



Survey Submission and Compliance Manual

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II.ABOUT US

The **WHA Information Center** is dedicated to collecting, analyzing, and disseminating complete, accurate and timely data and reports about charges, utilization, quality and efficiency provided by Wisconsin hospitals, ambulatory surgery centers and other healthcare providers.

WHA Information Center (WHAIC) is a wholly owned subsidiary of the Wisconsin Hospital Association.

III. WHAIC POLICY STATEMENT

WHAIC was started in 2003 and has a strong heritage of meeting the ever-changing, broad-based needs of health care stakeholders statewide. From helping hospitals and ambulatory surgery centers submit data in compliance with state mandates – to providing data sets, tools, reports and analytic services to health care providers and patients – WHAIC remains committed to serving our customers and maximizing the value that can be realized from Wisconsin’s health care data.

The WHAIC team is dedicated, innovative and has the passion and expertise that a committed health care data program demands. We have years of experience helping health care stakeholders throughout Wisconsin meet their data and analytics challenges and we continue to develop our products and services to meet the changing needs of our customers.

The WHA Information Center is dedicated to collecting, analyzing, and disseminating complete, accurate and timely data and reports about charges, utilization, quality and efficiency provided by Wisconsin hospitals, ambulatory surgery centers and other health care providers.

IV. STATUTE AND DEFINITIONS

All Wisconsin Medicare certified, hospitals, including psychiatric hospitals, are required to report survey data to the Wisconsin Hospital Association Information Center (WHAIC) annually, based on their Fiscal Year End.

WHAIC collects data pursuant to [Chapter 153](#) of the State Statutes and subject to all terms and conditions as described in ss. [DHS 120](#). Failure to comply with the reporting requirements may result in financial penalties to the organization.

Each facility is responsible for compliance with survey data submission. Each facility is assigned a 3-digit facility ID number that will be used to communicate with us and submit facility data in our data collection system. For information on how your data is used in our on-line publications, PricePoint, discharge data sets and other data deliverables contact [Brian Competente](#).

V. SURVEY DUE DATES AND EXTENSIONS

WHAIC operates under the statute of authority of [Chapter 153](#), administrative rule [DHS 120.12](#) explains the data submission procedures and any fines/forfeitures that may be incurred from neglecting to submit, validate, and affirm the survey data.

Per the statute, “every hospital shall annually file with the department within 120 calendar days following the close of the hospital’s fiscal year.” For timelines specific to your calendar year, see the [survey calendar section](#).

1. SURVEY CALENDAR

The [survey calendar](#) shows the due dates of all required upcoming submissions. Our goal is to get hospital compliance by these due dates so that we may comply to our obligation to release the publications.

Sections of the calendar are divided by Fiscal Year End. Each hospital has a standard submission deadline but may file for an extended submission deadline by submitting an extension request via the survey application.

Most hospitals are also required to submit a Medicare Cost Report. Due dates for the Medicare Cost Report are included on the calendar and are also due based on Fiscal Year End. Submission of the Medicare Cost Report survey is done via the survey app and a copy of worksheet C must be uploaded under data deliverables.

Hospital / Health System Survey Submission - Fiscal Year End Dates

Surveys open for submission on November 1

[Annual, Fiscal, Personnel & Uncompensated](#)

***Medicare Cost Report**

***Health System Survey**

MARCH - JUNE FYE* (APR/July 1 FY)	
March – June FYE Extension Request Deadline	12/13/22
March - June <i>Standard</i> Submission Deadline	12/21/22
March - June <i>Extended</i> Submission Deadline (Submit request by deadline)	01/31/23
March - June Affirmation Deadline	02/15/23
JULY - SEPTEMBER FYE (OCT 1 FY)	
July - September FYE Extension Request Deadline	01/23/23
July - September FYE <i>Standard</i> Submission Deadline	01/31/23
July - September FYE <i>Extended</i> Submission Deadline (Submit request by deadline)	03/02/23
July - September Affirmation Deadline	03/16/23
DECEMBER FYE (JAN 1 FY)	
December FYE Extension Request Deadline	04/21/23
December FYE <i>Standard</i> Submission Deadline	05/02/23
December FYE <i>Extended</i> Submission Deadline (Submit request by deadline)	06/02/23
December FYE Affirmation Deadline	06/16/23

- The above timeline reflects adjusted (some combined) survey submission timelines to benefit hospitals to improve efficiency and prevent/reduce duplication of work and requests for additional time. If you are part of a state or county facility – please note the adjusted timeline accounts for additional time allowed for in the statute.
- **Medicare Cost Report (MCR) complete survey and upload your MCR accordingly as applicable.** For more information see [MCR Manual](#).
- ***Health System Survey completion** is now included in FYE timeline. If your facility is part of a system located in Wisconsin, please locate your 900 series facility ID in the facility drop down list to complete your system survey **for WI only**.

2. FILING FOR AN EXTENSION

Under administrative rule DHS 120.12, WHAIC has the authority to grant extensions for up-to 30 days.





To file an extension, you must have access to the [WHAIC portal](#) Survey Submission.

A. Select Hospital and current submission Year

B. Click on Extensions Button

Select a Hospital Sort By Year

Hospital Survey Grid:--

Survey Name	Request Extension	Status
2022 ANNUAL SURVEY		
2022 FISCAL SURVEY		
2022 MEDICARE COST REPORT SURVEY		
2022 PERSONNEL SURVEY		
2022 UNCOMPENSATED HEALTH CARE PLAN		

C. Click on the paper and pencil icon under "Request Extension."

2022 ANNUAL SURVEY -- Please Specify Reason for Extension

Reason:

Comment:

Apply to all surveys for this facility:

D. Choose a reason and provide comments for why you are filing.

E. Apply to all surveys if applicable

F. Click Save

000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31

Hospital Survey Grid:--				
Survey Name	Request Extension	Status	Extension	Progress
2022 ANNUAL SURVEY				67%
2022 FISCAL SURVEY				100%
2022 MEDICARE COST REPORT SURVEY				0%
2022 PERSONNEL SURVEY				100%
2022 UNCOMPENSATED HEALTH CARE PLAN				100%

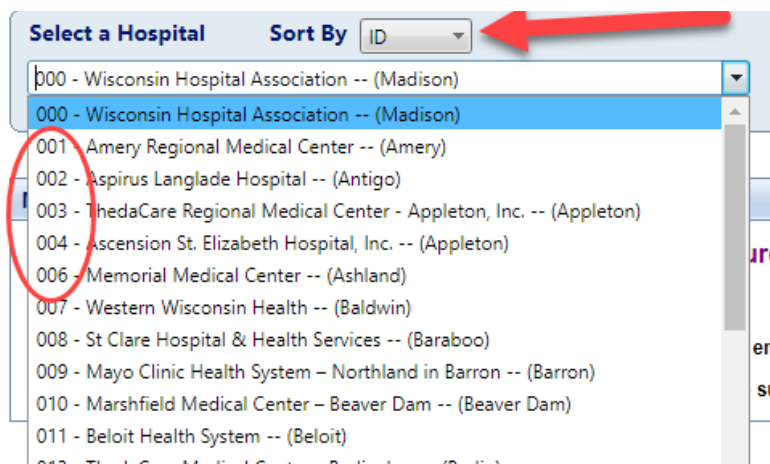
Once approved there will be a green circle under the extension column.

VI. WEBSITE & COMMUNICATIONS

This section provides resources available to help with submission of your annual surveys.

3. COMMUNICATING WITH WHAIC

When emailing WHAIC please include the 3-digit ID number in the subject line and body. The ID can be located in the select a hospital dropdown menu in the survey application (shown here) and in the survey manual.



