



GEORGIA DEPARTMENT OF
COMMUNITY HEALTH

Hospital Add-on Payments Communication Guide 9/20/10

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Hospital Add-on Payments

As a result of the State Appropriations Act for State Fiscal Year (SFY) 11 (HB 948), the Department of Community Health (DCH), through the Fee-for-Service (FFS) and Care Management Organizations (CMOs), are to pay eligible hospitals an additional 11.88% on hospital inpatient and outpatient claims with dates of service in SFY 2011. DCH has submitted the provider fee waiver application and State Plan Amendments (SPAs) for outpatient and inpatient hospital services to CMS for approval. Once testing has been completed, we anticipate that FFS Medicaid and the CMOs will process claims with add-on payments on the next weekly payment cycle after CMS notice of approval of the two SPAs and the provider fee waiver application.

In preparation for the hospital add-on payments, DCH meets regularly with ACS and the CMOs regarding add-on requirements for fee-for-service and managed care claims processing. During these meetings, DCH is addressing hospital questions and any outstanding processing issues. To prevent confusion about the add-on payments, DCH is providing fee-for-service and managed care claims information below, which includes the:

- Anticipated add-on payment time frames
- fee-for-service and managed care rules for claims processing with the add-on payments; and
- reporting requirements.

1. Time Frames

After receipt of CMS approval of the provider fee waiver application and SPAs, DCH's objective is to have the MMIS and the CMOs begin making add-on payments as quickly as is practical after internal testing is completed. FFS Medicaid and the CMOs may cutover to the add-on payments on different dates depending on systems' readiness.

Note: All changes in claims payment and reporting will only apply to eligible inpatient hospital and outpatient hospital claims with dates of service on or after 07/01/2010.

1.1. *CMOs*

Pending CMS approval and system testing, CMOs have indicated that they will be prepared to make add-on payments to eligible hospitals on or about 9/7/10. Please note that the CMOs' normal payment cycles will apply.

1.2. *Fee-for-Service*

Upon CMS approval as referenced above, ACS will begin making add-on payments to fee-for-service claims on the next weekly payment cycle.

1.3. *Retroactive Mass Claims Adjustments*

- Given the implementation of the add-on payment change after 7/1/10, CMOs will be required to make retroactive mass adjustments for dates of service 7/1/10 through the date the add-on payment was instituted. The goal is to have all CMO mass adjustments completed by 9/22/10. Hospitals will receive payments in the next payment cycle after the adjustments are made.
 - **Note:** The Georgia Office of Insurance and Safety Fire Commissioner has agreed that interest penalties under Georgia's Prompt Pay law will not apply to the retroactive mass adjustments made by the CMOs as referenced above.
- ACS will complete mass adjustments for fee-for-service claims as soon as practical after completion of the first successful provider fee increase processing cycle.

Note: To the extent possible, DCH, ACS and the CMOs are committed to having add-on payments to eligible hospitals before the 9/30/10 premium fee deadline. However, these time frames do not allow a reasonable time period for hospitals, ACS and the CMOs to reconcile any of the add-on payments before 9/30/10. DCH recommends that all parties work together to address any questions or concerns during the first few weeks in October 2010 before beginning the payment appeal process. DCH will work with the hospitals, ACS and the CMOs in the timely resolution of concerns and providing additional clarification as needed.

2. CMO Requirements

As required by the State Appropriations Act for State Fiscal Year (SFY) FY11 (HB 948), the CMOs are to pay an additional 11.88% on hospital inpatient and outpatient claims with dates of service in SFY 2011 at eligible hospitals. DCH will adjust CMO capitation to account for the hospital add-on payments. The details on the eligible providers/services, claims logic and encounter submission for these add-on payments are described in detail below.

