

<u>Ownership, Management and General Information</u>		<u>Patients by Race</u>		<u>Patients by Ethnicity</u>	
ADMINISTRATOR NAME:	Jeni Hallatt	White	99.0%	Hispanic or Latino:	7.8%
ADMINISTRATOR PHONE	815-943-8670	Black	0.6%	Not Hispanic or Latino:	90.9%
OWNERSHIP:	Mercy Alliance, Inc.	American Indian	0.0%	Unknown:	1.3%
OPERATOR:	Mercy Harvard Hospital, Inc	Asian	0.0%		
MANAGEMENT:	Not for Profit Corporation (Not Church-R	Hawaiian/ Pacific	0.0%	IDPH Number:	4911
CERTIFICATION:	Critical Access Hospital	Unknown	0.3%	HPA	A-10
FACILITY DESIGNATION:	General Hospital			HSA	8
ADDRESS	901 South Grant Street	CITY:	Harvard	COUNTY:	McHenry County

Facility Utilization Data by Category of Service

<u>Clinical Service</u>	Authorized CON Beds 12/31/2012	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	17	13	11	449	1,364	314	3.7	4.6	27.0	35.4
0-14 Years				8	21					
15-44 Years				84	196					
45-64 Years				148	456					
65-74 Years				77	265					
75 Years +				132	426					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	3	3	3	43	79	0	1.8	0.2	7.2	7.2
Direct Admission				40	62					
Transfers				3	17					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				0	0					
Clean Gynecology				0	0					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	45	34	34	140	6,339	0	45.3	17.4	38.6	51.1
Swing Beds				0	0		0.0	0.0		
Acute Mental Illness	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	0					0				
Facility Utilization	65			629	7,782	314	12.9	22.2	34.1	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	37.8%	6.2%	1.0%	28.0%	25.8%	1.3%	
	238	39	6	176	162	8	629
Outpatients	28.5%	24.6%	3.8%	36.2%	6.2%	0.7%	
	4513	3902	608	5739	984	116	15,862

<u>Financial Year Reported:</u>	7/1/2011 to	6/30/2012	<u>Inpatient and Outpatient Net Revenue by Payor Source</u>					Charity Care Expense	Total Charity Care Expense
	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals			
Inpatient Revenue (\$)	41.9%	7.7%	1.1%	29.8%	19.6%	100.0%		307,687	
	3,028,753	553,964	77,604	2,156,856	1,419,192	7,236,369	20,000		
Outpatient Revenue (\$)	21.8%	7.5%	2.8%	57.5%	10.4%	100.0%		Total Charity Care as % of Net Revenue	
	3,495,384	1,204,151	445,682	9,220,891	1,671,128	16,037,236	287,687	1.3%	

Birthing DataNewborn Nursery UtilizationOrgan Transplantation

Number of Total Births:	0	Level 1 Patient Days	0	Kidney:	0
Number of Live Births:	0	Level 2 Patient Days	0	Heart:	0
Birthing Rooms:	0	Level 2+ Patient Day	0	Lung:	0
Labor Rooms:	0	Total Nursery Patientdays	0	Heart/Lung:	0
Delivery Rooms:	0			Pancreas:	0
Labor-Delivery-Recovery Rooms:	0			Liver:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0			Total:	0
C-Section Rooms:	0	Inpatient Studies	6,989		
CSections Performed:	0	Outpatient Studies	32,652		
	0	Studies Performed Under Contract	5,287		

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	2	2	120	359	138	519	657	1.2	1.4
Gastroenterology	0	0	0	0	3	47	2	30	32	0.7	0.6
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	275	0	191	191	0.0	0.7
Orthopedic	0	0	0	0	49	73	80	80	160	1.6	1.1
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	3	9	13	37	50	4.3	4.1
Podiatry	0	0	0	0	7	80	6	84	90	0.9	1.1
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	7	41	8	37	45	1.1	0.9
Totals	0	0	2	2	189	884	247	978	1225	1.3	1.1

SURGICAL RECOVERY STATIONS

Stage 1 Recovery Stations

2

Stage 2 Recovery Stations

4

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	1	1	5	515	3	326	329	0.6	0.6
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	0	182	0	103	103	0.0	0.6
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Dedicated Rooms

Multipurpose	0	0	1	1	0	18	0	14	14	0.0	0.8
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	Level 1 (Not Answered)
	Level 2 Not Answered
Operating Rooms Dedicated for Trauma Care	2
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	1
Persons Treated by Emergency Services:	6,216
Patients Admitted from Emergency:	88
Total ED Visits (Emergency+Trauma):	6,216

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	0
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	0
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	0
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	0
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Outpatient Service Data

Total Outpatient Visits	55,351
Outpatient Visits at the Hospital/ Campus:	55,351
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	0
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Diagnostic/Interventional

Equipment	Examinations					Radiation Equipment			Therapies/ Treatments
	Owned	Contract	Inpatient	Outpt	Contract	Owned	Contract		
General Radiography/Fluoroscopy	1	0	372	4,220	0	Lithotripsy	0	1	10
Nuclear Medicine	0	1	0	0	421	Linear Accelerator	0	0	0
Mammography	1	0	0	522	0	Image Guided Rad Therapy	0	0	0
Ultrasound	1	0	72	1,305	0	Intensity Modulated Rad Thrp	0	0	0
Angiography	1	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			0	29	0	Proton Beam Therapy	0	0	0
Interventional Angiography			12	29	0	Gamma Knife	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	0	0	0
Computerized Axial Tomography (CAT)	1	0	87	1,343	0				
Magnetic Resonance Imaging	1	0	7	409	0				