



The respected source for health care data.

Fall 2022 Survey Training

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WHA Information Center

Annual Virtual Training

November 2022



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Affirmation & Schedule C

Agenda

The WHAIC Team



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Justin

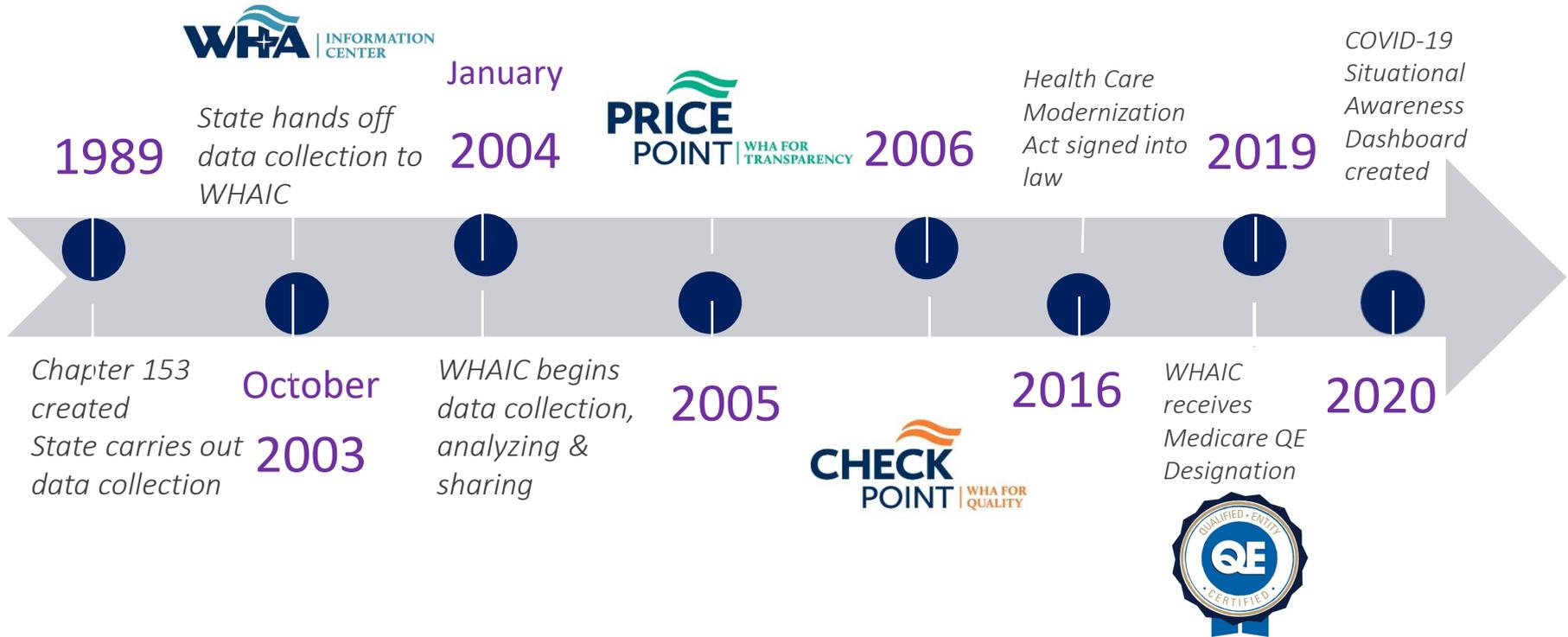


Seth



About Us: WHA Information Center

WHA Information Center (WHAIC) is wholly owned subsidiary of the Wisconsin Hospital Association.



Information Center Data

Discharge/Claim Data Collected

- [Hospital discharge claims \(153\)](#)
- [Ambulatory Surgery Centers \(80\)](#)
- Quarterly / monthly data submission
- Collect > 3 million records per quarter

Annual Survey Data/Collected

- [Annual Survey of Hospitals](#)
- Hospital Fiscal Survey
- Medicare Cost Report
- Personnel Survey
- Uncompensated Health Care Survey
- Hospital Rate Increases

How the Data is Used

- [Publications \(Mandate\)](#)
 - Guide to Wisconsin Hospitals
 - Health Care Data Report
 - Uncompensated Health Care in Wisconsin Hospitals
 - [Hospital Rate Increases](#)
- Workforce Analysis & Predictions
- Quality Report/Quality Improvement
 - Readmission rates
 - Potentially Preventable Readmissions
 - Hospital Acquired Conditions penalties
 - Other specific adverse events
- [Analytics](#)
 - Kaavio
 - PricePoint
 - CheckPoint
 - Other analytics/custom requests

Data *not* collected

- Professional/clinic:
- Pharmacy
- DME
- Nursing facilities

Where does my data go?