2.1. *Eligible Providers and Services*

- CMOs will use the non-exempt hospital list*, place of service codes (Inpatient-21, Outpatient-22 and Emergency Room-Hospital-23) and bill type to make the add-on payment determination
 - **Note:** The inclusion/exclusion status of the hospital determines whether a service is subject to the hospital add-on payment, not the nature of the service
- Services eligible for hospital add-on payments are those rendered by an eligible hospital, including but not limited to:
 - ER payments, including triage payments
 - Lab services or injectibles (inpatient and outpatient)

- Capitol add-on payments for inpatient services
- For inpatient claims, the new add-on payment logic applies to claims with an initial admission date on or after July 01, 2010
- For outpatient claims, the add-on payments apply to claims with dates of service on or after July 01, 2010
- If a CMO has approved payment to a non-participating in-state hospital that is included on the non-exempt hospital list, the hospital add-on payment applies
- If a CMO has a “premium” rate arrangements with an eligible hospital where reimbursement is higher than Medicaid (e.g., 105% of Medicaid), the add-on payment should be based on the CMO’s contracted rate with the hospital instead of the actual Medicaid rate
- If a patient is admitted to a psychiatric bed in an eligible hospital or if a mixed protocol admission occurs at an eligible hospital, the add-on payment applies. The CMO and/or BH subcontractor would be responsible for the add-on payment.
- If services are rendered by a psychiatric/Behavioral Health (BH) hospital, the hospital add-on payment does not apply regardless of whether both BH and medical services were provided (mixed protocol).
 - **Note:** Psych/BH facilities, including Psychiatric Residential Treatment Facilities (PRTFS), are excluded from the hospital add-on payments.
- Therapy services rendered by eligible hospitals (e.g., behavioral health, speech, occupational, and physical therapies) are subject to add-on payments

*** See Appendix A for a list of the exempt and non-exempt hospitals**

2.2. CMO Claims

- The hospital add-on percentage is 11.88% and should be the final add-on in the adjudication sequence, except when interest payments for late claims payment apply
 - In the event a CMO must make an interest payment for late claims payment under GA’s Prompt Pay law, the hospital add-on percentage should be made before the interest penalty calculation
- If the CMO uses lesser of logic for certain claims, the payment for the add-on must in all cases be an additional 11.88%, even if the total payment exceeds the provider’s charge. An example:
 - Billed charge: \$102.00
 - Contracted rate payment: \$100.00
 - Payment: \$100 plus an \$11.88 add-on payment

Total payment: \$111.88 (even though the total payment exceeds the \$102.00 charge)

- For claims payments associated with an outpatient max, the add-on payment can cause the total payment to exceed the outpatient max as follows:

Billed Charge: \$5,000

CCR: 50%

Outpatient max: \$500

Payment is \$500 (the lesser of 50% of the charge or the outpatient max)

Add-on payment = \$59.40 (if payment is calculated at the outpatient max, the add-on payment should be added to the outpatient max)

Total Payment: \$559.40

- For stop-loss, the stop-loss amount should be addressed first and then the 11.88% add-on payment. When following DCH's outlier logic, the formula is as follows:

Outlier Payment = [(Eligible Charges x Hospital-specific inpatient cost to charge ratio) – DRG payment rate] x 89.3%

Add-on Payment = **Outlier Payment** x 11.88%

The **Outlier Payment** amount does not change from what it would have been calculated as before implementation of the hospital add-on payment.

- For claims with TPL, the base rate on a claim should be increased by the add-on payment amount (new allowed charge). This new amount should then be decreased by any TPL amounts. The example below demonstrates the calculation:

Base Rate + Add-on Percentage – TPL amounts = Allowed Charge

Example:

Base Rate = \$90.00

Hospital Add-on Payment = (\$90 x 11.88%) = \$10.69

TPL Amount = \$30.00

Calculation

(\$90 + \$10.69) - \$30 = \$70.69

- The CMO's Remittance Advice or Explanation of Payment must be amended to separately report the additional add-on dollar amount paid

