

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Wells/FOIA</i>	DATE <i>1-13-11</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>101205</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Singleton, Stensland Closed 1/13/11, see attached e-mail.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE <i>1-28-11</i> <input type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

Elizabeth Hutto - Fwd: Hospital Tax Calculation

From: Waldo C Hinson
To: Jeff Saxon
Date: 1/12/2011 4:40 PM
Subject: Fwd: Hospital Tax Calculation

>>> Weinmeyer Richard L <Richard.Weinmeyer@RoperSaintFrancis.com> 1/12/2011 9:09 AM >>>
Carl,

Based on the activity at the State Capital recently, can we get a copy of the calculation for assessing the hospital tax by facility for the entire State?

Thanks

Rick Weinmeyer
Sr Reimbursement Analyst
Roper-St. Francis Healthcare
Office (843) 789-1716
Fax (843) 402-5289

Our Mission: Healing all people with compassion, faith and excellence.

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipients and may contain confidential and/or legally privileged information. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message. Any unauthorized review, use, disclosure, or distribution is prohibited. Thank you.

Elizabeth Hutto - RE: Hospital Tax Calculation

From: Weinmeyer Richard L <Richard.Weinmeyer@RoperSaintFrancis.com>
To: 'Jeff Saxon' <Saxon@scdhhs.gov>
Date: 1/13/2011 6:12 AM
Subject: RE: Hospital Tax Calculation

Yes, please.

From: Jeff Saxon [mailto:Saxon@scdhhs.gov]
Sent: Wednesday, January 12, 2011 5:23 PM
To: Weinmeyer Richard L
Subject: Fwd: Hospital Tax Calculation

Richard:

I assume that you want the SFY 2011 tax calculation, correct?

Jeff Saxon
Bureau Chief
Bureau of Reimbursement Methodology & Policy
SCDHHS
Phone: 803.898.1040
Fax: 803.255.8228

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TO:

FROM:

SUBJECT: Cost of Processing FOIA Request #

The South Carolina Department of Health and Human Services has received and processed your FOIA request. The cost for processing this information is as follows:

Staff processing time at \$10.00 per hour	_____ Hours	\$_____
Pages copied at \$.10 per page	_____ Pages	\$_____
Pages faxed at \$.20 per page	_____ Pages	\$_____
Shipping and Handling Costs		\$_____
Other costs associated with the FOIA request:	_____	\$_____
Total Amount Due SCDHHS:		\$_____

Please remit the above amount to the following address:

Bureau of Fiscal Affairs
South Carolina Department of Health and Human Services
Post Office Box 8297
Columbia, South Carolina 29202-8297

Please contact _____ should you have any questions.

Signature _____

Date: _____

Log # 305

Elizabeth Hutto - Fwd: Re: Hospital Tax Calculation

From: Gina D Morris
To: Elizabeth Hutto
Date: 1/13/2011 12:56 PM
Subject: Fwd: Re: Hospital Tax Calculation
CC: Waldo C Hinson
Attachments: 2011 Hospital Tax Calculation.xlsx; FOIA - Susan Bowling, Kerr & Co

Faye,

Karen gave me 2 FOIA's today. They are numbers 242 & 305. I tracked them down and found out that Carl had supplied the requested information for both of them.

Below please see the email Carl sent to Richard Weinmeyer this morning. And I have attached scanned copies of the emails to and from Susan Bowling. Please let me know if you need anything additional.