- **Annual Survey**
 - Collects hospital information – Part of a system, type of hospital, certifications, etc. Reports the services that are provided at the hospital, number of beds, utilization, FTEs, and physicians.
 - [Guide to Wisconsin Hospitals](#)
- **Fiscal Survey**
 - Collects information on revenue and expense figures, gross patient charges and contractual adjustments by payer, balance sheet figures, and charity care and bad debt.
 - [Guide to Wisconsin Hospitals & the Uncompensated Health Care report](#)
- **Uncompensated Health Care**
 - Collects definitions related to eligibility for uncompensated care; income thresholds for financial assistance; and policies and procedures determining a patients' ability to pay.
 - [Uncompensated Health Care Survey](#)
- **Personnel Survey**
 - “Addendum” to Annual Survey
 - Collects vacancies of select employee categories; number of employees 55 and over; number of employee separations;
 - [Customs & Workforce Development](#)
- **Medicare Cost Report Schedule C**
 - Used to calculate hospital tax

See our [Data Products](#) webpage for more information on publications, custom reports, and data sets.

Who Uses the Data?

Data Uses

- 86% of Wisconsin hospitals purchase data sets and/or custom data sets/reports from WHAIC.
- Other purchasers of custom data sets and/or reports include Insurers, Researchers and Universities.
- Data is used for Price and Quality Transparency (PricePoint & CheckPoint)

Analytics

- WHAIC's data analytics tool (Kaavio) is provided at no charge to hospitals that purchase the data at the required level.
 - Users: 319
 - Hospitals: 93
- WHAIC and the Wisconsin Office of Rural Health (WIORH) offer the Rural Health Dashboard (RHD) as one way rural hospitals can use their SHIP program funding (Small Rural Hospital Improvement Grant).
 - There are 18 hospitals participating in 2022-2023.
 - The RHD consists of eleven (13) executive-level dashboards
- Dashboards:
 - COVID-19 Situational Awareness Dashboard
 - Others...

COVID-19
DASHBOARD

Wisconsin Hospital Association has been monitoring the most up-to-date information on the COVID-19 outbreak. [Click here](#) to view WHA Information Center COVID-19 Situational Awareness Update.

Lyme Disease Awareness

As summer continues in full swing, it is important to remember that with beautiful Wisconsin outdoors, comes concerns for certain summer illnesses such as Lyme disease. [Read More](#)



Upcoming Events



Wipop Data Submission
Standard Deadline - Q2 2022
August 29, 2022

Data Submitters

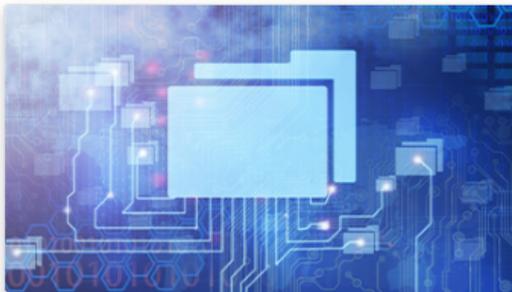
WHA Information Center (WHAIC) has been collecting hospital, ASC and survey discharge data as authorized by the Wisconsin Department of Administration, since 2003 as defined by [Chapter 153, Wisconsin Statutes](#).

Inpatient and outpatient data is collected quarterly through a secure, web-based tool known as **Wlpop** to produce public use data sets, custom data sets and three annual publications.

In addition, all Wisconsin hospitals submit Annual, Fiscal, Personnel and Uncompensated Care survey data annually. Data collected from these surveys are used for trending, benchmarking, and other key statistics.

For more information and access to the Wlpop or Survey Data Submission Manuals, calendars, training materials, and other updates click on one of the pictures below.

Reporting Requirements



Wlpop



Surveys



WHAIC Portal Login

Survey Website

Surveys

All Wisconsin licensed, Medicare certified, hospitals, including psychiatric hospitals are required to submit survey data on an annual basis to the Wisconsin Hospital Association Information Center (WHAIC). Submissions include data in areas such as utilization, fiscal, and personnel to be used in publications, datasets, and workforce development. WHAIC collects data pursuant to Chapter 153 of the Wisconsin State Statutes and subject to all terms and conditions as described in ss. DHS120.