2.3. Medicare Crossover claims

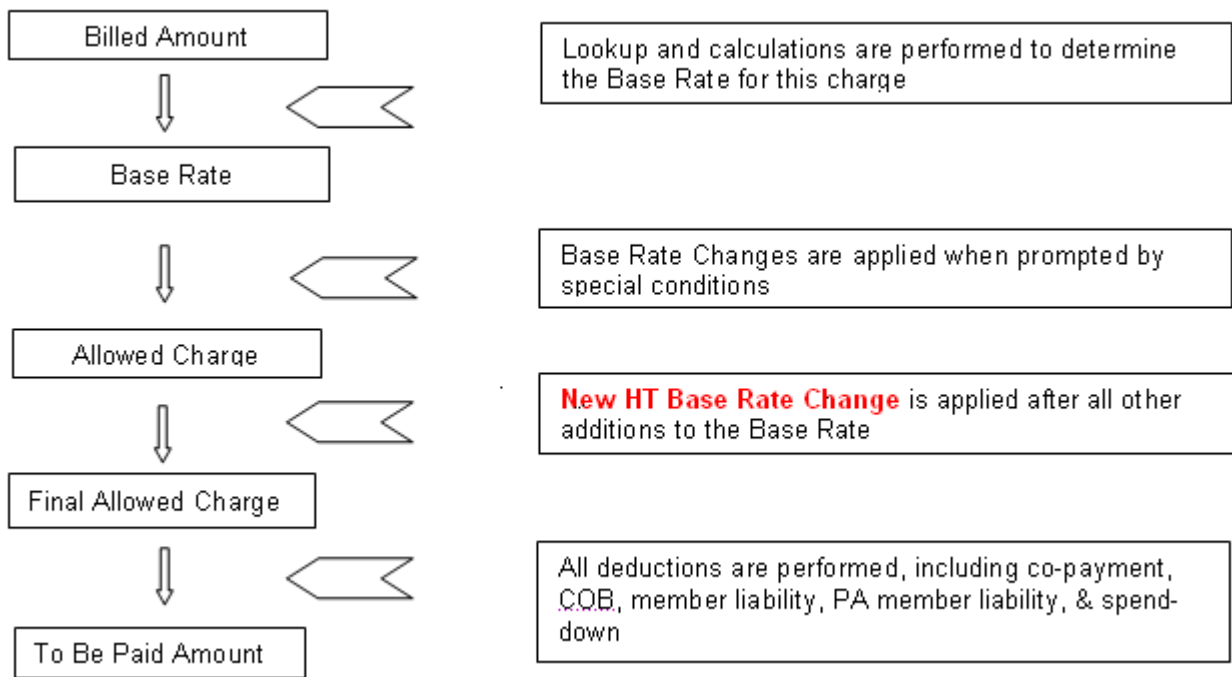
Medicare Crossover claims are not applicable for CMOs.

3. Fee for Service Requirements

In order to partially offset the hospital fee (1.45% or 1.4% depending on trauma care designation of hospital) levied by Georgia HB 1055, a new Base Rate Change will be created. This new base rate change will be a multiplier, which will be expressed as a constant percentage of the Allowed Charge. There will be three different values for this Base Rate Change. One will be used for Inpatient Medicare Crossover claims. The second will apply to Outpatient Medicare Crossover claims. The Third will apply to non-Crossover Hospital claims. Three new system parameters will be created to store these percentages.

When calculating the Final Allowed Charge, the addition of this new Base Rate Change will be the final step before any cutbacks are considered. The dollar amount will be calculated as a percentage (stored in the new System Parameter) of the Allowed Charge at that point in adjudication.

PROCESS:



4. Reporting

4.1. CMOs

- CMOs are required to modify the Remittance Advice (RA) or Explanation of Payment (EOP) to distinguish add-on payments from the base payment. Peach State Health Plan and WellCare of Georgia will have the RA or EOP modified when the cutover for

add-on payments occurs on 9/7/10: The modified language on the RA or EOP is as follows:

- Peach State: “add'l pymt”
 - WellCare: “Add-on”
 - Amerigroup (when available): “Reimbursement includes GA Add-On Payment”
- Until Amerigroup is able to provide the add-on payment information in a RA, hospitals will receive a weekly Hospital Add-on Payment Report. The report template is attached. **Note:** Amerigroup anticipates having a modified RA in mid-October; the weekly reports will stop once the modified RA is available.
 - The weekly Hospital Add-on Payment Report will include payment information through each Friday and must be submitted to hospitals on the following Monday
 - Amerigroup will communicate the process for retrieving the Hospital Add-on Payment Reports
 - CMOs are not required to change HS & R Reports
 - CMOs must provide DCH a monthly Hospital Add-on Payment Report Summary (the timing TBD)