4. WEBSITE

The WHAIC Website contains all information pertaining to the Information Center in tiles set up to help make your survey submission successful.

The [WHAIC Survey](#) site provides information to assist hospitals with submission, validation, and affirmation of data. Hospitals can find manuals, newsletters, training materials, the survey calendar, and more on this site.

Surveys

All Wisconsin licensed, Medicare certified, hospitals, including psychiatric hospitals are required to submit survey data on an annual basis to the Wisconsin Hospital Association Information Center (WHAIC). Submissions include data in areas such as utilization, fiscal, and personnel to be used in publications, datasets, and workforce development. WHAIC collects data pursuant to Chapter 153 of the Wisconsin State Statutes and subject to all terms and conditions as described in ss. DHS120.

WHAIC CONTACT
Heather Scambler Program Specialist 608-274-1820 EMAIL: Heather.Scambler



Survey Manuals



Survey Submission
Calendar



News & Bulletins



Education & Training



FAQs



Registration & Other
Resources

[View Full Calendar](#)

5. MEDIA

If you or a representative from your facility receives inquiries or questions about the data or publications we produce, refer the external party to the WHAIC Vice President or Director of Operations. WHAIC would like the opportunity to address any questions your facility may receive from an external party (newspaper, insurance company, researcher or other news outlet, etc.)

VII. PORTAL ROLES AND REGISTRATION

WHAIC does not add new users. If a new user needs access to the portal, they must select a survey role and follow [registration instructions](#). Registrants will be approved within 24-48 hours unless there is a question about the registration.

Primary contacts will receive notification of all newly registered Portal users. The portal site is for uniquely registered users only. Registered users should **never share their Username or Password** with others. Use of the system without authority, or in excess of authority, is strictly prohibited.

6. SURVEY ROLES

Click [here](#) for full details about each role and step-by-step registration instructions.

Survey Roles – designations assigned by the facility to manage and oversee statutorily required and timely survey submissions and corrections to the annual surveys.

The Survey site is for authorized users only. **Individual users must have their own login**. Registered users agree use of Survey application and Secure Portal system without authority, or in excess of your authority, is strictly prohibited.

- **Survey Primary** – This person will receive all communications regarding the survey and have access to all survey reports and functions as requested.

Recommended for users involved in submission process who need regular communications with WHAIC and have authorization to sign off on survey data (CFO, CEO or delegate)

- **Survey Secondary** – This person has access to all survey reports and functions, but only receive certain communications from WHAIC if the primary contact fails to respond.

Recommended for C-Suite individuals who delegate primary responsibility, but need occasional survey access and access to view or sign off on affirmation statement

- **Survey (Standard User)** – This person has access to registered surveys, but no access to reports.

Recommended for individuals who submit only portions of the survey and/or have limited authority or knowledge of each part of the process.

7. HOW TO REGISTER

- A. To register, open site <https://portal.whainfocenter.com> in your web browser and click “Register”:

WHA | INFORMATION CENTER

Log In

Please enter your Username and Password

Username:

Password:

This system is for authorized users only. Individual use of this computer system and/or network without authority, or in excess of your authority, is strictly prohibited. Monitoring of transmissions or transactional information may be conducted to ensure the proper functioning and security of electronic communication resources. Anyone using this system expressly consents to such monitoring and is advised that if such monitoring reveals possible criminal activity or policy violation, system personnel may provide the evidence of such monitoring to law enforcement or to other senior officials for disciplinary action.

I Agree, Log In

Register Forgot Password Change Password

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WHA Information Center - 5510 Research Park Dr. - Madison - WI - 53711
Phone: 800.231.8340 / 608.274.1820

- B. CAPTCHA phrase will display on the screen to defeat automated registrations.

WHA | INFORMATION CENTER

Registration

Verification...

Please check "I'm not a robot." This is to prevent automated registrations.

I'm not a robot

reCAPTCHA
Privacy - Terms

Continue

For Portal Access: Primary contacts will receive notification of all newly registered Portal users. This site is for uniquely registered users only! By clicking continue, you agree to **never share your Username or Password** with others and that the use of the system without authority, or in excess of your authority, is strictly prohibited.

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Phone: 800.231.8340 / 608.274.1820

SECURED SITE
register.com
256 bit Encryption...

C. Register for “Annual Hospital Survey”

Please check the box(es) below which apply to you (click underlined links for more information):

Register For	Definition
<input type="checkbox"/> Wlpop	I will be submitting and/or editing Wisconsin hospital or ambulatory surgery center discharge data
<input type="checkbox"/> Facility-Specific Reports	Check this box if you are registering as a: <ul style="list-style-type: none"> • Wlpop Primary or Secondary Contact (also check Wlpop above) • Recipient of Quality Reports
<input checked="" type="checkbox"/> Annual Hospital Survey	I submit, verify, review and/or sign off on the annual surveys including Hospital Fiscal Survey, Uncompensated, Personnel, and Medicare Cost Report Surveys
<input type="checkbox"/> Kaavio	I will be using the Kaavio data analysis tool
<input type="checkbox"/> Psych Bed Locator	I will use the utility tool to submit bed availability for emergency staff seeking an inpatient psychiatry bed
<input type="checkbox"/> Hospital Utilization Report	I will be submitting the Hospital Utilization Report (aka Milwaukee Report) for my facility(s)
<input type="checkbox"/> Hospital Rate Increase	I will be submitting the Hospital Rate Increase notices for my facility(s)
<input type="checkbox"/> Physician Review	I am a physician and would like to receive my quarterly patient reports
<input type="checkbox"/> Other Download Files	None of the above apply, but I occasionally receive or purchase data from the WHA Information Center

Be mindful that some users may have multiple roles such as Wlpop and Annual Hospital Survey or Hospital Rate Increases. Be sure to register for the roles you will need.

*User access can be upgraded / downgraded at any time. The Primary contact emails WHAIC whainfocenter@wha.org with instructions.

D. Choose **ALL hospital(s)** that you will be submitting data for.

*Surveys are only submitted by the hospitals but note that surgery centers are also shown on this list because of the other data we collect.

Select the facilities that you represent...

- Access Medical Center LLC (Racine)
- Alexander Eye Surgery Center, LLC (Appleton)
- Ambulatory Surgery Center LLC (Oshkosh)
- Ambulatory Surgical Center of Stevens Point (Stevens Point)
- Amery Regional Medical Center (Amery)
- Arthroscopic Surgery Center LLC (Appleton)
- Ascension Calumet Hospital, Inc. (Chilton)

E. Select **ALL survey(s)** you will be entering. **Select Primary or Secondary Role only if you will be the Primary or Secondary Contact. WHAIC communicates with the Primary contact.** See the Survey Roles Descriptions for more information.

Select the survey(s) that you will be entering. Select Primary or Secondary roles only if you will be a Primary or Secondary Contact.

Survey List:

- Annual Survey
- Fiscal Survey
- Medicare Cost Report Survey
- Personnel Survey
- Uncompensated Health Care Plan Survey
- Primary Survey Contact
- Secondary Survey Contact

Annual Survey, Medicare Cost Report Survey

[Survey Roles Descriptions](#)

NOTE: Choosing Primary Survey Contact automatically assigns all 5 surveys. If you are not responsible for all surveys, uncheck those that are not applicable to you.

Select the survey(s) that you will be entering. Select Primary or Secondary roles only if you will be a Primary or Secondary Contact. Choosing Primary Survey Contact automatically assigns all 5 surveys. If you are not responsible for all 5 surveys, uncheck those that are not applicable to you.