Survey Manuals



**Survey Submission
Calendar**



News & Bulletins



Education & Training



FAQs



**Registration & Other
Resources**

Education & Training

WHAIC provides training for new and seasoned survey submitters throughout the year. Please reach out to whainformationcenter@wha.org for more information on upcoming training sessions. We welcome feedback on past trainings and ideas for content of upcoming training sessions.



Survey Submission & Compliance Manual



Training Documentation



Training Videos

Statutory Compliance



DHS 120.12 Data submission procedures

“Every hospital shall annually file with the department within 120 calendar days following the close of the hospital’s fiscal year.”

“The department may grant an extension for up to 30 calendar days.”



Hospital / Health System Survey Submission - Fiscal Year End Dates

Surveys open for submission on November 1

Annual, Fiscal, Personnel & Uncompensated

***Medicare Cost Report**

***Health System Survey**

MARCH - JUNE FYE* (APR/July 1 FY)	
March – June FYE Extension Request Deadline	12/13/22
March - June <i>Standard</i> Submission Deadline	12/21/22
March - June <i>Extended</i> Submission Deadline (Submit request by deadline)	01/31/23
March - June Affirmation Deadline	02/15/23
JULY - SEPTEMBER FYE (OCT 1 FY)	
July - September FYE Extension Request Deadline	01/23/23
July - September FYE <i>Standard</i> Submission Deadline	01/31/23
July - September FYE <i>Extended</i> Submission Deadline (Submit request by deadline)	03/02/23
July - September Affirmation Deadline	03/16/23
DECEMBER FYE (JAN 1 FY)	
December FYE Extension Request Deadline	04/21/23
December FYE <i>Standard</i> Submission Deadline	05/02/23
December FYE <i>Extended</i> Submission Deadline (Submit request by deadline)	06/02/23
December FYE Affirmation Deadline	06/16/23

- The above timeline reflects adjusted (some combined) survey submission timelines to benefit hospitals to improve efficiency and prevent/reduce duplication of work and requests for additional time. If you are part of a state or county facility – please note the adjusted timeline accounts for additional time allowed for in the statute.
- **Medicare Cost Report (MCR) complete survey and upload your MCR accordingly as applicable.** For more information see [MCR Manual](#).
- ***Health System Survey completion** is now included in FYE timeline. If your facility is part of a system located in Wisconsin, please locate your 900 series facility ID in the facility drop down list to complete your system survey **for WI only**.

Open	SURVEYS OPEN: First week of November
Calendar	Follow calendar to submit data by due date listed (based on FYE).
Affirm	Once all surveys are submitted, hospitals will receive an automated email notifying them that their affirmation statement is available.
Validate	Validate data, reopen surveys to make changes if necessary, and provide responses to action edits. *Keep in mind that reports/edits/affirmations are re-set each time surveys are reopened*
Submit	Submit Affirmation Statement and Copy of Schedule C by the Due Date.

Survey Submission Timeline

Registration and the Roles

- In order to submit Surveys, users first need to register for access to the secured Survey portal
- The users will choose what access they need (role) and for which facilities
- The access is approved by WHAIC and an email is sent to the user



Registration and the Roles



Survey Manuals



Survey Submission Calendar



News & Bulletins



Education & Training



FAQs



Registration & Other Resources

We cannot add new users. Users must register for the appropriate access.

*If any changes are needed with existing users, please email whainfocenter@wha.org.

Registration & Other Resources

This section provides additional information to assist you in the submission of hospital surveys.

Please note: WHAIC cannot register users. For new registrants, please see Roles & Registration. Once registered, WHAIC will review all access requests and respond within 24-48 hours.

- ✓ Roles & Registration
- ✓ Facility Listing
- ✓ Survey Functionality
- ✓ User Dashboard
- ✓ Survey Edit Checks

Registration and the Roles

Survey Primary: recommended for users involved in the submission process who need regular communications with WHAIC and have authorization to sign off on survey data (CFO, CEO or delegate).

- Have access to the survey site to make changes
- Access to every survey and access to all reports.
- Receive all communication from WHAIC – such as automated and targeted reminders, site specific emails, newsletters, and bulletins.

Note: The following users will receive our newsletters and bulletins but will not receive regular reminders about deadlines and site-specific emails.