>>> Waldo C Hinson 1/13/2011 12:20 PM >>>

>>> Waldo C Hinson 1/13/2011 11:39 AM >>>
 See Attached

>>> Weinmeyer Richard L <Richard.Weinmeyer@RoperSaintFrancis.com> 1/12/2011 9:09 AM >>>

Carl,
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Rick Weinmeyer
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South Carolina
Department of Health and Human Services
Bureau of Reimbursement Methodology and Policy
2011 Hospital Tax

EXCLUSIONS FROM HOSPITAL COST

	Notes	FYE	Cost Report B Part I Cost Line 96 Col 25	DME	Home Health	Skilled Nursing Facility	Other Long Term Care	Rural Health Clinic	Hospice	Diagnostic Center	Ambulance Services	Ambulatory Surgical Center	Area Under Construction (Line 94)	Adjusted Cost Report B Part I Cost
HOSPITAL		09/30/08	21,789,303	(184,340)	(4,671,554)									16,933,409
RS		12/31/08	123,822,329											123,822,329
AL HOSP		09/30/08	43,880,504			0								43,880,504
		09/30/08	9,684,464			(2,169,328)		(1,345,022)						6,170,114
		09/30/08	315,280,367		(4,780,548)									310,499,819
	(9)	XXXXXX												
HOSPITAL		09/30/08	26,891,857			(6,167,563)								20,724,294
		09/30/08	12,366,674											12,366,674
		09/30/08	113,751,402											113,751,402
R		12/31/08	107,358,277											107,358,277
		09/30/08	15,260,877											15,260,877
CTR		09/30/08	55,033,459											55,033,459
		06/30/08	24,712,328	(7,194)				(11,029,893)						13,675,241
		06/30/08	159,564,642		(3,988,891)	(2,363,338)			(774,961)					152,437,452
L	(2)	XXXXXX												0
ITER		09/30/08	24,445,564		(703,198)	(7,585,015)								16,157,351
L		02/28/08	20,528,090											20,528,090
		09/30/08	30,567,925		(918,905)			(2,158,039)						27,490,981
TER		12/31/08	27,138,858											27,138,858
		12/31/08	50,130,157							0		(1,744,497)		48,385,660
		09/30/08	100,474,471			(5,814,222)								94,660,249
CTR		12/31/08	78,121,186											78,121,186
		09/30/08	8,874,928											8,874,928
		09/30/08	11,687,498		(904,472)									10,783,026
AL		09/30/08	86,324,864											86,324,864
TR		04/30/08	133,155,938											133,155,938
CENTER		09/30/08	590,270,348		(4,019,774)	(2,456,724)								583,793,850
ENTER		09/30/08	12,865,594					(642,450)						12,223,144
		09/30/08	36,752,238											36,752,238
CTR		12/31/08	75,261,103											75,261,103
ER		09/30/08	82,008,146		(2,489,747)	(6,877,243)		(321,404)	(866,766)		(2,997,114)			68,455,872
		09/30/08	47,657,032			(1,845,419)								45,811,613
		09/30/08	256,902,261											256,902,261
RICT	(5)	09/30/08	72,529,590			(6,185,474)		(1,173,601)						65,170,515
		09/30/08	50,017,452			(5,871,444)		(1,572,276)						42,573,732
		04/30/08	17,490,392					(1,237,311)						16,253,081
		06/30/08	107,679,479											107,679,479
N	*	09/30/08	26,269,455											26,269,455
		09/30/08	352,853,956		(5,473,787)			(3,866,118)	(8,165,060)		(1,495,045)			333,853,946

South Carolina
Department of Health and Human Services
Bureau of Reimbursement Methodology and Policy
2011 Hospital Tax