Survey List:

- Annual Survey
- Fiscal Survey
- Medicare Cost Report Survey
- Personnel Survey
- Uncompensated Health Care Plan Survey
- Primary Survey Contact
- Secondary Survey Contact

Annual Survey, Fiscal Survey, Medicare Cost Report Survey, Personnel Survey, Uncompensated Health Care Plan Survey, Primary Survey Contact

If you will be responsible for submitting the Health System Survey, please select your system:

I will not be submitting the Health System Survey ▾

[Survey Roles Descriptions](#)

Previous Next

Also note that selecting Primary Survey Contact brings up a question regarding the Health System Survey. If you are part of a Hospital System and will be submitting the Health System Survey, choose your system from the dropdown.

If you will be responsible for submitting the Health System Survey, please select your system:

Bellin Health System ▾

Finally, you will be asked to complete the Registration Details and then press **“Create Account”**:

Personal Details...

First Name:

Last Name:

Email:

Title:

Phone: xxx-xxx-xxxx

Phone Extension: (optional)

Fax: xxx-xxx-xxxx (optional)

Username and Password...

Username: (only alphanumeric, please no email)

Password:

Passwords must be at least 8 characters, including 1 uppercase, 1 lowercase, 1 digit and 1 special character: @#_ *~\$^&=%+

Confirm Password:

Security Question:

Security Answer:

[Previous](#)

[Create Account](#)

Once the account has been activated an auto-generated email is sent with the permissions assigned to the user and the primary contact. If you do not receive a response from WHAIC within 5 days, contact us for further follow up.

8. REACTIVATING A DEACTIVATED ACCOUNT

Survey accounts deactivate after 15 months of inactivity. Reregistering is not necessary, please contact WHAIC to reactivate.

If your account is deactivated, **contact whainfocenter@wha.org to reactivate an account.** To maintain account security and privacy practices do not use someone else's login.

VIII. WHERE DOES MY SURVEY SUBMISSION GO?

- ❑ **Annual Survey**
 - ❑ Collects hospital information – Part of a system, type of hospital, certifications, etc. Reports the services that are provided at the hospital, number of beds, utilization, FTEs, and physicians.
 - ❑ [Guide to Wisconsin Hospitals, Custom Reports & Workforce Development](#)
- ❑ **Fiscal Survey**
 - ❑ Collects information on revenue and expense figures, gross patient charges and contractual adjustments by payer, balance sheet figures, and charity care and bad debt.
 - ❑ [Guide to Wisconsin Hospitals & the Uncompensated Health Care report](#)
- ❑ **Uncompensated Health Care**
 - ❑ Collects definitions related to eligibility for uncompensated care; income thresholds for financial assistance; and policies and procedures determining a patients' ability to pay.
 - ❑ [Uncompensated Health Care Survey](#)
- ❑ **Personnel Survey**
 - ❑ “Addendum” to Annual Survey
 - ❑ Collects vacancies of select employee categories; number of employees 55 and over; number of employee separations;
 - ❑ [Custom Reports & Workforce Development](#)
- ❑ **Medicare Cost Report Schedule C**
 - ❑ Used to calculate hospital tax

IX. ENTERING SURVEY DATA INTO THE PORTAL

Where possible we try to utilize information from the previous year. All other questions are manually entered annually. Utilize the [survey website](#) for more information. An example of auto-filled questions in the Annual Survey is the Communications Contact and Reporting Period.

1. Communications Contact and Reporting Period

A. Identify the main primary contact responsible for communications related to the data

B. Indicate the beginning of your current fiscal year

C. Reporting period begin date Reporting period end date

D. Were you in operation 12 full months at the end of your reporting period?
 Yes No

If no, number of days open during reporting period

9. PORTAL ACCESS REQUIRED

Portal access is required to enter survey data. For more information on roles and registration see section [VII. Portal Roles and Registration](#).

10. ACCESSING HISTORICAL SURVEY DATA

Survey submitters may review the data from the previous year through the survey application on the WHAIC portal.

The screenshot shows the WHA Information Center portal. At the top right, it says "Welcome: sstaudenmayer8." and has a "Portal Home" button. Below this is a navigation bar with tabs: Home, Extensions, Admin : Open Survey, Report : Hospital Reg. Status, Report : Hospital Survey Status, Report : Survey - All Questions, All Codes, and Report : Survey Data Sets. The main content area has a search bar with "Select a Hospital" and "Sort By ID" dropdowns. A dropdown menu is open showing "000 - Wisconsin Hospital Association -- (Madison)". To the right of the search bar is a "View Hospital" button. Further right is a "Year" dropdown menu with options for 2019, 2018, and 2019 (highlighted). To the right of the year dropdown is a "View Hospital" button. On the far right of the search area are links for "Survey Timeline", "Survey Manuals", "Data Deliverables", and "Survey Homepage". Red text annotations are present: "A. Select Hospital" points to the hospital dropdown, "B. Select Year" points to the year dropdown, and "C. Click View Hospital" points to the "View Hospital" button.

11. SURVEY APPLICATION AND ENTERING DATA

To use the survey application, access to the [portal](#) is needed. For more information on roles and registration for the portal, see section [VII. Portal Roles and Registration](#).

Once you login to the portal, click Survey Submission and it will take you to a home screen much like this. The links in the top right corner take you to the survey timeline, manuals, data deliverables (where you will sign your affirmation and upload your Medicare Cost Report Schedule C), and to the main survey website.

You will also notice a message center. This area shows up-to-date information on what is upcoming or happening now for surveys. Often you will see information about the surveys being opened or training information listed here.

Welcome: hs0708
[Portal Home](#)

Home | **Intro to Surveys** | Facility Reports | Administrator

Select a Hospital: 000 - Wisconsin Hospital Association -- (Madison) | Sort By: ID | Year: 2022 | [View Hospital](#) | [Extensions](#) | [Survey Timeline](#) | [Survey Manuals](#) | [Data Deliverables](#) | [Survey Homepage](#)

Message From WHA Information Center:--

The Fall Survey Training is complete and the training session slides can be found [here](#). Also check out the [recording](#) of the training session from October 26th. Important points from the training include calendar changes where the Medicare Cost Report and Health System Surveys are now due at the same time as all of the other surveys, new prefilled questions and a report for the Annual Survey and a change to the Extension Request button.

[Survey Submission Calendar](#)
 View the [Survey Newsletter](#) here
 For questions, contact [Heather Scambler](#) or whainfocenter@wha.org

000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31 [Survey How-To](#)

Hospital Survey Grid:--

Survey Name	Enter/View Survey	Status	Print PDF	Progress	Action Needed
2022 ANNUAL SURVEY	Continue	Open		<div style="width: 67%;"><div style="width: 67%;"></div></div> 67%	
2022 FISCAL SURVEY	Incomplete	Open		<div style="width: 100%;"><div style="width: 100%;"></div></div> 100%	Stats Edits
2022 MEDICARE COST REPORT SURVEY	New	Open		<div style="width: 0%;"><div style="width: 0%;"></div></div> 0%	
2022 PERSONNEL SURVEY	Ready to Submit	Open		<div style="width: 100%;"><div style="width: 100%;"></div></div> 100%	Submit Survey
2022 UNCOMPENSATED HEALTH CARE PLAN	Ready to Submit	Open		<div style="width: 100%;"><div style="width: 100%;"></div></div> 100%	Submit Survey

Authorized Users for Selected Hospital:--

Please take a moment to review your hospital's list of users authorized to access the WHAIC secure Survey Site. Should any of the names listed no longer require access to the Survey or if changes need to be made, please contact whainfocenter@wha.org, as it is the hospital's responsibility to notify WHAIC with any staff updates or corrections.

First Name	Last Name	Title	Email	Survey Role	Annual	Fiscal	System	Medicare	Uncompensated	Personnel
No records to display.										