Survey Secondary – This is great for CEO's and CFO's who do not want regular contact with WHAIC but want to be able to access the survey and affirmation statement.

Survey User – This is for users who only enter some of the data, but do not make decisions on the data or oversee the process of submission.



<https://www.whainfocenter.com/Data-Submitters/Survey/Resources/surveyregister>

Registration and the Roles

WHA | INFORMATION CENTER

Log In

Please enter your Username and Password

Username:

Password: *

This system is for authorized users only. Individual use of this computer system and/or network without authority, or in excess of your authority, is strictly prohibited. Monitoring of transmissions or transactional information may be conducted to ensure the proper functioning and security of electronic communication resources. Anyone using this system expressly consents to such monitoring and is advised that if such monitoring reveals possible criminal activity or policy violation, system personnel may provide the evidence of such monitoring to law enforcement or to other senior officials for disciplinary action.

I Agree, Log In

[Register](#) [Forgot Password](#) [Change Password](#)

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WHA Information Center - 5510 Research Park Dr. - Madison - WI - 53711
Phone: 800.231.8340 / 608.274.1820

SECURED SITE
register.com
256 bit Encryption

From this screen you can:

- Register
- Login
- Request Password Reset (Forgot Password)
- Change Password

Important:

- Passwords must be changed annually.
- Accounts deactivate if inactive for 15 months.
- Contact WHAIC if existing account is inactive, do not reregister.

<https://portal.whainfocenter.com/Account/Login.aspx>

Registration and the Roles

Select a Hospital Sort By Year

Message From WHA Information Center:--

2022 Surveys Open

[Register here](#) for the Survey training events on October 26, 2022 and November 2, 2022

For questions, contact [Heather Scott](#)

079 - Froedtert Hospital -- (Milwaukee), FY End: 06/30

Hospital Survey Grid:--

Survey Name	Enter/View Survey
2022 ANNUAL SURVEY	Continue
2022 FISCAL SURVEY	New
2022 MEDICARE COST REPORT SURVEY	New
2022 PERSONNEL SURVEY	New
2022 UNCOMPENSATED HEALTH CARE PLAN	New

Authorized Users for Selected Hospital:--

Please take a moment to review your hospital's list of users authorized to access the WHAIC secure Survey Site please contact whainfocenter@wha.org, as it is the hospital's responsibility to notify WHAIC with any staff updates.

First Name	Last Name	Title	Email	Survey Role
Thaddeus	Coulis	Associate Measurement Analyst	thaddeus.coulis2@froedtert.com	Primary
Mike	Everson	Director of Reimbursement	Michael.Everson@froedtert.com	Secondary
Angela	Zaeske	Program Manager	Angela.Zaeske@froedtert.com	Primary

Primary contacts should regularly review who has access to their facilities



Survey & Manual Changes

Current Improvements

Survey

- Added SDOH Questions to Annual Survey
- Prefilled questions to allow for less validation error and a report to view the prefilled questions on the Annual Survey
- Goal is to Validate surveys as we receive them

Health System Survey (HSS)

- Creating a new HSS manual (to be released mid-November)

Updated Calendar with merged dates for all surveys

- Medicare Cost Report Schedule C and HSS included

Health System Survey Changes



- ❑ Health System Surveys are entered under a 900 series system name, not by facility
- ❑ If HSS not received timely, an email is sent to all primary and HSS contacts
- ❑ Those responsible for the HSS must have their own current portal account
- ❑ Follow Survey calendar for due dates (see updated calendar)

Home | Intro to Surveys | Facility Reports

Pick the site you're working on and click "View Hospital"

Select a Hospital Sort By ID Year 2022 View Hospital

- 029 - Mayo Clinic Health System - Eau Claire -- (Eau Claire)
- 009 - Mayo Clinic Health System - Northland in Barron -- (Barron)
- 015 - Mayo Clinic Health System - Chippewa Valley in Bloomer -- (Bloomer)
- 029 - Mayo Clinic Health System - Eau Claire -- (Eau Claire)
- 057 - Mayo Clinic Health System - La Crosse -- (La Crosse)
- 073 - Mayo Clinic Health System - Red Cedar in Menomonie -- (Menomonie)
- 104 - Mayo Clinic Health System - Oakridge in Osseo -- (Osseo)
- 127 - Mayo Clinic Health System - Sparta -- (Sparta)
- 911 - Mayo Clinic Health System - Eau Claire -- (System)