EXCLUSIONS FROM HOSPITAL COST

	Notes	FYE	Cost Report B Part I Cost Line 95 Col 25	DME	Home Health	Skilled Nursing Facility	Other Long Term Care	Rural Health Clinic	Hospice	Diagnostic Center	Ambulance Services	Ambulatory Surgical Center	Area Under Construction (Line 94)	Adjusted Cost Report B Part I Cost
GTON	(1)	XXXXXX												0
		06/30/08	840,142,342								(6,109,068)			834,033,274
OSP		06/30/08	33,316,495			(1,008,084)					(2,379,470)			29,928,941
		09/30/08	108,137,983		(2,827,285)	(7,974,205)			(4,800,064)		(3,314,799)			89,221,630
Y		09/30/08	61,732,834											61,732,834
		09/30/08	274,286,020		(5,450,881)	(2,860,941)			(10,294,580)					255,679,618
		09/30/08	498,267,872								(512,120)			497,755,752
		09/30/08	50,412,210											50,412,210
		05/31/08	192,478,605								(9,287,134)			183,191,471
		12/31/08	207,021,989			0								207,021,989
IT	(3)	XXXXXX												0
/CALHOU		09/30/08	124,396,790		(3,201,719)				(2,237,622)					118,957,449
		12/31/08	301,207,286		(8,359,852)						(2,070,086)			290,777,348
		09/30/08	232,687,171		(5,577,065)	(760,579)								226,349,527
CTR		09/30/08	415,910,304		(6,416,326)				(9,380,779)		(14,702,644)			385,410,555
		11/30/08	59,932,384		(2,968,921)	(2,125,882)			(559,672)					54,277,909
		08/31/08	282,780,269		(4,600,991)				(8,516,955)					269,662,323
HOSP	(4)	XXXXXX												0
		03/31/08	224,029,172			(464,031)								223,565,141
ER		09/30/08	155,665,163		(1,881,260)	(2,464,241)			(1,333,811)					149,985,851
FER		09/30/08	33,390,124								(2,451,478)			30,938,646
	(8)	09/30/09	30,844,733											29,734,323
L		09/30/08	86,907,861											86,907,861
		09/30/08	28,160,220											28,160,220
AL		09/30/08	11,016,346								(424,685)			10,591,661
HOSPITAL	(6)	XXXXXX												0
			7,582,127,181	(191,534)	(69,235,176)	(64,993,733)	0	(23,346,114)	(46,930,270)	0	(45,743,643)	(1,744,497)	0	7,328,831,804

Notes: FYE 2008 cost reports were used - exceptions are noted.

*St. Eugene Medical Center is now McLeod Medical Center - Dillon

(1) - McLeod Darlington (formerly Wilson Medical Center) cost included in McLeod

(2) - Hospital Closed

(3) - Providence Hospital NE cost included in Providence

(4) - St Francis Women and Family cost included in St. Francis

(5) W/S B Cost Adj to remove "on-call" expense

(6) - Women's Ctr of CHS cost included in CHS Florence

(7) - This cost was not adjusted out of total cost for the tax calculation. Worksheet B Part I shows total cost and not program cost. These hospitals have separately identified this NF cost when other hospitals have not. So to be consistent, we have not adjusted these costs out in arriving at the hospital cost figures for the tax calculation.

(8) - Village Hospital did not file a 2008 Cost Report. Therefore, there 2008 cost will be estimated at 96.40 % of their 2009 cost.

This is consistent with the treatment of other "new" Hospitals in their early years.

(9) - Anmed North cost is included in Anmed Health Cost Report

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Notes	EXCLUSIONS FROM HOSPITAL COST											Area Under	Adjusted
	FYE	Cost Report B Part I Cost Line 95 Col 25	DME	Home Health	Skilled Nursing Facility	Other Long Term Care	Rural Health Clinic	Hospice	Diagnostic Center	Ambulance Services	Ambulatory Surgical Center	Construction (Line 94)	Cost Report B Part I Cost