4.2. Fee-for Service

- The new Base Rate Change will be the final add-on in the Base Rate Change hierarchy
- This new Base Rate Change will be a multiplier of the Allowed Charge
- This value will be read from a new System Parameter
- This new System parameter will equal .1188. This is subject to change before this logic is introduced into Production.
- The additional amount allowed will be identified by Base Rate Change Code “HT”
- The new “HT” Base Rate Change Code will need to be added to the Valid Values tables
- The additional amount allowed will be identified as the Base Rate Change Amount
- Since none of the cutbacks applied to the Final Allowed Charge are proportional to either the Billed or Allowed amount, the dollar amount added by the new base Rate Change will be equal to dollar amount added to the Paid Amount
- The additional dollar amount paid will be assigned Adjustment Reason Code “172”
- The additional dollar amount paid will be assigned Adjust Reason Type “CO”
- The Remittance Advice will report the additional dollar amount paid (add-on) using current base rate change format.

5. CMO Contacts

Each CMO has designated a contact for any questions related to the hospital add-on payments:

Amerigroup

Josh J. Holte
AVP, Health Plan Operations
Phone: 678.587.4841
Email: jholte1@amerigroupcorp.com

Peach State Health Plan

Atlanta Region
Kimberly Weakly-Regional Director
Phone: 678-556-2442
KWEAKLEY@CENTENE.COM

Central
Melissa Nichols-Regional Manager
Phone: 478-738-8540
MNICHOLS@CENTENE.COM

Southwest
Marty Fallon-Regional Director
Phone: 229-430-5829
MFALLON@CENTENE.COM

WellCare of Georgia

Michael Minor
Division COO
WellCare of Georgia
Phone: 404-232-5071
Michael.Minor@wellcare.com

APPENDIX A: List of Exempt and Non-Exempt Facilities

Medicare #	Medicaid #	UID	Hospital Name	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)
				Yes	No	Yes	No	Yes	No	No
				CAH	Trauma	Public/ Non-Public	Public - DSH	Psychiatric	Specialty	Other
114032		HOSP375	ANCHOR HOSPITAL					Psych		
110071	000000052A	HOSP301	APPLING GENERAL HOSPITAL				Public			
110074	000000074A	HOSP603	ATHENS REGIONAL MEDICAL CENTER		2		Public			
110115	000000789A	HOSP709	ATLANTA MEDICAL CENTER		2					
111327	000000118A	HOSP302	BACON COUNTY HOSPITAL	CAH			Public			
110045	000002098A	HOSP303	BARROW REGIONAL MEDICAL CENTER							Other
110112	000000173A	HOSP445	BERRIEN COUNTY HOSPITAL							Other
110040	000000151A	HOSP440	BJC MEDICAL CENTER				Public			
111302	000000195A	HOSP452	BLECKLEY MEMORIAL HOSPITAL	CAH			Public			
111332	000000239A	HOSP305	BROOKS COUNTY HOSPITAL	CAH			Public			
110113	000000283A	HOSP306	BURKE MEDICAL CENTER				Public			
111309	000000305A	HOSP203	CALHOUN MEMORIAL HOSPITAL	CAH			Public			
110146	000000811A	HOSP441	CAMDEN MEDICAL CENTER				Public			
111334	000000316A	HOSP209	CANDLER COUNTY HOSPITAL	CAH			Public			
110024	000000327A	HOSP626	CANDLER HOSPITAL INC							Other
110030	000001625A	HOSP542	CARTERSVILLE MEDICAL CENTER							Other
113029		HOSP731	CENTRAL GEORGIA REHAB HOSPITAL				Public		Specialty	
111315	000000338A	HOSP234	CHARLTON MEMORIAL HOSPITAL	CAH			Public			
111324	000001933A	HOSP229	CHATUGE REGIONAL HOSPITAL	CAH			Public			
110187	000081232A	HOSP404	CHESTATEE REGIONAL HOSPITAL							Other
113300	000000943A	HOSP416	CHILDRENS HEALTHCARE EGLESTON		2					
	000679808A	HOSP612	CHILDREN'S HEALTHCARE OF ATLANTA AT HUGHES SPALDING							Other
113301	000001636A	HOSP518	CHILDRENS HEALTHCARE SCOTTISH RITE		2					
111308	000000415A	HOSP347	CLINCH MEMORIAL HOSPITAL	CAH			Public			
		HOSP910	COASTAL BEHAVIORAL HEALTH					Psych		
		HOSP550	COASTAL HARBOR TREATMENT CENTER					Psych		
110143	000000426A	HOSP546	COBB HOSPITAL AND MEDICAL CENTER				Public			

