

Ownership, Management and General Information

ADMINISTRATOR NAME: Kathy Hull
ADMINSTRATOR PHONE 217-285-2113, Ext. 3803
OWNERSHIP: BlessingCare Corporation dba Illini Community Hosp
OPERATOR: BlessingCare Corporation dba Illini Community Hosp
MANAGEMENT: Not for Profit Corporation (Not Church-R
CERTIFICATION: Critical Access Hospital
FACILITY DESIGNATION: General Hospital
ADDRESS 640 West Washington

Patients by Race

White 99.4%
 Black 0.2%
 American Indian 0.0%
 Asian 0.0%
 Hawaiian/ Pacific 0.0%
 Unknown 0.4%

Patients by Ethnicity

Hispanic or Latino: 0.4%
 Not Hispanic or Latino: 99.6%
 Unknown: 0.0%
 IDPH Number: 5132
 HPA E-04
 HSA 3

CITY: Pittsfield **COUNTY:** Pike County

Facility Utilization Data by Category of Service

Clinical Service	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	19	15	15	476	1,839	102	4.1	5.3	28.0	35.5
0-14 Years				10	25					
15-44 Years				36	86					
45-64 Years				76	233					
65-74 Years				82	316					
75 Years +				272	1,179					
Pediatric	2	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	4	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				0	0					
Transfers				0	0					
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	0	0	0	0	0	0	0.0	0.0	0.0	0.0
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	25			476	1,839	102	4.1	5.3	21.3	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	76.5%	8.4%	0.0%	12.2%	1.7%	1.3%	
	364	40	0	58	8	6	476
Outpatients	48.9%	15.9%	0.6%	27.0%	5.3%	2.3%	
	10025	3252	130	5544	1083	476	20,510

Financial Year Reported: 10/1/2011 to 9/30/2012

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense	Total Charity Care Expense
Inpatient Revenue (\$)	81.0%	4.0%	0.0%	15.0%	0.0%	100.0%		495,066
	2,356,839	115,688	0	435,583	0	2,908,110	75,824	
Outpatient Revenue (\$)	25.2%	17.7%	1.3%	47.3%	8.5%	100.0%		
	4,480,462	3,159,143	236,736	8,414,011	1,510,609	17,800,961	419,242	2.4%

Birthing Data

Number of Total Births: 0
 Number of Live Births: 0
 Birthing Rooms: 0
 Labor Rooms: 0
 Delivery Rooms: 0
 Labor-Delivery-Recovery Rooms: 0
 Labor-Delivery-Recovery-Postpartum Rooms: 0
 C-Section Rooms: 0
 CSections Performed: 0

Newborn Nursery Utilization

Level 1 Patient Days: 0
 Level 2 Patient Days: 0
 Level 2+ Patient Day: 0
 Total Nursery Patientdays: 0
 Inpatient Studies: 7,162
 Outpatient Studies: 56,502
 Studies Performed Under Contract: 0

Organ Transplantation

Kidney: 0
 Heart: 0
 Lung: 0
 Heart/Lung: 0
 Pancreas: 0
 Liver: 0
 Total: 0

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	10	55	55	163	218	5.5	3.0		
Gastroenterology	0	0	1	1	8	223	25	650	675	3.1	2.9		
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0		
OB/Gynecology	0	0	0	0	0	9	0	15	15	0.0	1.7		
Oral/Maxillofacial	0	0	0	0	0	3	0	13	13	0.0	4.3		
Ophthalmology	0	0	0	0	0	132	0	330	330	0.0	2.5		
Orthopedic	0	0	0	0	0	0	0	0	0	0.0	0.0		
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0		
Plastic Surgery	0	0	0	0	0	6	0	30	30	0.0	5.0		
Podiatry	0	0	0	0	0	16	0	43	43	0.0	2.7		
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0		
Urology	0	0	0	0	0	0	0	0	0	0.0	0.0		
Totals	0	0	3	3	18	444	80	1244	1324	4.4	2.8		
SURGICAL RECOVERY STATIONS			Stage 1 Recovery Stations			0			Stage 2 Recovery Stations			0	

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	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	0	35	0	88	88	0.0	2.5
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	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
	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)
Operating Rooms Dedicated for Trauma Care	Level 2
	Not Answered
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	0
Persons Treated by Emergency Services:	7,097
Patients Admitted from Emergency:	373
Total ED Visits (Emergency+Trauma):	7,097

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	29,016
Outpatient Visits at the Hospital/ Campus:	20,034
Outpatient Visits Offsite/off campus	8,982

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	Owned	Contract	
General Radiography/Fluoroscopy	2	0	267	5,079	0	Lithotripsy	0	0	0	0
Nuclear Medicine	1	0	9	631	0	Linear Accelerator	0	0	0	0
Mammography	1	0	0	774	0	Image Guided Rad Therapy	0	0	0	0
Ultrasound	1	1	79	917	487	Intensity Modulated Rad Thrp	0	0	0	0
Angiography	0	0				High Dose Brachytherapy	0	0	0	0
Diagnostic Angiography			0	0	0	Proton Beam Therapy	0	0	0	0
Interventional Angiography			0	0	0	Gamma Knife	0	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	0	0	0	0
Computerized Axial Tomography (CAT)	1	0	170	2,259	0					
Magnetic Resonance Imaging	0	1	0	0	384					