Part of a system, make sure to go the 9xx series

2 Surveys Open November 2, 2022. Only need to register November 2, 2022. Only need to register

For questions, contact Heather Scambler or whainfoce

II. HEALTHCARE SYSTEM FINANCIAL SURVEY Services/Programs Other than Hospital



11. System Health Care Services/Programs Other than Hospital: (specify number, zero or blank if not applicable)

Physician Clinics

Lab

Home Health

Pharmacy

Assisted Living

Dialysis

Nursing Home

Hospice

Other

If "Other", describe

Count each type of service in that building as per the list below. If one building had physician clinic space (might be multiple physician clinics), lab space, and Home Health (HH) space, it would count:

1 physician clinic

1 lab

1 HH

If you have multiple buildings with physician clinics, the number of physician clinics would be the number of buildings (not the number of specialty clinics within the building) that include physician clinics.

**II. HEALTHCARE SYSTEM
FINANCIAL SURVEY**
Services/Programs Other
than Hospital

11. System Health Care Services/Programs Other than Hospital: (specify number, zero or blank if not applicable)

Physician Clinics	<input type="checkbox"/>
Lab	<input type="checkbox"/>
Home Health	<input type="checkbox"/>
Pharmacy	<input type="checkbox"/>
Assisted Living	<input type="checkbox"/>
Dialysis	<input type="checkbox"/>
Nursing Home	<input type="checkbox"/>
Hospice	<input type="checkbox"/>
Other	<input type="checkbox"/>
If "Other", describe	<input type="text"/>

The 2022 half year (1/1/22-6/30/22) Health System Survey was a request from Eric Borgerding, WHA's CEO and President. The goal is to paint an accurate picture of the current financial status of Wisconsin health systems.

Thank you to those who submitted the data for your health system.

900 - Test System -- (test), FY End: 12/31

Hospital Survey Grid:--	
Survey Name	Enter/View Survey
2022 HEALTHCARE SYSTEM FINANCIAL SURVEY	New

Survey Submission



Select a Hospital **Sort By** **Year** [View Hospital](#) [Extensions](#) [Survey Timeline](#) [Survey Manuals](#)
 [Data Deliverables](#) [Survey Homepage](#)

Message From WHA Information Center:--

2022 Surveys Open November 1

Save the date for Survey training events on October 26, 2022 and November 2, 2022. Webinar information will be coming soon.

For questions, contact [Heather Scambler](#) or whainfocenter@wha.org

000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31 [Survey How-To](#)

Hospital Survey Grid:--

Survey Name	Enter/View Survey	Status	Print PDF	Progress	Action Needed
2022 ANNUAL SURVEY	Continue	Open		<div style="width: 49%;"><div style="width: 49%;"></div></div> 49%	
2022 FISCAL SURVEY	New	Open		0%	
2022 MEDICARE COST REPORT SURVEY	New	Open		0%	
2022 PERSONNEL SURVEY	New	Open		0%	
2022 UNCOMPENSATED HEALTH CARE PLAN	New	Open		0%	

Authorized Users for Selected Hospital:--

Please take a moment to review your hospital's list of users authorized to access the WHAIC secure Survey Site. Should any of the names listed no longer require access to the Survey or if changes need to be made, please contact whainfocenter@wha.org, as it is the hospital's responsibility to notify WHAIC with any staff updates or corrections.

First Name	Last Name	Title	Email	Survey Role	Annual	Fiscal	System	Medicare	Uncompensated	Personnel
No records to display.										

Extensions

Filing an extension

Select a Hospital Sort By ID Year

000 - Wisconsin Hospital Association -- (Madison) 2022 View Hospital Extensions



000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31

Hospital Survey Grid:--	
Survey Name	Request Extension
2022 ANNUAL SURVEY	
2022 FISCAL SURVEY	
2022 MEDICARE COST REPORT SURVEY	
2022 PERSONNEL SURVEY	
2022 UNCOMPENSATED HEALTH CARE PLAN	

- A. Find hospital and correct year
- B. Click Extensions
- C. Click on the paper and pencil icon under "Request Extension."

Extensions

Filing an extension

2020 ANNUAL SURVEY -- Please Specify Reason for Extension

d. Reason: ▼

Comment:

Apply to all surveys for this facility: **e.**

f.

D. Choose a reason and provide comments for why you are filing.

E. Apply to all surveys if applicable

F. Click Save

Survey Submission

3-Digit ID

The unique 3-digit identification number assigned to each facility by WHAIC.

