Hospital Profile - C	Y 2012	Carlinvill	e Area Hosp	ital			Carlir	ville		Page 1	
Ownership, Ma	nagement and	General Inform	nation			Patients by I	Race		Patients by E	Ethnicity	
ADMINISTRATOR NAM	ME: Kenneth	Reid			W	nite	99	99.4% Hispanic or I		no: 0.0%	
ADMINSTRATOR PHO	NE 217-854	-3141 x 310			Bla	ack	().5% N	lot Hispanic or	Latino: 100.0%	
OWNERSHIP:		lacoupin Health	An	nerican Indian			Inknown:	0.0%			
OPERATOR:		e Area Hospital	,			ian).2% —			
MANAGEMENT:		Profit Corporatio		waiian/ Pacific).2 %	IDPH Numbe	er: 5686			
CERTIFICATION:		Access Hospital		,		known).0%	HPA	E-02	
FACILITY DESIGNATION		•	1		011		0.0% HPA HSA			3	
ADDRESS	20733 N		СІТ	Y: Carlinville	2	COUNTY:		in County		5	
7.00011200	2010011	Bioda					macoup	in ocumy			
	A	d Peak Beds	Facility Utiliza	tion Data by	Category		A		001	Staffed Bed	
Clinical Service	Authorize CON Beds 12/31/2012	Setup and	Peak	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Occupancy Rate %	
Medical/Surgical	25	25	11	456	1,642	118	3.9	4.8	19.3	19.3	
0-14 Years				24	66						
15-44 Years				67	371						
45-64 Years				83	253						
65-74 Years				126	438						
75 Years +				156							
	^	0	<u>^</u>			0	0.0		0.0	0.0	
Pediatric	0	0	0	0	0		0.0	0.0	0.0	0.0	
Intensive Care	0	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	0	0	0	U	0.0	0.0	0.0	0.0	
Clean Gynecology				0	0						
Clean Gynecology				-							
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				187	1,872		10.0	5.1			
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	
Dedcated Observation	0					0					
Facility Utilization	25			643	3,514	118	5.6	10.0	39.8		
			(Includes ICU L	Direct Admiss	sions Only)					
						erved by Payor	Source				
	Medicare					Private Pay		Ch	arity Care	Totals	
				Filvale IIIS		-		Ch	-	Totals	
Inpatients	87.2%	3.7%	0.0%		6.1%	1.4%			1.6%		
	561	24	0		39	9			10	643	
0	44.9%	17.3%	0.0%	:	30.1%	5.8%			1.8%		
Outpatients	12823	4946	0		8602	1650			520	28,541	
Financial Year Reported	<u>d:</u> 8/1/2011	to 7/31/20 ⁻	12 Inpatier	nt and Outpa	tient Net	Revenue by Pa	avor Sou	ce		Total Charity	
<u>1 manetai Itai Kepone</u>			-	-		-	-		Charity	Care Expense	
Innotiont	Medicare	Medicaid	Other Public	Private Ins		Private Pay		Totals	Care	223,187	
Inpatient Revenue (\$)	79.0%	7.0%	0.0%		1 2.0%	2.0%	1	00.0%	Expense	To to LOb order	
Revenue (\$)	3,436,353	304,488	0	5	521,977	86,996	4,3	49,814	10,688	Total Charity Care as % of	
Outpatient	35.9%	4.9%	0.0%		58.1%	1.1%	4	00.0%		Net Revenue	
Revenue (\$)				0.4					212 400	1.2%	
	5,221,284	718,659	0	0,40	66,098	156,379	14,50	62,420	212,499	1.2%	
Birthing Data					Newborn Nursery Utilization			Organ Transplantation			
Number of Total Births	-		0 Leve	el 1 Patient D		-	0	Kic	Iney:	0	
Number of Live Births:				el 2 Patient D	•		0		art:	0	
Birthing Rooms:				el 2+ Patient I	•		0	Lui		0	
Labor Rooms:				al Nursery Pa			0		art/Lung:	0	
Delivery Rooms:			0		licilidays		U		ncreas:	0	
•	any Roome		0	I e	aboratory	Studies		Pa Liv		0	
I ahor-Holivary Docov			U	<u></u>	y			LIV	O 1.	U	
Labor-Delivery-Recove		Poome:	-	tiont Studios			0 0 0 0 0				
Labor-Delivery-Recove		Rooms:	0 Inpa	itient Studies			8,823 59 251	Tot	tal:	0	
	ery-Postpartum	Rooms:	0 Inpa 0 Outp	itient Studies patient Studie dies Performe	es	Contract	8,823 59,251 68,074	Tot	tal:	0	