Medicare #	Medicaid #	UID	Hospital Name	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)
				Yes	No	Yes	No	Yes	No	No
				CAH	Trauma	Public/ Non-Public	Public - DSH	Psychiatric	Specialty	Other
110027	000000437A	HOSP211	COBB MEMORIAL HOSPITAL							Other
110089	000000448A	HOSP406	COFFEE REGIONAL HOSPITAL				Public			
110164	000000459A	HOSP636	COLISEUM MEDICAL CENTERS							Other
110201	000295358A	HOSP266	COLISEUM NORTHSIDE HOSPITAL							Other
114015		HOSP675	COLISEUM PSYCHIATRIC CENTER					Psych		
110105	000002021A	HOSP524	COLQUITT REGIONAL MEDICAL CENTER				Public			
112012		HOSP704-S	COLUMBUS SPECIALTY HOSPITAL						Specialty	
110104	000000514A	HOSP405	CRISP REGIONAL HOSPITAL				Public			
112006	000000525A	HOSP552	DECATUR HOSPITAL						Specialty	
110076	000000536A	HOSP720	DEKALB MEDICAL CENTER				Public			
110226	000000536U	HOSP902	DEKALB MEDICAL CENTER HILLANDALE				Public			
110177	000000558A	HOSP726	DOCTORS HOSPITAL OF AUGUSTA							Other
110186	000148233A	HOSP724	DOCTORS HOSPITAL OF COLUMBUS				Public			
111323	000001878A	HOSP460	DOCTORS HOSPITAL OF TATTNALL	CAH						
110092	000000591A	HOSP309	DODGE COUNTY HOSPITAL				Public			
110194	000206181A	HOSP310	DONALSONVILLE HOSPITAL							Other
110073	000000613A	HOSP501	DORMINY MEDICAL CENTER				Public			
110184	000000624A	HOSP312	DOUGLAS HOSPITAL				Public			
111314	000000635A	HOSP357	EARLY MEMORIAL HOSPITAL	CAH			Public			
110075	000000272A	HOSP502	EAST GEORGIA REGIONAL MEDICAL CTR							Other
111306	000000657A	HOSP454	EFFINGHAM HOSPITAL	CAH			Public			
110026	000000668A	HOSP407	ELBERT MEMORIAL HOSPITAL				Public			
110109	000000701A	HOSP408	EMANUEL MEDICAL CENTER				Public			
110078	000000503A	HOSP705	EMORY CRAWFORD LONG HOSPITAL							Other
110192	000190088A	HOSP534	EMORY EASTSIDE MEDICAL CENTER							Other
110230	344886600A	HOSP901	EMORY JOHNS CREEK HOSPITAL							Other
110010	000000712A	HOSP706	EMORY UNIVERSITY HOSPITAL							Other
110183	000001702A	HOSP641	EMORY-ADVENTIST HOSPITAL							Other
110142	000000734A	HOSP448	EVANS MEMORIAL HOSPITAL				Public			
110125	000001141A	HOSP510	FAIRVIEW PARK HOSPITAL							Other