You will notice this ID in the Select a Hospital drop-down. Please include this number in the subject line when contacting WHAIC.

Home | Intro to Surveys | Facility Reports | Pick the site you're working on and click "View Hospital"

Select a Hospital | Sort By ID | Year 2022 | View Hospital

- 029 - Mayo Clinic Health System - Eau Claire -- (Eau Claire)
- 009 - Mayo Clinic Health System - Northland in Barron -- (Barron)**
- 015 - Mayo Clinic Health System - Chippewa Valley in Bloomer -- (Bloomer)
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- 127 - Mayo Clinic Health System - Sparta -- (Sparta)
- 911 - Mayo Clinic Health System - Eau Claire -- (System)**

Part of a system, make sure to go the 9xx series

2 Surveys Open November 2, 2022. Only need to register... For questions, contact Heather Scambler or whainfocent

079 - Froedtert Hospital -- (Milwaukee), FY End: 06/30

Hospital Survey Grid:--	
Survey Name	Enter/View Survey
2021 ANNUAL SURVEY	Continue
2021 FISCAL SURVEY	New
2021 MEDICARE COST REPORT SURVEY	New
2021 PERSONNEL SURVEY	New
2021 UNCOMPENSATED HEALTH CARE PLAN	New



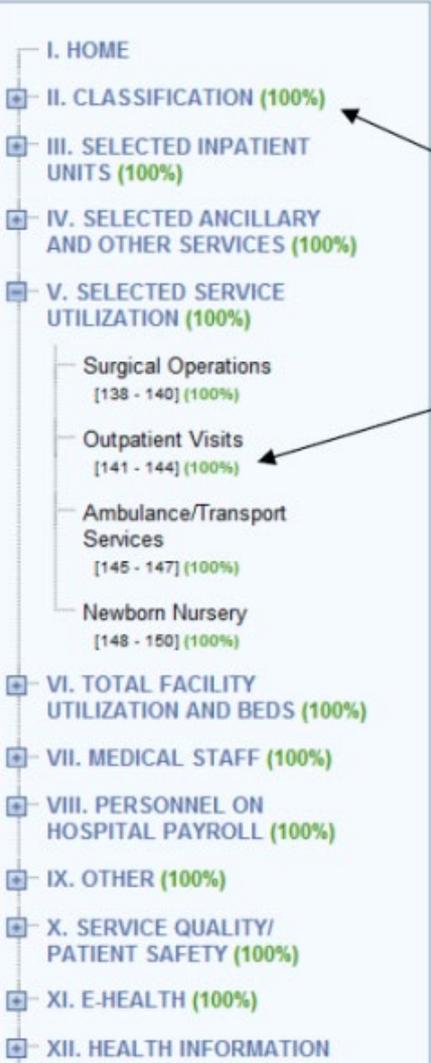
000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31

Hospital Survey Grid:--	
Survey Name	Enter/View Survey
2020 ANNUAL SURVEY	View Only
2020 FISCAL SURVEY	View Only
2020 MEDICARE COST REPORT SURVEY	View Only
2020 PERSONNEL SURVEY	Ready to Submit
2020 UNCOMPENSATED HEALTH CARE PLAN	View Only

Survey Submission

Survey Submission

- Survey Layout:**
- Navigational Tree Control
 - Percentage of each section completed
 - Percentage of each subsection of questions completed
 - Display is the same for all survey data types

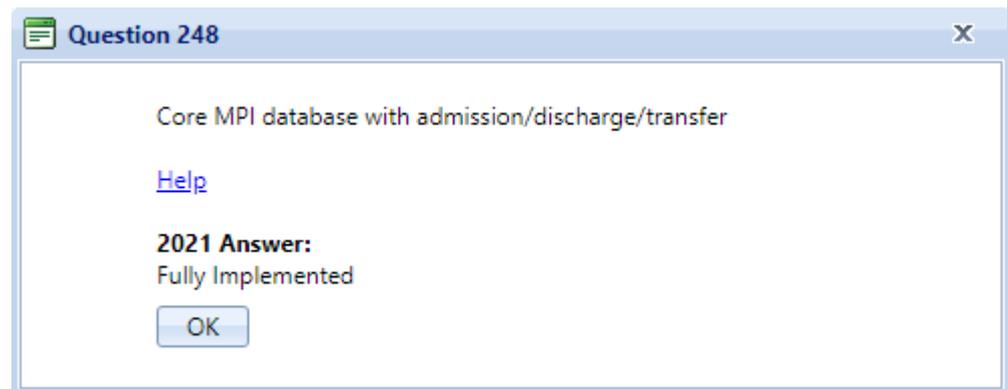


Survey Submission

Each question shows additional details by clicking on the line number.

