual adjustments. To be included in NPSR are (i) Prior year third party settlements, (ii) Gross receipts for emergency bad debts and (iii) Free care Costs expected to be recovered from the Health Safety Net. (iv) Premium Revenue, which means, fixed amount (per individual) paid by HMOs periodically to provider as compensation for providing comprehensive services for the period.

57	Other Operating Revenue	Includes revenue from services other than health care provided to patients, as well as sales & services to non-patients
57.1	Net Assets Released from Restrictions Used for Operations	Net assets released from donor restrictions by incurring expenses and thus satisfying donor stipulations <b>or</b> by occurrence of other events or passage of a particular time period, specified by donor(s).
57.2	Total Operating Revenue	Total of rows 55, 57 and 57.1.
58	Investment Income	All investment income (includes interest income, dividend income and realized gains, (losses) from sale of investment actively traded as well as interest income and dividend income on passive investments
58.1	Contribution Revenue	Donation, gift or bequest cash or other assets from a donor, and that are not revocable, repayable or reciprocal.
58.2	Change in Interest in Net Assets	Revenue from Interest in Net Assets. For definition of Interest in Net Assets, see 19.1
59	Non-Operating Gains & (Losses)	These are gains and losses that result from a provider peripheral or incidental transactions. These may include- (i) Subsidies received from governmental or community agencies. (ii) Net realized gains/losses resulting from increased and decreased in the value of "passive invests. (iii) Gains/losses on sale or disposal of assets.

59.1	Equity Method of Alternative Investments	These are gain and losses that result from alternative investments where the investor is in the position to influence the operating or financial decision of the alternative investments. Alternative investments may include (i) tangible assets, (ii) financial assets such as commodities, private equity, distressed securities and hedge funds. An alternative investment is an investment other than stocks, bonds, and cash.
64.1	Total Non-operating Revenue	Total of rows 58, 58.1, 58.2, 59 and 59.1.
65	Total Unrestricted Revenue Gains and Other Support	Total of rows 57.2 and 64.1.
<b>66</b>	<b>Expenses</b>	<b>Heading - non input.</b>
66.1	Salary and Benefit Expense	Includes salaries, wages and cost of fringe benefits such as paid vacations and contribution to pension funds. Salaries refer to amounts of compensation. Wages refer to the pay earned by employees at a certain rate per hour, day or week.
68	Depreciation and Amortization	Depreciation is the allocation of the cost of tangible fixed assets. Amortization refers to allocation of cost of intangible assets (for example, periodic payments on Capital Leases).
69	Interest Expense	A charge made for the use of money over a period of time.
70	Health Safety Net	Includes Health Safety Net to the pool.
71	Provision for Bad Debt	Non input.

72	Other Operating Expenses	All other expenses not reported in rows 67 through 71.
73	Total Expenses	Total of rows 66.1, 68, 69, 70, 71 and 72.
74	Excess of Revenue, Gains and Other Support Over Expenses	Row 65 minus row 73.
<b>74.1</b>	<b>Changes in Unrestricted Net Assets, before Extraordinary Item</b>	<b>Heading - non input.</b>
78	Transfers From (To) Parent/Affiliates	Includes funds transferred from (to) parent and affiliates.
78.1	Other Changes in Unrestricted Net Assets	Any changes in unrestricted net assets except for L. 74 and 78.
79	Total Increase/Decrease in Unrestricted Net Assets, before Extraordinary Items	Total of rows 74, 78, and 78.1
80	Extraordinary Gains (Losses)	Any gains (losses) resulting from transactions that are unusual in nature or infrequent in occurrence.
81	Changes in Accounting Principle/Other	Any adjustments resulting from changes in accounting principle.
82	Total Increase/Decrease in Unrestricted Net Assets	Total of rows 79 through 81.

106	<b>Statement of Cash Flow</b>	<b>Heading - non input.</b>
107	Cash Generated from Operating Activities	Heading - Non input line
108	Change in Net Assets	Increase/decrease in net assets.
109	Adjustments to Reconcile Change in Net Assets to Net Cash provided by Operating Activities	Non-cash items, non-operating cash flows and changes in operating assets and liabilities
114	Transfers From (To) Parent/Affiliates.	Includes funds transferred from (to) parent/affiliates.
114.1	Other Increases (Decreases) to Cash	All other increases/decreased in cash (working capital) except for L. 109 and 114.
139	Net Cash provided by Operating Activities	Total of rows 108,109,114 and 114.1
<b>140</b>	<b>Cash Flow From Investing Activities</b>	<b>Heading- non input.</b>
146	Capital Expenditures	Includes acquisition of property, plant and equipment
146.1	Other Cash Used in Investing Activities	Other current and non-current changes in assets as a result of investing activities, except L.146
153	Net Cash Used in Investing Activities	Total of rows 146 and 146.1