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				Yes	No	Yes	No	Yes	No	No
				CAH	Trauma	Public/ Non-Public	Public - DSH	Psychiatric	Specialty	Other
110189	000134406A	HOSP413	FANNIN REGIONAL HOSPITAL							Other
110190	000149487A	HOSP329	FLINT RIVER HOSPITAL							Other
110054	000000756A	HOSP606	FLOYD MEDICAL CENTER		2		Public			
113026	000368387A	HOSP730	GEORGIA REHABILITATION HOSPITAL						Specialty	
110023	000000833A	HOSP412	GORDON HOSPITAL							Other
110121	000000844A	HOSP351	GRADY GENERAL HOSPITAL				Public			
110079	000000855A	HOSP710	GRADY MEMORIAL HOSPITAL		1		Public			
110087	000000294A	HOSP366	GWINNETT MEDICAL CENTER		2		Public			
	000001064A	HOSP226	GWINNETT MEDICAL CENTER - DULUTH				Public			
110041	000000877A	HOSP414	HABERSHAM COUNTY MEDICAL CENTER				Public			
110001	000000899A	HOSP415	HAMILTON MEDICAL CENTER		2					
110059	000000921A	HOSP245	HART COUNTY HOSPITAL				Public			
110191	000182388A	HOSP532	HENRY MEDICAL CENTER				Public			
111320	000000954A	HOSP304	HIGGINS GENERAL HOSPITAL	CAH			Public			
		HOSP160	HILLSIDE HOSPITAL					Psych		
110069	000000976A	HOSP439	HOUSTON MEDICAL CENTER				Public			
110200	000315642A	HOSP125	HUGHSTON ORTHOPEDIC HOSPITAL				Public			
110004	000001075A	HOSP623	HUTCHESON MEDICAL CENTER INC				Public			
		HOSP642	INNER HARBOUR HOSPITAL					Psych		
110130	000000987A	HOSP314	IRWIN COUNTY				Public			
111303	000000998A	HOSP315	JASPER MEMORIAL HOSPITAL	CAH			Public			
111333	000001009A	HOSP442	JEFF DAVIS	CAH			Public			
110100	000001031A	HOSP417	JEFFERSON HOSPITAL				Public			
111311	000001042A	HOSP319	JENKINS COUNTY HOSPITAL	CAH			Public			
110038	000000063A	HOSP614	JOHN D. ARCHBOLD HOSPITAL		2					
110035	000001119A	HOSP615	KENNESTONE HOSPITAL				Public			
112007	000001999A	HOSP640	KENNESTONE HOSPITAL AT WINDY HILL						Specialty	
112004	000472513A	HOSP544	KINDRED HOSPITAL - ATLANTA						Specialty	
		HOSP909	LANDMARK HOSPITAL OF ATHENS					Psych		
		HOSP241	LAUREL HEIGHTS HOSPITAL					Psych		