248. Core MPI database with admission/discharge/transfer

Fully Implemented Partially Implemented Planning Not at All



Hospital Survey Grid:--					
Survey Name	Enter/View Survey	Status	Print PDF	Progress	Action Needed
2021 ANNUAL SURVEY	Continue	Open		49%	
2021 FISCAL SURVEY	New	Open		0%	
2021 MEDICARE COST REPORT SURVEY	New	Open		0%	
2021 PERSONNEL SURVEY	New	Open			
2021 UNCOMPENSATED HEALTH CARE PLAN	New	Open			



- II. HOSPITAL INFORMATION AND CLASSIFICATION (33%)
- III. SELECTED INPATIENT UNITS (92%)
- IV. SELECTED ANCILLARY AND OTHER SERVICES (100%)
- IX. OTHER (100%)

Code	Description
1	Service is provided in or by the hospital in a DISTINCT AND SEPARATE UNIT. The number of beds and utilization information MUST be provided for inpatient units.
2	Service is provided in or by the hospital but NOT IN A DISTINCT AND SEPARATE UNIT.
3	Service is provided by the hospitals Health Care System in the community.
4	Service IS NOT MAINTAINED by the hospital but is available, in the hospital or another facility, through a FORMAL CONTRACTUAL arrangement with another hospital or provider, including networks and joint ventures.
5	SERVICE NOT AVAILABLE either by the hospital or through a formal contractual arrangement with another hospital or provider.

Code	Description
O	Service is provided by the hospital but IS HOUSED IN BUILDINGS OTHER THAN THE MAIN HOSPITAL BUILDING AND IS BILLED UNDER THE MEDICARE HOSPITAL'S PROVIDER NUMBER.
B	Service is provided by the hospital and IS HOUSED AT BOTH THE MAIN HOSPITAL BUILDING AND IN BUILDINGS OTHER THAN THE MAIN HOSPITAL BUILDING (WHICH IS BILLED UNDER THE MEDICARE HOSPITAL'S PROVIDER NUMBER).

Survey Submission



Welcome: hs0708.

[Portal Home](#)

[Home](#) [Intro to Surveys](#) [Facility Reports](#) [Administrator](#)

Create Report:

Select Facility:

Select Year:

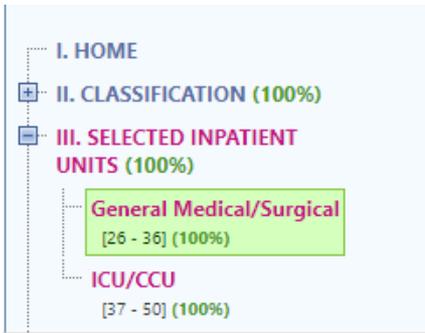
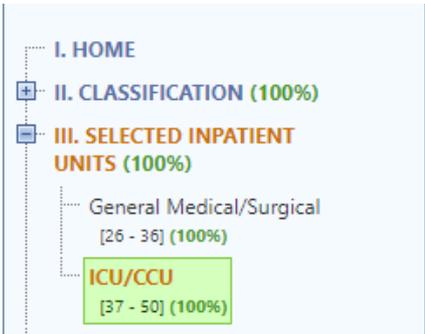
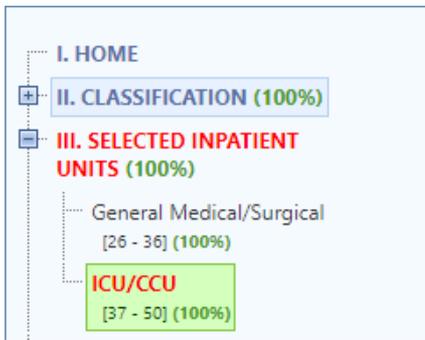
Copyright © 2003 - 2022, WHA Information Center. All Rights Reserved.