154	<b>Cash Flow from Financing Activities</b>	<b>Heading -Non Input</b>
155	Proceeds from Issuance of Long-Term Debt and Capital Lease Obligations	Includes cash proceeds from long-term debt and capital leases.
156	Payments on Long Term Debt and Capital Lease Obligations	Includes repayment of long-term debt and capital leases
158	Transfers From (To) Parent/Affiliates	Includes funds transferred from (to) parent/affiliates.
158.1	Other Cash Used in Financing Activities	Any inflow/outflow of cash used for financing purposes and not listed on Line 155, 156 and 158.
165	Net Cash Used in Financing Activities	Total of rows 155,156,158,158.1.
166	Net (Decrease) Increase in Cash and Cash Equivalent	Total of rows 139, 153 and 165.
167	Cash and Cash Equivalents, Beginning of Year	Balance of cash and cash equivalents at beginning of year.
168	Cash and Cash Equivalents, End of Year	Total of rows 166 & 167.

**Section III: Bed Information: Definitions and Instructions**

**Licensed Beds** is defined as the actual number of licensed beds on the 2nd Wednesday of the first month of the quarter. For the first submission, licensed beds should be the number

of licensed beds at the close of the last quarter, or on the date the data is submitted or filed with the Division. If the hospital cannot report beds on the submission/filing date, please report for a day as close to this date as possible, and indicate the date on your report. Please use a non-holiday weekday.

**Weighted Average Available Beds** is defined as the average number of licensed beds that were physically available for immediate patient use, whether or not staffed, excluding beds not immediately available because of renovation or maintenance, physical plant problems, or similar issues. This number will be calculated as follows: the sum of the number of calendar days each bed was available, divided by number of days in the quarter. For the first submission, available beds should be the number of available beds at the close of the last quarter, or on the date the data is submitted or filed with the Division. If the hospital cannot report available beds on the submission/filing date, please report for a day as close to this date as possible, and indicate the date on your report. Please use a non-holiday weekday.

**Staffed Beds** is defined as the actual number of staffed licensed beds on the 2nd Wednesday of the first month of the quarter. *If a bed was staffed for less than 24 hours in any given day, include the appropriate portion of the day that the bed was staffed. For example, if the bed was set up and staffed for only 12 hours, then only ½ bed should be included in the calculation for the day of staffed beds. For the first submission, staffed beds should be the number of staffed beds at the close of the quarter, or on the date the data is submitted or filed with the Division.* If the hospital cannot report available beds on the submission/filing date, please report for a day as close to this date as possible, and indicate the date on your report. Please use a non-holiday weekday.

Please provide the bed information for the above three types of beds for each of the bed categories provided in the form.

The categories listed in lines 1 through 19 are mutually exclusive. Do not double count individual beds by including them in more than one category.

Line # (2) Include beds in adult intensive care units that combine coronary intensive care with other types of intensive care in a single unit.

Line #(3) Include beds in all adult medical and/or surgical intensive care units, except for those in coronary intensive care units (line 4) or combined intensive care/coronary intensive care units (line 2).

Line # (4) Include only those beds in an intensive care unit devoted solely to coronary care patients. Do not include beds in units devoted to coronary care but not at an intensive level of care.

Line # (20) Key in your calculated total bed count and review the "pop-up box" for agreement, to check for any data keying errors.

#### **Section IV: Utilization Information: Definitions and Instructions**

*Ambulatory surgery* is defined as surgical services to patients not normally requiring an overnight stay. This statistic must include visits by ambulatory surgery patients at all campuses and satellite locations.

*Total outpatient visits* are defined as the total of all visits for services not provided on an inpatient basis. This statistic must include all patients at all campuses and satellite locations.

This total should include visits for any of the following services, as well as any other outpatient service your hospital provides: Emergency services, clinic, satellite clinic (including community health service), ambulatory surgery, ambulatory renal hemodialysis (count 1 treatment equal to 1 visit), home dialysis services (count 1 peritoneal dialysis (PD) treatment day equal to 3/7 of a visit), psychiatry, home health services, observation stays (distinct or non-distinct unit), private referrals, endoscopy, oncology, minor OR, hospice, cardiac rehab, cardiac treatment center, pediatric clinic, adult day health.

*For Ambulatory Surgery and Total Outpatient Visits*, provide visit counts for each of the three months of the quarter. Also, key in your calculated total for the quarter for each, and review the "pop-up box" for agreement, to check for any data keying errors.