Table 1: Ten procedures/services generating Facility Fees

Col A	Col B	Col C	Col D
Identify the Reporting Health System and each of its affiliated hospitals	For each Entity listed in Column A, describe the ten procedures/services that generated the greatest amount of facility fee revenue	For each Entity listed in Column A, describe the ten procedures/services for which facility fees were charged based on patient volume	For each procedure/service description listed in Column B, list total revenue received by hospital or health system derived from facility fees
Middlesex Hospital	*95886 - Musc test done w/n test comp*	*90834 - Psytx pt&/family 45 minutes*	*$ 259,567.94*
	90834 - Psytx pt&/family 45 minutes	*G0463 - Hospital outpt clinic visit*	*$ 256,743.24*
	95911 - Nrv cndj test 9-10 studies	*90847 - Family psytx w/patient*	*$ 190,018.64*
	G0463 - Hospital outpt clinic visit	*90785 - Psytx complex interactive*	*$ 179,917.06*
	90847 - Family psytx w/patient	*95886 - Musc test done w/n test comp*	*$ 152,363.13*
	95910 - Nrv cndj test 7-8 studies	*90846 - Family psytx w/o patient*	*$ 109,540.16*
	95909 - Nrv cndj tst 5-6 studies	*95819 - Eeg awake and asleep*	*$ 105,220.92*
	95913 - Nrv cndj test 13/> studies	*90791 - Psych diagnostic evaluation*	*$ 92,152.83*
	95912 - Nrv cndj test 11-12 studies	*90792 - Psych diag eval w/med srvcs*	*$ 84,949.51*
	95819 - Eeg awake and asleep	*90833 - Psytx pt&/fam w/e&m 30 min*	*$ 81,954.31*

NOTE: For any information on this table, that is *estimated* by the Hospital/System using a formula or methodology, provide a full explanation of the estimating methodology and assumptions and explain why actual figures are unavailable.

Table 2: Facility Fee information by Facility Location

Col A	Col B	Col C	Col D	Col E	Col F	Col G	Col H	Col I	Col J	Col K	Col L
List each facility owned or operated by the Reporting System or Hospital that provides **Outpatient** Services for which a facility fee is charged/billed (list name/address)[a]	# patient visits for which a facility fee was charged/ billed	# allowable[b] facility fees paid by Medicare	# allowable[b] facility fees paid by Medicaid	# allowable[b] facility fees paid under private insurance policies	Total amount of allowable facility fees paid by Medicare[c]	Total amount of allowable facility fees paid by Medicaid[c]	Total amount of allowable facility fees paid under private insurance policies[c]	List the Range[d] of allowable facility fees paid by Medicare	List the Range[d] of allowable facility fees paid by Medicaid	List the Range[d] of allowable facility fees paid under private insurance policies	Total amount of revenue received by hospital or health system derived from facility fees[e]
Middlesex Hospital Outpatient Center Saybrook Rd Middletown, CT	6,385	111	111	111	89,674	368646	573,539	0-1329	0-2956	0-5597	1064230
Middlesex Hospital 51 Broad St Middletown, CT	2,981	56	56	56	0	329780	310,801	n/a	0-754	0-1377	647217
Total (***for Column L only***)											***1711447***

NOTE: For any information on this table, that is *estimated* by the Hospital/System using a formula or methodology, provide a full explanation of the estimating methodology and assumptions and explain why actual figures are unavailable.

[a]Information in Columns B - L are for each Facility. Facility means a hospital-based facility located **outside a hospital campus** (Campus is defined in Section 19a-508c(a)(2)).

[b]The term "allowable" in Columns C-J refer to what is allowable for charging of a Facility Fee by State or Federal laws

[c] The total amount of allowable facility fees paid by this payer source category.

[d]From lowest to highest the allowable facility fee paid by this payer source (i.e., $100 - 1,500)

[e]Total amount of revenue received can differ from the sum of columns F through H for the facility due to the inclusion of revenues from Self-Pay activity and other payer sources.

From: StHilaire, Shannon
To: Foster, Tillman
Cc: Roberts, Karen
Subject: Re: Middlesex Hospital Facility Fee Filing
Date: Monday, October 31, 2016 9:15:18 AM
Attachments: facility_fee_tables_1_and_2_revised_7-8_MHS_083016.xlsx

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Quest 1) - There are no non-hospital health system providers that charge facility fees.
Quest 2) - Adjusted the table
Quest 3) - Adjusted the table

New file attached.

Shannon

On Mon, Oct 24, 2016 at 3:02 PM, Foster, Tillman <Tillman.Foster@ct.gov> wrote:

Ms. St. Hilaire-

This is acknowledgement of the Office of Health Care Access (OHCA) receiving your Calendar Year (CY) 2015 Facility Fee filing on October 19, 2016. After reviewing the filing OHCA has a few questions in regards to the following:

1. On Table 1, Columns A through D, the hospital did not report the top ten procedures/services **charged** which generated the most facility fee revenue and had the most facility fees from **non-hospital health system providers**. Please confirm that there are no affiliates of Middlesex Hospital charging facility fees. If that is not the case, revise the filing by adding the non-hospital health system data to table 1 or indicate that the health system does not have any affiliated non-hospital health system providers which charge or receive facility fees.

2. On Table 2, the second facility listed only has a street address provided. Provide the name of the facility where facility fees are charged and revenues received in addition to facility's address.

3. On table 2, no total amount for facility fee revenue was provided in column L, as required. The hospital must provide the total amount of facility fee revenues received. If an actual amount cannot be provided, then provide an estimate based on a methodology or source of how the amount is calculated.

Please respond by October 31, 2016.

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