Choose your hospital from the select a hospital listing. Select the hospital, the year, and View Hospital. You may sort by name or 3-Digit ID to find your facility.

The screenshot shows the WHA Information Center website. At the top left is the WHA logo and 'INFORMATION CENTER'. At the top right, it says 'Welcome: hs0708.' and has a 'Portal Home' button. Below the logo is a navigation bar with 'Home', 'Intro to Surveys', 'Facility Reports', and 'Administrator'. The main content area has a 'Select a Hospital' section with a 'Sort By' dropdown set to 'ID', a 'Year' dropdown set to '2022', and a 'View Hospital' button. There are also links for 'Survey Timeline', 'Survey Manuals', 'Data Deliverables', and 'Survey Homepage'. Below this is a 'Message From WHA Information Center--' section with text about Fall Survey Training and links to 'Survey Submission Calendar' and 'Survey Newsletter here'. At the bottom of the message, it says 'For questions, contact Heather Scambler or whainfocenter@wha.org'.

This is a close-up of the 'Select a Hospital' dropdown menu. The 'Sort By' dropdown is set to 'ID' and is highlighted with a red arrow. The dropdown menu is open, showing a list of hospitals with their 3-digit IDs. The first two items are circled in red: '000 - Wisconsin Hospital Association -- (Madison)' and '001 - Amery Regional Medical Center -- (Amery)'. Other items in the list include '002 - Aspirus Langlade Hospital -- (Antigo)', '003 - ThedaCare Regional Medical Center - Appleton, Inc. -- (Appleton)', '004 - Ascension St. Elizabeth Hospital, Inc. -- (Appleton)', '006 - Memorial Medical Center -- (Ashland)', '007 - Western Wisconsin Health -- (Baldwin)', '008 - St Clare Hospital & Health Services -- (Baraboo)', '009 - Mayo Clinic Health System - Northland in Barron -- (Barron)', '010 - Marshfield Medical Center - Beaver Dam -- (Beaver Dam)', and '011 - Beloit Health System -- (Beloit)'. The list is partially obscured by a vertical scrollbar on the right.

The 3-digit ID is a unique 3-digit identification number assigned to each facility by WHAIC. This number should be included in email communications or correspondence with WHAIC.

You will notice this ID in the Select a Hospital drop-down and you can also access the full list [here](#). Please include this number in the subject line when contacting WHAIC.

In the hospital survey grid, under the message center, you will enter your surveys.

- Click New to begin entering surveys.
- Continue takes you back to where you left off if you have already started the survey.
- Incomplete means that surveys are done, but not submitted.
- Submitted – YOU'RE DONE!

000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31

[Survey How-To](#)

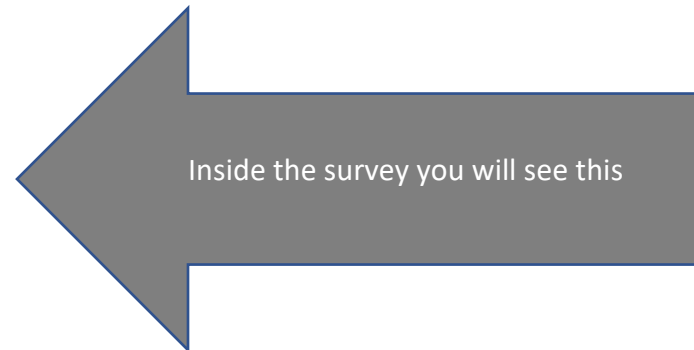
Hospital Survey Grid:--					
Survey Name	Enter/View Survey	Status	Print PDF	Progress	Action Needed
2022 ANNUAL SURVEY	Continue	Open		67%	
2022 FISCAL SURVEY	Incomplete	Open		100%	Stats Edits
2022 MEDICARE COST REPORT SURVEY	New	Open		0%	
2022 PERSONNEL SURVEY	Ready to Submit	Open		100%	Submit Survey
2022 UNCOMPENSATED HEALTH CARE PLAN	Ready to Submit	Open		100%	Submit Survey

2020 ANNUAL SURVEY : Wisconsin

I. HOME
II. HOSPITAL INFORMATION AND CLASSIFICATION (100%)
Organization Information [1 - 10] (100%)
Service [11 - 12] (100%)
Certification Status [13 - 15] (100%)
Managed Care Information [16 - 22] (100%)
Nursing Home Data [23 - 25] (100%)
III. SELECTED INPATIENT UNITS (100%)
IV. SELECTED ANCILLARY AND OTHER SERVICES (100%)
V. SELECTED SERVICE UTILIZATION (100%)
VI. TOTAL FACILITY UTILIZATION AND BEDS (100%)

Survey Layout:

- Navigational Tree Control
- Percentage of each selection completed.
- Percentage of each subsection completed.
- Display is the same for all survey data types.

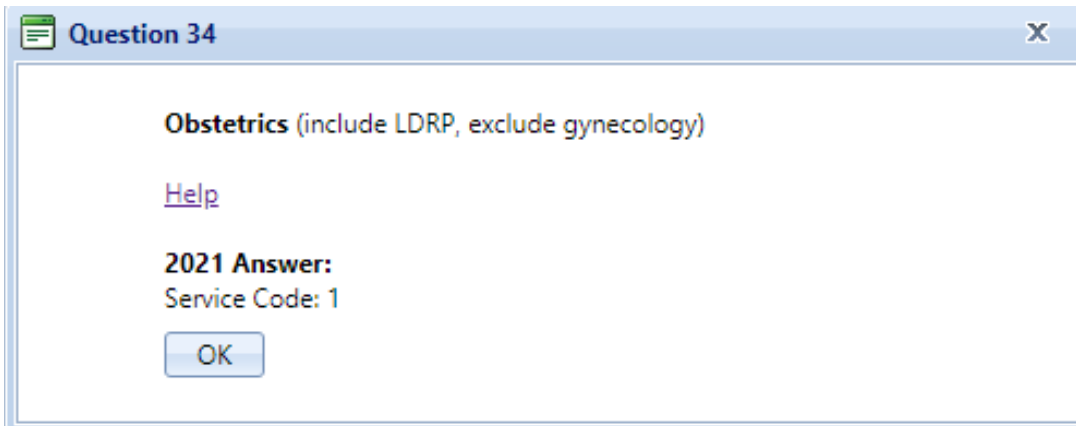


Questions inside the surveys have additional details when clicking on the line number.

34. Obstetrics (include LDRP, exclude gynecology)

Level of Care	Beds set-up and staffed last day of fiscal year	Number of discharges	Inpatient days for fiscal year	Discharge days
<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input type="text" value="1"/>	<input type="text" value="93"/>	<input type="text" value="178"/>	<input type="text" value="178"/>

In the picture below, the help link takes you to the particular section in the manual to help answer any questions. This section also provides answers given to the particular question in the previous year's survey.



The data should auto save, but you may also click the save icon.

The screenshot shows the WTA Center survey interface. The top navigation bar includes 'Home', 'Extensions', 'Admin : Open Survey', 'Report : Hospital Reg. Status', 'Report : Hospital Survey Status', 'Report : Survey - All Questions, All Codes', and 'Report : Survey Data Sets'. The main content area displays the '2020 ANNUAL SURVEY : Wisconsin Hospital Association, Madison, 53725.' A left sidebar lists survey sections from I. HOME to X. SERVICE QUALITY/PATIENT SAFETY (100%). The main content area shows 'XII. HEALTH INFORMATION TECHNOLOGY Expenditures' with two data rows: '268. Total Health Information Technology Expenditures - Capital' with a value of 66,318 and '269. Total Health Information Technology Expenditures - Operating' with a value of 2,626,987. Two callout boxes are present: one labeled 'Save/Page Update Button:' with the text '* Saves data entered on this page.' and '* Option to perform page-level edits when page is saved.', and another labeled 'Information Button: Link to manual'. Both callouts have arrows pointing to icons in the interface.