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				Yes	No	Yes	No	Yes	No	No
				CAH	Trauma	Public/ Non-Public	Public - DSH	Psychiatric	Specialty	Other
111335	000001152A	HOSP355	LIBERTY REGIONAL MEDICAL CENTER	CAH			Public			
111326	000001163A	HOSP529	LOUIS SMITH MEMORIAL HOSPITAL	CAH			Public			
			LOWER OCONEE COMMUNITY HOSPITAL	CAH						
		HOSP903	MACON BEHAVIORAL HEALTH SYSTEM					Psych		
110111	000001185A	HOSP321	MCDUFFIE REGIONAL MEDICAL CENTER				Public			
110034	000000723A	HOSP719	MCG MEDICAL CENTER		1	Exclude				
110128	000001086A	HOSP443	MEADOWS REGIONAL MEDICAL CENTER				Public			
110107	000001207A	HOSP712	MEDICAL CENTER OF CENTRAL GEORGIA		1		Public			
110036	000001273A	HOSP703	MEMORIAL HEALTH UNIV. MEDICAL CENTER		1		Public			
110132	000001262A	HOSP539	MEMORIAL HOSPITAL				Public			
110101	000001251A	HOSP317	MEMORIAL HOSPITAL OF ADEL						Other	
111305	000001317A	HOSP348	MILLER COUNTY HOSPITAL	CAH			Public			
111331	000001339A	HOSP421	MITCHELL COUNTY HOSPITAL	CAH			Public			
111318	000001361A	HOSP345	MONROE COUNTY HOSPITAL	CAH			Public			
111304	000694229A	HOSP352	MORGAN MEMORIAL HOSPITAL	CAH	4		Public			
111336	000001559A	HOSP239	MOUNTAIN LAKES MEDICAL CENTER	CAH						
110050	000001383A	HOSP320	MURRAY MEDICAL CENTER				Public			
110018	000001394A	HOSP322	NEWTON MEDICAL CENTER				Public			
110198	000275976A	HOSP327	NORTH FULTON REGIONAL HOSPITAL		2					
110205	000002043A	Hosp341	NORTH GEORGIA MEDICAL CENTER						Other	
110029	000000888A	HOSP611	NORTHEAST GEORGIA MEDICAL CENTER				Public			
110005	000000767A	HOSP346	NORTHSIDE FORSYTH						Other	
110161	000001405A	HOSP634	NORTHSIDE HOSPITAL				Public			
110008	000001108A	HOSP541	NORTHSIDE HOSPITAL-CHEROKEE INC.				Public			
110150	000000129A	HOSP528	OCONEE REGIONAL MEDICAL CENTER				Public			
110163	000001416A	HOSP635	PALMYRA MEDICAL CENTERS						Other	
110042	000001438A	HOSP151	PAULDING MEDICAL CENTER				Public			
111310	000001449A	HOSP323	PEACH REGIONAL MEDICAL CENTER	CAH			Public			
114010		HOSP601	PEACHFORD					Psych		
110153	000001471A	HOSP450	PERRY HOSPITAL				Public			

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				Yes	No	Yes	No	Yes	No	No
				CAH	Trauma	Public/Non-Public	Public - DSH	Psychiatric	Specialty	Other
110007	000001482A	HOSP616	PHOEBE PUTNEY MEMORIAL HOSPITAL				Public			
111328	000002109A	HOSP343	PHOEBE WORTH MEDICAL CENTER	CAH						
10,215	00755323A	HOSP318	PIEDMONT FAYETTE HOSPITAL INC.				Public			
110083	000001504A	HOSP617	PIEDMONT HOSPITAL INC.						Other	
110225	000001493A	HOSP451	PIEDMONT MOUNTAINSIDE HOSPITAL INC.						Other	
110229	000000492A	HOSP629	PIEDMONT NEWNAN HOSPITAL INC.						Other	
111330	000001526A	HOSP427	POLK MEDICAL CENTER	CAH			Public			
111313	000001537A	HOSP227	PUTNAM GENERAL HOSPITAL	CAH			Public			
110168	000001581A	HOSP637	REDMOND REGIONAL MEDICAL CENTER						Other	
112016		HOSP712-S	REGENCY HOSPITAL OF MACON						Specialty	
112014		HOSP630-S	REGENCY HOSPITAL OF SOUTH ATLANTA						Specialty	
114012		HOSP604	RIDGEVIEW INSTITUTE					Psych		
114035		HOSP912	RIVERWOODS BEHAVIORAL HEALTH					Psych		
110091	000001603A	HOSP240	ROCKDALE MEDICAL CENTER							
112000		HOSP905	ROOSEVELT WARM SPRINGS LTAC HOSPITAL			Exclude			Specialty	
113028	000000778A	HOSP610	ROOSEVELT WARM SPRINGS REHAB HOSP			Exclude			Specialty	
110129	000001768A	HOSP619	SAINT FRANCIS						Other	
110082	000001812A	HOSP714	SAINT JOSEPH'S ATLANTA						Other	
110006	000001823A	HOSP622	SAINT MARY'S						Other	
110003	000001229A	HOSP627	SATILLA REGIONAL						Other	
111312	000001647A	HOSP332	SCREVEN COUNTY HOSPITAL	CAH			Public			
112003	000248069A	HOSP228	SHEPHERD CENTER						Specialty	
110212	000001691A	HOSP333	SMITH NORTHVIEW						Other	
110219	000001713A	HOSP630	SOUTH FULTON MEDICAL CENTER						Other	
110122	000001724A	HOSP618	SOUTH GEORGIA MEDICAL CENTER				Public			
110025	000000822A	HOSP507	SOUTHEAST GEORGIA HEALTH SYSTEM				Public			
112015		HOSP547-S	SOUTHERN CRESCENT HOSPITAL						Specialty	
110165	000000404A	HOSP547	SOUTHERN REGIONAL MEDICAL CENTER				Public			
111300	000001427A	HOSP426	SOUTHWEST GEORGIA REGIONAL MEDICAL CTR.	CAH			Public			