18.75%

\$49,500,000.00 \$214,500,000.00

HOSPITAL	Notes	Comment	Provider %	MIAP \$49,500,000	TAX \$214,500,000	Total \$264,000,000
ABBEVILLE COUNTY MEMORIAL HOSPITAL			0.23%	114,370.72	495,606.44	\$609,977.16
AIKEN REGIONAL MEDICAL CENTERS			1.69%	836,314.09	3,624,027.71	4,460,341.80
ALLEN BENNETT (GREER)MEMORIAL HOSP			0.60%	296,375.33	1,284,293.10	1,580,668.43
ALLENDALE COUNTY HOSPITAL			0.08%	41,673.85	180,586.69	222,260.54
ANMED HEALTH MEDICAL CENTER			4.24%	2,097,161.11	9,087,698.14	11,184,859.25
ANMED HEALTH NORTH CAMPUS	(9)					
BAMBERG COUNTY MEMORIAL HOSPITAL			0.28%	139,974.91	606,557.93	746,532.84
BARNWELL COUNTY HOSPITAL			0.17%	83,526.32	361,947.39	445,473.71
BEAUFORT MEMORIAL HOSPITAL			1.55%	768,293.58	3,329,272.17	4,097,565.75
BON SECOURS ST FRANCIS XAVIER			1.46%	725,113.48	3,142,158.40	3,867,271.88
CANNON MEMORIAL HOSPITAL			0.21%	103,074.19	446,654.83	549,729.02
CAROLINA PINES REGIONAL MED CTR			0.75%	371,704.02	1,610,717.41	1,982,421.43
LAKE CITY COMMUNITY HOSPITAL			0.19%	92,364.57	400,246.49	492,611.06
CAROLINAS HOSPITAL SYSTEM			2.08%	1,029,584.81	4,461,534.16	5,491,118.97
CHARLESTON MEMORIAL HOSPITAL	(2)		0.00%	0.00	0.00	0.00
CHESTER REGIONAL MEDICAL CENTER			0.22%	109,129.11	472,892.80	582,021.91
CHESTERFIELD GENERAL HOSPITAL			0.28%	138,649.72	600,815.44	739,465.16
CLARENDON MEMORIAL HOSPITAL		(7) Drugs charged to NF patients (\$1,184,095)	0.38%	185,678.10	804,605.10	990,283.20
COASTAL CAROLINA MEDICAL CENTER			0.37%	183,299.81	794,299.17	977,598.98
COLLETON MEDICAL CENTER			0.66%	326,803.81	1,416,149.85	1,742,953.66
CONWAY HOSPITAL INC			1.29%	639,349.14	2,770,512.95	3,409,862.09
EAST COOPER REGIONAL MEDICAL CTR			1.07%	527,641.90	2,286,448.22	2,814,090.12
EDGEFIELD COUNTY HOSPITAL			0.12%	59,942.56	259,751.09	319,693.65
FAIRFIELD MEMORIAL HOSPITAL			0.15%	72,830.13	315,597.24	388,427.37
GEORGETOWN MEMORIAL HOSPITAL			1.18%	583,050.73	2,526,553.18	3,109,603.91
GRAND STRAND REGIONAL MED CTR			1.82%	899,354.65	3,897,203.47	4,796,558.12
GREENVILLE MEMORIAL MEDICAL CENTER			7.97%	3,943,028.90	17,086,458.55	21,029,487.45
HAMPTON REGIONAL MEDICAL CENTER			0.17%	82,556.90	357,746.56	440,303.46
HILLCREST HOSPITAL			0.50%	248,229.98	1,075,663.25	1,323,893.23
HILTON HEAD REGIONAL MEDICAL CTR			1.03%	508,324.48	2,202,739.40	2,711,063.88
KERSHAW COUNTY MEDICAL CENTER			0.93%	462,360.95	2,003,564.13	2,465,925.08
LAURENS COUNTY HOSPITAL			0.63%	309,418.32	1,340,812.73	1,650,231.05
LEXINGTON MEDICAL CENTER			3.51%	1,735,155.38	7,519,006.64	9,254,162.02
LORIS COMMUNITY HOSPITAL DISTRICT	(5)		0.89%	440,171.17	1,907,408.42	2,347,579.59
MARION COUNTY MEDICAL CTR			0.58%	287,549.20	1,246,046.54	1,533,595.74
MARLBORO PARK HOSPITAL			0.22%	109,775.68	475,694.62	585,470.30
MARY BLACK MEMORIAL HOSPITAL			1.47%	727,282.92	3,151,559.33	3,878,842.25
MCLEOD MEDICAL CENTER - DILLON	*		0.36%	177,427.73	768,853.52	946,281.25
MCLEOD REGIONAL MEDICAL CTR			4.56%	2,254,898.29	9,771,225.94	12,026,124.23