After saving you will get the opportunity to view and correct edits on that page or moving on and completing the survey and completing edits at the end. It can be a Hard Edit, Soft Edit and/or Statistical Comparison Edit.

o Hard Edit – Mathematical or logical error: Edit that must be fixed to submit survey (e.g., fiscal survey line 1 + line 4 must equal line 5). Will show up in **red** inside the survey.

o Soft Edit – Possible error; values imply unusual situation: Edit that must be verified to submit survey. (e.g., annual survey – line 160 – Admissions are more than 3% higher/lower than inpatient days in Section III. Are you sure?). Will show up in **orange** inside the survey.

o Statistical Comparison – Possible error; values are substantially different than reported in previous survey. Edits run after hard and soft edits are addressed. If value is 30% more or less than submitted in previous year, an edit will appear. (e.g., if total gross revenue is \$1.0 million for FY 2016 and \$1.3 million for FY 2017, an edit will appear). Will show up as **purple** inside the survey. **If the edit is bypassed, but needs further explanation, it will show up as an Action Edit on your affirmation statement.**

The order of things for survey is:

User fills out survey and hits the save button, which triggers the validation process (starting with Hard Edits).

After they complete the Hard Edits and hit the save button it triggers validation for Soft Edits.

After they complete the Soft Edits and hit the save button, it does the same for stat edits.

The thing that's different with Stat Edits, is that there isn't a list of rules stored in the SQL database like the Hard/Soft edits have. This is a check within the application where every single question/answer gets funneled into a function that checks the following:

- 1) Is the Current Year and Previous Year answer numerical? If yes, it is POSSIBLE for it to have a stat edit and goes on to step 2.
- 2) Is the Current Year greater than or less than +/- 30% of the Previous Year answer? If yes, then the stat edit will show.

If the difference between Current Year and Previous Year is +/- 30% AND more than +/- 5, the stat edit will trigger.

12.SUBMITTING AND REOPENING SURVEYS

The column header will change to **Complete** once you have reviewed and/or fixed all edits and clicked **Submit Survey on all surveys**. Notice the surveys will have a thumbs up when fully submitted.

000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31

[Survey How-To](#)

Hospital Survey Grid:--						Complete
Survey Name	Enter/View Survey	Status	Print PDF	Progress		
2020 ANNUAL SURVEY	View Only	Closed Reopen		100%		Submitted
2020 FISCAL SURVEY	View Only	Closed Reopen		100%		Submitted
2020 MEDICARE COST REPORT SURVEY	View Only	Closed Reopen		100%		Submitted
2020 PERSONNEL SURVEY	View Only	Closed Reopen		100%		Submitted
2020 UNCOMPENSATED HEALTH CARE PLAN	View Only	Closed Reopen		100%		Submitted

Click **Reopen** on the applicable survey if information needs to be changed or updated. * Please note: Once surveys are reopened or changed, you will need to go back through the edit process and resubmit your surveys and complete a new affirmation statement.

000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31

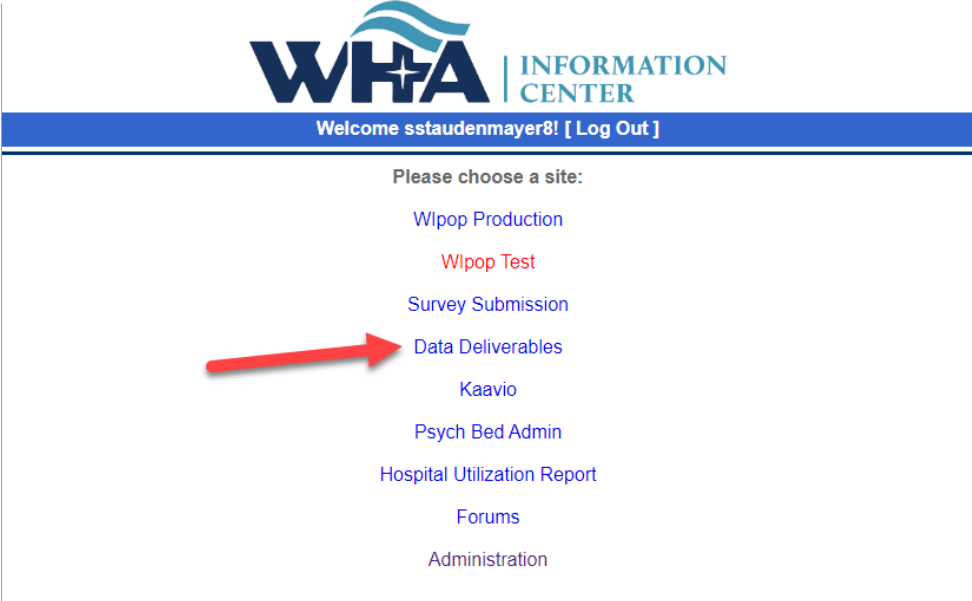
[Survey How-To](#)

Hospital Survey Grid:--						Complete
Survey Name	Enter/View Survey	Status	Print PDF	Progress		
2020 ANNUAL SURVEY	View Only	Closed Reopen		100%		Submitted
2020 FISCAL SURVEY	View Only	Closed Reopen		100%		Submitted
2020 MEDICARE COST REPORT SURVEY	View Only	Closed Reopen		100%		Submitted
2020 PERSONNEL SURVEY	View Only	Closed Reopen		100%		Submitted
2020 UNCOMPENSATED HEALTH CARE PLAN	View Only	Closed Reopen		100%		Submitted

X.ONLINE AFFIRMATION

All hospitals are required to validate and affirm the data. Primary and Secondary contacts have access to the affirmation statement, but only Primary contacts will receive email reminders about deadlines to affirm the data.

To access the affirmation statement, click on Data Deliverables in the portal.



WHA INFORMATION CENTER

Welcome sstaudenmayer8! [Log Out]

Please choose a site:

- Wipop Production
- Wipop Test
- Survey Submission
- Data Deliverables
- Kaavio
- Psych Bed Admin
- Hospital Utilization Report
- Forums
- Administration

Then click on Survey Affirmations and Schedule C



WHA INFORMATION CENTER

Data Deliverables Home Welcome sstaudenmayer8! [Portal Home]

Home File Downloads File Administration Provider Based Locations Data Affirmations Survey Affirmations and Schedule C

Welcome to the WHA Information Center Data Deliverables site. Posted files will remain online for 30 days.

All downloadable files are compressed and encrypted using 7-Zip: <http://www.7-zip.org/>

Mac users can download a 7-Zip compatible program from this site: <http://www.kekaosx.com/en/>

Please select an option from the tab menu above.