Medicare #	Medicaid #	UID	Hospital Name	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)	Exclude (Yes/No)
				Yes	No	Yes	No	Yes	No	No
				CAH	Trauma	Public/ Non-Public	Public - DSH	Psychiatric	Specialty	Other
110031	000000866A	HOSP508	SPALDING REGIONAL HOSPITAL						Other	
112009		HOSP705-S	SSH - ATLANTA						Specialty	
112013		HOSP904	SSH - AUGUSTA INC						Specialty	
112011		HOSP626-S	SSH - SAVANNAH						Specialty	
111329	000001328A	HOSP420	ST JOSEPH AT EAST GEORGIA	CAH						
110043	000001801A	HOSP621	ST. JOSEPH S HOSPITAL INC						Other	
114016		HOSP235	ST. SIMONS-BY-THE-SEA					Psych		
110032	000001834A	HOSP545	STEPHENS COUNTY						Other	
			STEWART WEBSTER HOSPITAL	CAH						
110044	000000019A	HOSP602	SUMTER REGIONAL HOSPITAL				Public			
111319	000001856A	HOSP356	SYLVAN GROVE HOSPITAL	CAH			Public			
110011	000001867A	HOSP435	TANNER MEDICAL CENTER				Public			
110015	000002032A	HOSP244	TANNER MEDICAL CENTER-VILLA RICA				Public			
110135	000001548A	HOSP519	TAYLOR REGIONAL HOSPITAL						Other	
110064	000001196A	HOSP704	THE MEDICAL CENTER INC.		2		Public			
112010		HOSP907	THE SPECIALTY HOSPITAL						Specialty	
110095	000001922A	HOSP521	TIFT REGIONAL MEDICAL CENTER				Public			
110039	000001779A	HOSP620	TRINITY HOSPITAL OF AUGUSTA						Other	
110209		HOSP568	TURNING POINT					Psych		
110051	000001966A	HOSP248	UNION GENERAL						Other	
110028	000001977A	HOSP716	UNIVERSITY HEALTH SERVICES INC.				Public			
110002	000001988A	HOSP523	UPSON REGIONAL MEDICAL CENTER				Public			
110046	000020677A	HOSP340	WALTON REGIONAL MEDICAL CENTER		3					
111316	000001284A	HOSP349	WARM SPRINGS MEDICAL CENTER	CAH			Public			
110086	000001218A	HOSP540	WASHINGTON COUNTY REG MED CTR				Public			
110124	000002054A	HOSP538	WAYNE MEMORIAL HOSPITAL				Public			
110203	000339831A	HOSP288	WESLEY WOODS CENTER OF EMORY UNIV.						Other	
112005		HOSP288-S	WESLEY WOODS LONG TERM HOSPITAL						Specialty	
110016	000002065A	HOSP605	WEST GEORGIA MEDICAL CENTER				Public			
		HOSP342	WILDWOOD LIFESTYLE CENTER AND HOSPITAL						Other	

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				Yes	No	Yes	No	Yes	No	No
		HOSP363	WILLINGWAY HOSPITAL	CAH	Trauma	Public/ Non-Public	Public - DSH	Psychiatric	Specialty	Other
		HOSP526	WILLS HOSPITAL					Psych		
111325	000002087A	HOSP526	WILLS HOSPITAL	CAH			Public			