18.75%

\$49,500,000.00 \$214,500,000.00

HOSPITAL	Notes	Comment	Provider %	MIAP \$49,500,000	TAX \$214,500,000	Total \$264,000,000
MCLEOD MEDICAL CENTER-DARLINGTON	(1)		0.00%	0.00	0.00	0.00
MUSC MEDICAL CENTER			11.38%	5,633,182.49	24,410,457.51	30,043,640.00
NEWBERRY COUNTY MEMORIAL HOSP			0.41%	202,144.44	875,959.23	1,078,103.67
OCONEE MEMORIAL HOSP		(7) Physical Therapy charged to NF patients (\$1,126,622)	1.22%	602,615.92	2,611,335.63	3,213,951.55
PALMETTO HEALTH BAPTIST EASLEY			0.84%	416,952.57	1,806,794.49	2,223,747.06
PALMETTO HEALTH BAPTIST			3.49%	1,726,897.47	7,483,222.36	9,210,119.83
PALMETTO HEALTH RICHLAND			6.79%	3,361,915.02	14,568,298.42	17,930,213.44
PATEWOOD MEMORIAL HOSPITAL			0.69%	340,491.43	1,475,462.85	1,815,954.28
PIEDMONT MEDICAL CENTER			2.50%	1,237,301.94	5,361,641.74	6,598,943.68
PROVIDENCE HOSPITAL			2.82%	1,398,256.74	6,059,112.53	7,457,369.27
PROVIDENCE HOSPITAL NORTHEAST	(3)		0.00%	0.00	0.00	0.00
REGIONAL MED CTR ORANGEBURG/CALHOU			1.62%	803,455.98	3,481,642.57	4,285,098.55
ROPER HOSPITAL			3.97%	1,963,952.66	8,510,461.53	10,474,414.19
SELF REGIONAL HEALTHCARE			3.09%	1,528,797.75	6,624,790.26	8,153,588.01
SPARTANBURG REGIONAL MEDICAL CTR			5.26%	2,603,119.16	11,280,183.02	13,883,302.18
SPRINGS MEMORIAL HOSPITAL			0.74%	366,600.92	1,588,603.99	1,955,204.91
ST FRANCIS HOSPITAL - Greenville			3.68%	1,821,338.70	7,892,467.70	9,713,806.40
ST FRANCIS WOMENS AND FAMILY HOSP	(4)		0.00%	0.00	0.00	0.00
TRIDENT/SUMMERVILLE MED CTR			3.05%	1,509,991.60	6,543,296.94	8,053,288.54
TUOMEY REGIONAL MEDICAL CENTER			2.05%	1,013,026.34	4,389,780.79	5,402,807.13
UPSTATE CAROLINA MEDICAL CENTER			0.42%	208,964.13	905,511.24	1,114,475.37
VILLAGE HOSPITAL	(8)	96.40% of 2009 Cost	0.41%	200,829.96	870,263.15	1,071,093.11
WACCAMAW COMMUNITY HOSPITAL			1.19%	586,988.38	2,543,616.32	3,130,604.70
WALLACE THOMSON HOSPITAL			0.38%	190,198.24	824,192.36	1,014,390.60
WILLIAMSBURG REGIONAL HOSPITAL			0.14%	71,537.62	309,996.37	381,533.99
WOMENS CENTER OF CAROLINAS HOSPITAL	(6)					0.00
TOTAL			100.00%	\$49,500,000.00	\$214,500,000.00	\$264,000,000.00

FY 2008 Medicare/Medicaid cost reports.
 2011 Hospital Tax Calculation.xls
 Original
 L:\reim\Hospital Tax\
 2/2/10
 Hinson
 Weathers 3/29/10

18.75%

\$49,500,000.00 \$214,500,000.00

HOSPITAL	Notes	Comment	Provider %	MIAP \$49,500,000	TAX \$214,500,000	Total \$264,000,000
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