[Help for First-Time Users](#)

For those of you reviewing the Wipop Data Submission Reports: If you do not see a report that you are expecting, contact the WHA Information Center as your contact roles may need to be modified in the Portal.

| About Us | Contact Us | © 2003 - 2020, WHA Information Center
WHA Information Center - 5510 Research Park Dr. - Madison - WI - 53711 - Phone: 800.231.8340 / 608.274.1820

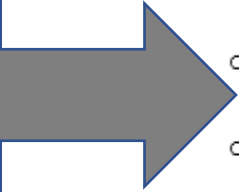
Survey Affirmations and Schedule C Definitions and Frequently Asked Questions Filter for Year: 2022

Select	ID	Facility	Year	FYE	Submitted	Approved By	Schedule C	Validated
Surveys Incomplete	002	Aspirus Langlade Hospital (Antigo)	2022	06/30	No		No Upload	<input type="checkbox"/>
Surveys Incomplete	071	Aspirus Medford Hospital & Clinics, Inc (Medford)	2022	06/30	No		No Upload	<input type="checkbox"/>
Surveys Incomplete	072	Froedtert Menomonee Falls Hospital (Menomonee Falls)	2022	06/30	No		Yes Upload	<input type="checkbox"/>
Surveys Incomplete	079	Froedtert Hospital (Milwaukee)	2022	06/30	No		Yes Upload	<input type="checkbox"/>
Surveys Incomplete	111	Aspirus Divine Savior Hospital & Clinics (Portage)	2022	06/30	No		No Upload	<input type="checkbox"/>
Surveys Incomplete	133	Door County Medical Center (Sturgeon Bay)	2022	06/30	No		Yes Upload	<input type="checkbox"/>
Complete Affirmation	134	St Mary's Hospital of Superior (Superior)	2022	06/30	No		Yes Upload	<input type="checkbox"/>
Surveys Incomplete	147	Milwaukee County Behavioral Health Complex (Milwaukee)	2022	12/31	No		No Upload	<input type="checkbox"/>
Surveys Incomplete	151	Froedtert West Bend Hospital (West Bend)	2022	06/30	No		Yes Upload	<input type="checkbox"/>
Surveys Incomplete	178	Froedtert Holy Family Memorial (Manitowoc)	2022	6/30	No		Yes Upload	<input type="checkbox"/>
Surveys Incomplete	325	Froedtert Community Hospital - New Berlin (New Berlin)	2022	06/30	No		Yes Upload	<input type="checkbox"/>
Surveys Incomplete	326	Froedtert Community Hospital - Pewaukee (Pewaukee)	2022	06/30	No			<input type="checkbox"/>
Surveys Incomplete	327	Miramont Behavioral Health (Middleton)	2022		No		No Upload	<input type="checkbox"/>
Surveys Incomplete	328	Ascension Wisconsin Hospital - Menomonee Falls (Menomonee Falls)	2022		No		No Upload	<input type="checkbox"/>
Surveys Incomplete	329	Ascension Wisconsin Hospital - Greenfield (Milwaukee)	2022	12/31	No		No Upload	<input type="checkbox"/>
Surveys Incomplete	330	Ascension Wisconsin Hospital - Waukesha (Waukesha)	2022	12/31	No		No Upload	<input type="checkbox"/>
Surveys Incomplete	332	Froedtert Community Hospital - Oak Creek (Oak Creek)	2022		No			<input type="checkbox"/>
Surveys Incomplete	333	Froedtert Community Hospital - Mequon (Mequon)	2022		No			<input type="checkbox"/>
Surveys Incomplete	334	ProHealth Care Waukesha Memorial Hospital - Mukwonago (Mukwonago)	2022	09/30	No			<input type="checkbox"/>
Surveys Incomplete	337	Milwaukee Rehabilitation Hospital, LLC (Milwaukee)	2022	04/01	No		No Upload	<input type="checkbox"/>

Click on Complete Affirmation link in the left column titled Select. If Complete Affirmation is not listed in the Select column, surveys are not fully submitted. Users should refer back to the survey application and close any outstanding surveys. Click on 'Definitions and Frequently Asked Questions' above the facility table for more information.

Instructions for Survey Affirmations and Schedule C Table

Definitions and Frequently Asked Questions will bring you to an instructions page.



- Four columns are sortable: ID, Facility, Submitted, Schedule C
- **Select** has three possible values:
 - **Complete Affirmation** means that all required surveys have been submitted. Click the link to open the affirmation for submission.
 - **Surveys Incomplete** means that not all required surveys have been submitted. Nothing can be done with this facility, except uploading Schedule C.
 - **Download** means the affirmation has already been submitted. The affirmation can be downloaded but no further changes can be made.
- The **Schedule C** column has the values:
 - **Yes or No**, depending on whether the MCR Schedule C has been uploaded.
 - Click **Yes** to view the most recent Schedule C upload.
 - **Upload**-prompts the user to upload the Schedule C. Upload may be visible even after a file has been uploaded. It will be available, and changes can be made until the affirmation has been submitted. After that point, the record is considered locked.
- The **Year** column defaults to the current year but can be changed to view affirmations from previous years.

The menu links will turn green when active. To begin, click on **Affirmation Summary Data**.

WHA INFORMATION CENTER

Survey Affirmations and Schedule C Welcome sstaudenmayer8! [Portal Home]

Home | File Downloads | File Administration | Provider Based Locations | Data Affirmations | Survey Affirmations and Schedule C

Affirmation Summary Data (Active)
FYE Summary Report
Action Edits
Sign & Submit Affirmation
Download / Reopen Surveys
Cancel

2018 Survey Affirmation

According to the Department of Health Services (DHS) 120.11, hospitals must adhere to standard data verification, review, and comment procedures. This must occur **before** the data is signed off on via the affirmation statement.

Portions of the Annual and/or Fiscal survey data is publicly available on the WHAIC website in various [publications](#), custom reports, and [PricePoint](#) to display Payer Mix details for various payers as well as Charity/Other Uncompensated care. For more information and validation of this data, see the Preliminary Fiscal Year Summary Report on the left toolbar.

Review the Summary Data in the charts and table below for accuracy. Line items listed in **red** indicate a significant variation of 30% or greater from the previous years reporting. **Review these changes carefully as they are often the focus of public interest. If changes are required for the current year, use the toolbar on the left to reopen the appropriate survey and make the necessary corrections. If no corrections to the figures below are required, but you choose to provide a comment, you may do so prior to submitting your electronic affirmation.*

2018 Survey Summary Data

Payer Category	Charges	Deductions	Net Revenue
Commercial	\$33,433,383	\$10,112,990	\$23,320,403
Medicare	\$57,750,062	\$26,770,155	\$30,979,907
Medicaid	\$14,636,186	\$9,489,785	\$5,146,401

To advance to the next page, click on the links in the left column or click next at the bottom of the page.

2018 Survey Affirmation

According to the Department of Health Services (DHS) 120.11, hospitals must adhere to standard data verification, review, and comment procedures. This must occur **before** the data is signed off on via the affirmation statement.

Portions of the Annual and/or Fiscal survey data is publicly available on the WHAIC website in various [publications](#), custom reports, and [PricePoint](#) to display Payer Mix details for various payers as well as Charity/Other Uncompensated care. For more information and validation of this data, see the Preliminary Fiscal Year Summary Report on the left toolbar.

Review the Summary Data in the charts and table below for accuracy. Line items listed in **red** indicate a significant variation of 30% or greater from the previous years reporting. **Review these changes carefully as they are often the focus of public interest. If changes are required for the current year, use the toolbar on the left to reopen the appropriate survey and make the necessary corrections. If no corrections to the figures below are required, but you choose to provide a comment, you may do so prior to submitting your electronic affirmation.*

2018 Survey Summary Data



	Current Year	Previous Year	Percent Change
Gross Patient Revenue	\$110,248,115	\$101,523,753	8.6%
Less Deductions	\$50,743,790	\$51,366,100	-1.2%
Net Patient Revenue	\$59,504,325	\$50,157,653	18.6%
Plus Other Operating Revenue	\$1,610,002	\$3,902,597	-58.7%
Total Revenue	\$61,114,327	\$54,060,250	13.0%
Less Expenses	\$60,754,276	\$57,631,481	5.4%
Operating Margin	\$360,051	(\$3,571,231)	-110.1%
Operating Margin %	0.6%	-6.6%	-108.9%
Non-Operating (Gains/Losses)	\$427,845	\$381,723	12.1%
Net Income (Total Margin)	\$787,896	(\$3,189,508)	-124.7%
Total Margin %	1.3%	-5.9%	-121.9%

	Current Year	Previous Year	Percent Change
Bad Debt	\$2,922,766	\$3,547,476	-17.6%
Charity Care	\$734,357	\$654,628	12.2%
Inpatient Discharges	1,120	969	15.6%
Total Outpatient Visits	111,529	120,307	-7.3%
Total FTEs	322.9	331.9	-2.7%
Total Beds	16	17	-5.9%

*Fields highlighted in red indicate 30% or more variance from last year.