Hospital Profile - (CY 2012	Carlinv	ille Are	a Hospi	ital			Carlinv	ille		Page 2		
			<u>Sı</u>	irgery and	d Operatir	ng Room Ut	ilization						
Surgical Specialty	<u>Opera</u>	ting Rooms		Surgical Cases							per Case		
	Inpatient Outpati	ient Combin	ed Tota	l In	patient C	Dutpatient	Inpatient	Outpatient T	otal Hours	Inpatient	Outpatient		
Cardiovascular	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		
General	0	0 2	2	2	6	127	4	60	64	0.7	0.5		
Gastroenterology	0	0 ()	0	8	148	4	64	68	0.5	0.4		
Neurology	0	0 ()	0	0	0	0	0	0	0.0	0.0		
OB/Gynecology	0	0 (0	0	2	0	3	3	0.0	1.5		
Oral/Maxillofacial	0	0 ()	0	0	0	0	0	0	0.0	0.0		
Ophthalmology	0	0 (0	0	202	0	90	90	0.0	0.4		
Orthopedic	0	0 ()	0	0	6	0	7	7	0.0	1.2		
Otolaryngology	0	0 ()	0	0	0	0	0	0	0.0	0.0		
Plastic Surgery	0	0 (0	0	0	0	0	0	0.0	0.0		
Podiatry	0	0 ()	0	0	22	0	10	10	0.0	0.5		
Thoracic	0	0 ()	0	0	0	0	0	0	0.0	0.0		
Urology	0	0 ()	0	2	65	2	32	34	1.0	0.5		
Totals	0	0 2	2	2	16	572	10	266	276	0.6	0.5		
SURGICAL RECOV	ERY STATIONS	S	tage 1 Re	ecovery St	ations	0	Stag	ge 2 Recovery	Stations	0			
		De	dicated	and Non-	Dedicated	Procedure	Room Utilza	tion					
		Procedure	Rooms			al Cases		Surgical Hour	_		per Case		
Procedure Type	Inpatient	Outpatient (Combined	Total	Inpatient	Outpatien	t Inpatient	Outpatient	Total Hours	s 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	0	0	0	0	0	0	0	0.0	0.0		
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0		
			M	ultipurpo	se Non-D	edicated Ro	<u>ooms</u>						
	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		
<u>En</u>	nergency/Trauma	a Care					Care	diac Catheter	ization Util	ization			
Certified Trauma Center			No			Total	Total Cardiac Cath Procedures:						
Level of Trauma Service		Lev	el 1	Lev	el 2	Di	agnostic Cath	neterizations (D-14)		0		
		(Not Ansv	vered)	Not Ansv	vered			neterizations (0		
	Operating Rooms Dedicated for Traun					Interventional Catheterizations (0-14):					0 0		
Number of Trauma Visits:				0		Interventional Catheterization			(15+)	(15+)			
Patients Admitted	from Trauma				0	EF	P Catheteriza	tions (15+)			0		
Emergency Service	се Туре:			E	Basic			Cardiac Sur	gery Data				
Number of Emerg					5		l Cardiac Sur				0		
Persons Treated			6	,666		ediatric (0 - 14	,			0			
Patients Admitted			-	356		dult (15 Years	,			0			
Total ED Visits (E	na):		6	,666	C		y Bypass Graf						
							penormed	l of total Cardi			0		
	Outpatient Service	<u>e Data</u>						Cardiac Cat					
Total Outpatient Visits					,021	Total	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures						
Outpatient Visi						0							
Outpatient Visi	its Offsite/off camp	pus	0 au			Dedicated Diagnostic Catheterization Lab Dedicated Interventional Catheterization Labs					0		
								nterventional C		ion Labs	0 0		
Diagnactic/Intern	ventional			E	vaminatio	ne							
<u>Diagnostic/Interventional</u> <u>Equipment</u>		Owned Contract		Examination		Contract	Radiation Equipment		Owned Contract		<u>Therapies/</u> Treatments		
General Radiography	//Fluoroscopv	2	0	430	6,457	0	Lithotripsy			0 0	0		
Nuclear Medicine	<i>PJ</i>	0	1	0	0,101	115	Linear Acc			0 0	0		
Mammography		1	0	0	873	0		uided Rad Th		0 0	0		
Ultrasound		0	1	0	0/0	959	-	Modulated Ra		0 0	0		
Angiography		0	0	5	Ŭ	500	-	Brachytherap		0 0	0		
Diagnostic Angiog	raphy	v	0	0	0	0	-	am Therapy		0 0	0		
Interventional Ang				0	0	0	Gamma Kr			0 0	0		
Positron Emission To	• • •	0	1	0	0	0	Cyber knife			0 0	0		
Computerized Axial 1			0	107	1.909	0	- /			Ũ	Ũ		

1,909

0

0

440

Source: 2012 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

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Computerized Axial Tomography (CAT)

Magnetic Resonance Imaging