The [Guide to Wisconsin Hospitals](#) includes the Fiscal Year Summary Report.

This document represents a compilation of what will be displayed in the [Guide to Wisconsin Hospitals](#) and is produced for your review prior to publication. WHAIC encourages you to **review this information carefully for accuracy**. Once the data is processed and published on the WHAIC website any egregious errors or misrepresented data cannot be adjusted. This is your last opportunity to validate the data and make any corrections.

This FY Summary Report provides detailed information about your hospital, including (as applicable) general medical-surgical, long-term acute-care, psychiatric, alcohol and other drug abuse, and rehabilitation. The information is drawn from responses to the Annual Survey of Hospitals, the Hospital Fiscal Survey, and the Personnel Survey. Tables present selected measures of utilization, service, staffing and finance. Once the data is published in the Guide, comparison data for hospitals of the same type, in the same analysis area, and for the same patient volume group will be displayed.

To make any corrections, re-open the applicable survey, make corrections and resubmit (including going through the edit process). This will prompt your reports to refresh. Contact WHAIC staff if you have questions.

[Download Preliminary Fiscal Year Summary Report - Printable PDF](#)

[FY Summary FAQ](#)

To download a PDF of this 3-page report click here.

	FY 2019	FY 2018	Ratio
006 Memorial Medical Center			
Fiscal Year:	10/01 to 09/30		County: A
Type:	GMS		
	Critical Access Ho		
Control:	Other Not-For-Pro		
Occupancy Rate (%)			
Adult Medical-Surgical	48.4%	46.7%	1.03
Obstetrics	30.0%	29.4%	1.02
Pediatrics	0.0%	0.0%	N/A
Total Hospital	54.4%	53.7%	1.01
Average Census (Patients)			
Adult Medical-Surgical	9.7	9.3	1.03
Obstetrics	1.5	1.5	1.02
Pediatrics	0.0	0.0	N/A
Total Hospital	19.0	18.8	1.01
Average Length of Stay (Days)			
Adult Medical-Surgical	2.2	3.0	0.72
Obstetrics	2.7	2.4	1.11
Pediatrics	0.0	0.0	N/A
Total Hospital	3.3	3.8	0.87
Surgical Operations			
Inpatient	499	185	2.70
Outpatient	1,619	2,455	0.66
Inpatient as % of All Surgeries	23.6%	7.0%	3.36
Outpatient Visits			
Non-Emergency Visits	6,364	7,318	0.87

For frequently asked questions about this report, click here.

XI. ACTION EDITS

Provide an explanation for EACH Action Edit (formerly Stats Edits) that appears on this page. Each hospital must provide explanations before submitting the affirmation. Email explanations are no longer accepted. All data submitted must go through this electronic process.



Pay close attention to the percent change and the trend lines. Edits shown here have a significant variance from the previous year's data.

Affirmation Summary Data
FY Summary Report
[Action Edits](#)
Sign & Submit Affirmation
Download / Reopen Surveys
Cancel

2019 Survey Affirmation

The following action edits were marked as accurate at the completion of your survey. An explanation and/or reasoning is required in the space provided below for each questionable **Action Edit** in order to complete submission of the electronic affirmation statement.

If you would like to review the **Action Edits** in the survey and/or make any necessary changes, see the left tool bar "Download/Reopen Surveys". If changes are needed, the survey must be reopened. Once changes are made you will be required to go through the edit process and resubmit the survey in order to regenerate a new Affirmation Statement.

Question	Survey	2019	2018	% Change	2017	Trend
147 - TOTAL surgical operations (not procedures) [line 145 + line 146]	ANNUAL	1,132	1,943	-42%	2,213	
Enter Explanation:						
156 - Total births (exclude fetal deaths)	ANNUAL	158	345	-54%	364	
Enter Explanation:						

[Next](#)

XII.SIGN AND SUBMIT AFFIRMATION

The designated primary contacts and/or the person(s) responsible for affirming the correctness of the data should submit the affirmation statement. Additional comments are not required, but is an opportunity to share further information (ie: explanation of variances in the Affirmation Summary Data).

Home	File Downloads	File Administration	Provider Based Locations	Data Affirmations	Survey Affirmations and Schedule C
----------------------	--------------------------------	-------------------------------------	--	-----------------------------------	--

[Affirmation Summary Data](#)
[FYE Summary Report](#)
[Action Edits](#)
[Sign & Submit Affirmation](#)
[Download / Reopen Surveys](#)
[Cancel](#)

2018 Survey Affirmation

The electronic signature on this affidavit affirms that the chief executive officer, administrator, or designee have reviewed the following data as presented from the surveys submitted by ThedaCare Regional Medical Center - Appleton, Inc. in Appleton.

- Affirmation Summary Data
- FYE Summary Report
- Any Applicable Action Edits

This is a legally binding equivalent of the individual's handwritten signature as per [DHS 120.12](#).

I HEREBY ATTEST, that I or my designated representative, to the best of my knowledge, reviewed and verified internally the data that was submitted to WHA Information Center and the data is accurate.

Provide e-signature for the Electronic Survey Affirmation Statement

Suzanne Staudenmayer
Name of person submitting the Electronic Survey Affirmation Statement

Provide additional comments as needed:

[Submit Survey Affirmation Statement](#)

[Download Affirmation Statement Printable PDF](#)

Submit the affirmation statement when complete and then **download a copy for your records.**

Home File Downloads File Administration Provider Based Locations Data Affirmations Survey Affirmations and Schedule C

Affirmation Summary Data
FYE Summary Report
Action Edits
[Sign & Submit Affirmation](#)
Download / Reopen Surveys
Cancel

2018 Survey Affirmation

The electronic signature on this affidavit affirms that the chief executive officer, administrator, or designee have reviewed the following data as presented from the surveys submitted by ThedaCare Regional Medical Center - Appleton, Inc. in Appleton.

- Affirmation Summary Data
- FYE Summary Report
- Any Applicable Action Edits

This is a legally binding equivalent of the individual's handwritten signature as per [DHS 120.12](#).

I HEREBY ATTEST, that I or my designated representative, to the best of my knowledge, reviewed and verified internally the data that was submitted to WHA Information Center and the data is accurate.

Provide e-signature for the Electronic Survey Affirmation Statement

Suzanne Staudenmayer
Name of person submitting the Electronic Survey Affirmation Statement

Provide additional comments as needed:

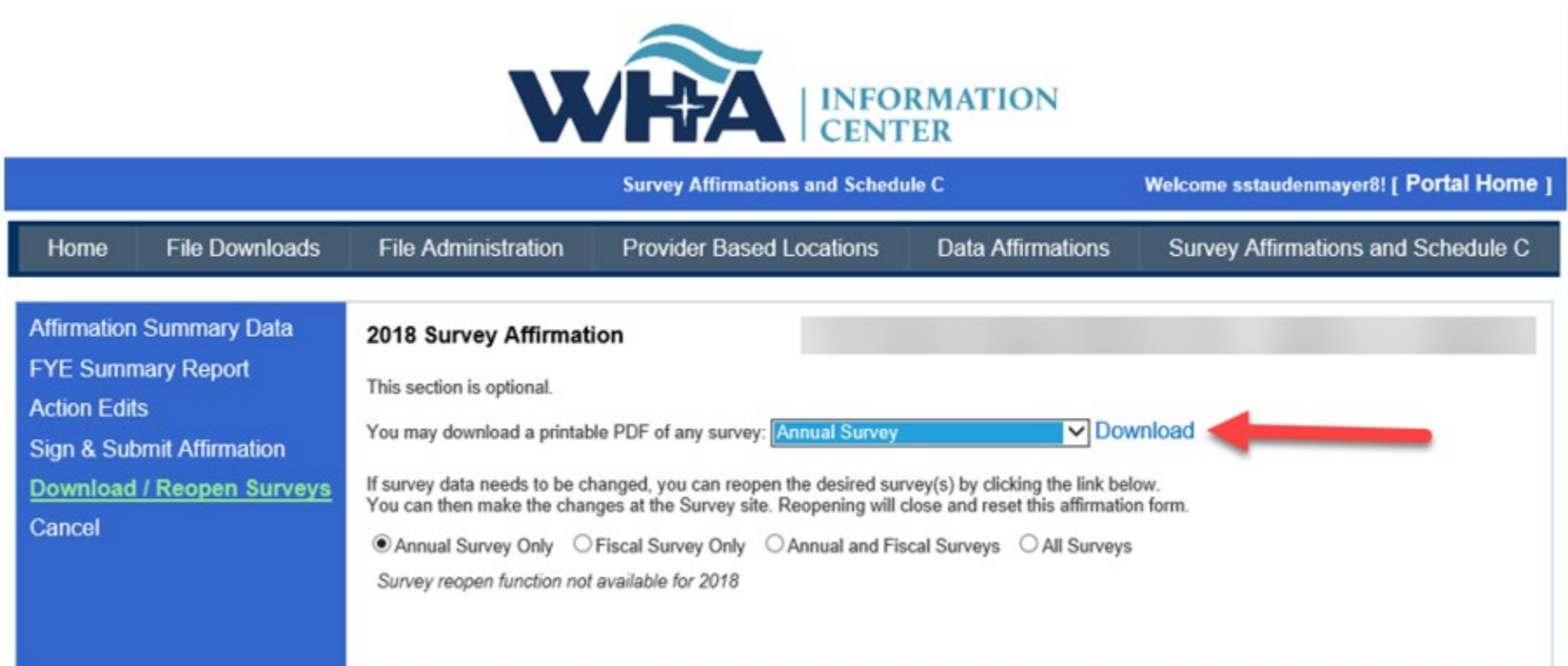
Submit when complete

Submit Survey Affirmation Statement

Download Affirmation Statement Printable PDF

XIII.DOWNLOADING SURVEYS FROM AFFIRMATION

Hospitals should download and save a copy of their surveys from the application or from the Download/Reopen Surveys link in the affirmation statement.



The screenshot displays the WHA Information Center interface. At the top, the logo for WHA (Western Health Assurance) and INFORMATION CENTER is visible. Below the logo, a navigation bar contains the text "Survey Affirmations and Schedule C" and a user greeting "Welcome sstaudenmayer8! [Portal Home]". A secondary navigation bar includes links for "Home", "File Downloads", "File Administration", "Provider Based Locations", "Data Affirmations", and "Survey Affirmations and Schedule C".


The main content area is titled "2018 Survey Affirmation". It includes a sidebar on the left with the following menu items: "Affirmation Summary Data", "FYE Summary Report", "Action Edits", "Sign & Submit Affirmation", "Download / Reopen Surveys" (highlighted in green), and "Cancel".

The main content area contains the following text and controls:

- 2018 Survey Affirmation**
- This section is optional.
- You may download a printable PDF of any survey: Annual Survey (A red arrow points to this button)
- If survey data needs to be changed, you can reopen the desired survey(s) by clicking the link below. You can then make the changes at the Survey site. Reopening will close and reset this affirmation form.
- Annual Survey Only Fiscal Survey Only Annual and Fiscal Surveys All Surveys
- Survey reopen function not available for 2018*

XIV. UPLOADING MEDICARE COST REPORT SCHEDULE C

Hospitals must upload a copy of their Medicare Cost Report Schedule C.



Survey Affirmations and Schedule C
Welcome sstaudenmayer8! [Portal Home]

Home
File Downloads
File Administration
Provider Based Locations
Data Affirmations
Survey Affirmations and Schedule C

Survey Affirmations and Schedule C Filter for Year: 2018 ▼

[Definitions and Frequently Asked Questions](#)

Select	ID	Facility	Year	FYE	Submitted	Approved By	Schedule C	Validated
Download	000	Wisconsin Hospital Association (Madison)	2018	12/31	7/23/2019	ttt	Yes	<input checked="" type="checkbox"/>
Complete Affirmation	001	Amery Regional Medical Center (Amery)	2018	12/31	No		No Upload	<input type="checkbox"/>
Complete Affirmation	002	Aspirus Langlade Hospital (Antigo)	2018	06/30	No		No Upload	<input type="checkbox"/>
Complete Affirmation	003	ThedaCare Regional Medical Center - Appleton, Inc. (Appleton)	2018	12/31	No		No Upload	<input type="checkbox"/>
Complete Affirmation	004	Ascension St. Elizabeth Hospital, Inc. (Appleton)	2018	06/30	No		No Upload	<input type="checkbox"/>
Complete Affirmation	006	Memorial Medical Center (Ashland)	2018	09/30	No		No Upload	<input type="checkbox"/>
Complete Affirmation	007	Western Wisconsin Health (Baldwin)	2018	09/30	No		No Upload	<input type="checkbox"/>
Complete Affirmation	008	St Clare Hospital & Health Services (Baraboo)	2018	12/31	No		No Upload	<input type="checkbox"/>
Complete Affirmation	009	Mayo Clinic Health System – Northland in Barron (Barron)	2018	12/31	No		Yes Upload	<input type="checkbox"/>
Complete Affirmation	010	Beaver Dam Community Hospitals Inc (Beaver Dam)	2018	06/30	No		No Upload	<input type="checkbox"/>

WHAIC does not need the entire copy of your Medicare Cost Report, we just need the Schedule C which is typically 2-6 pages and looks like the example on the following page.

COMPUTATION OF RATIO OF COST TO CHARGES

WORKSHEET C
PART I

	COST CENTER DESCRIPTIONS	CHARGES			Cost or Other Ratio	TEFRA Inpatient Ratio	PPS Inpatient Ratio	
		Inpatient	Outpatient	Total (column 6 + column 7)				
		6	7	8	9	10	11	
	INPATIENT ROUTINE SERVICE COST CENTERS							
30	Adults & Pediatrics							
	ANCILLARY SERVICE COST CENTERS							
62.30	BLOOD CLOTTING FOR HEMOPHILIACS							
76	UNBUNDLING							
76.97	CARDIAC REHABILITATION							
76.98	HYPERBARIC OXYGEN THERAPY							
76.99	LITHOTRIPSY							
	OUTPATIENT SERVICE COST CENTERS							
90.02	ADULT OUTPATIENT							
90.04	CATC IN-HOME, DAY TRMNT & OP							
91	Emergency							
92	Observation Beds (Non-Distinct Part)							
92.01	OBSERVATION BEDS-DISTINCT							
	OTHER REIMBURSABLE COST CENTERS							
200	Subtotal (sum of lines 30 thru 199)							
201	Less Observation Beds							
202	Total (line 200 minus line 201)							