There is now a Prefilled Survey Report to view which fields are already completed on the survey

Survey Submission - Edits

- After completing *each page* of the survey, it should Auto Save but you can also click Save
- Clicking Save will ask if you want to run Validation checks (Edits) now
 - Yes will run the Validation checks
 - No will run the Validation checks at the end of the entire survey

The screenshot displays the WHA Center survey interface. The top navigation bar includes links for Home, Extensions, Admin: Open Survey, Report: Hospital Reg. Status, Report: Hospital Survey Status, Report: Survey - All Questions, All Codes, and Report: Survey Data Sets. The main content area is titled "2020 ANNUAL SURVEY: Wisconsin Hospital Association, Madison, 53725." A left sidebar lists survey sections from I. HOME to X. SERVICE QUALITY/PATIENT SAFETY (100%). The main content area shows section XII. HEALTH INFORMATION TECHNOLOGY Expenditures with two data entries: 268. Total Health Information Technology Expenditures - Capital (66,318) and 269. Total Health Information Technology Expenditures - Operating (2,626,987). Two callout boxes are present: one for the "Save/Page Update Button" which states "* Saves data entered on this page." and "* Option to perform page-level edits when page is saved." with an arrow pointing to a save icon; and another for the "Information Button: Link to manual" with an arrow pointing to an information icon.



Red = Hard Edit

Gold = Soft Edit

Purple = Stat Edit

Hard Edit – Mathematical or logical error: Edit that must be fixed to submit survey (e.g., fiscal survey line 1 + line 4 must equal line 5).

Soft Edit – Possible error; values imply an unusual situation: Edit that must be verified to submit survey. (e.g., annual survey – line 160 – Admissions are more than 3% higher/lower than inpatient days in Section III. Are you sure?).

Stats (Statistical) Edits – Possible error; values are substantially different than reported in the previous survey. Edits run after hard and soft edits are addressed. If value is 30% more or less than submitted in the previous year, an edit will appear. (e.g., if total gross revenue is \$1.0 million for FY 2021 and \$1.3 million for FY 2022, an edit will appear).

Survey Submission - Edits

2020 FISCAL SURVEY : Wisconsin Hospital Association, Madison, 53725.

The screenshot shows a web application interface for survey submission. On the left is a navigation tree with the following items: I. HOME, II. GENERAL INFORMATION (100%), III. DETAIL OF PATIENT SERVICE REVENUE (100%), IV. BALANCE SHEET GENERAL FUNDS (100%), V. HOSPITAL INPATIENT UTILIZATION BY PAY SOURCE (100%), and VI. SUMMARY AND. The 'V. HOSPITAL INPATIENT UTILIZATION BY PAY SOURCE' section is highlighted in purple, and its sub-section 'Pay Source [109 - 118] (100%)' is highlighted in green. On the right, a validation check box titled 'V. HOSPITAL INPATIENT UTILIZATION BY PAY SOURCE Pay Source' contains the following text: 'Validation Checks :--', 'There are no page-level errors.', 'There are no hard edits.', 'There are no soft edits.', and 'There are 2 stats edits.'.

- Edits will appear at the top of the page
- The Navigational tree section changes color to purple
- Back on the home page, the Action Needed column will be red

The screenshot shows a table with a header 'Action Needed' in red text. The table contains the following rows: 'Soft Edits' with a yellow warning icon, 'Stats Edits' with a yellow warning icon, 'Submitted' with a thumbs up icon, 'Submit Survey' with a download icon, and another 'Submitted' with a thumbs up icon. A red arrow points to the 'Action Needed' header.

Survey Submission - Edits

Below is an example of hard edits that you may see at the top of the screen. In addition, the question number turns to red.
If you do not have any for that section, it will say “There are no page-level errors”.

Validation Checks :--

Validation Rule 3379 Failed:

The sum of line 199 full-time persons through line 234 full-time persons must equal line 235 full-time persons.

Difference: 1

Validation Rule 3380 Failed:

The sum of line 199 part-time persons through line 234 part-time persons must equal line 235 part-time persons.

Difference: 217

Validation Rule 3604 Failed:

Response required for line(s): 199 Part Time Total No. of Persons (less than 36 Hr/Wk)

Survey Submission - Edits

More edit details can be found by clicking on the question number.

47. TOTAL HOSPITAL FACILITY (Exclude Medicare-certified swing bed inpatient days and non-Medicare-certified, swing-bed inpatient days.)

Total Beds (add lines 27-46) Total discharges (add lines 27-46) Total Inpatient Days (add lines 27-46) Total discharge days (add lines 27-46)

48. MEDICARE-CERTIFIED

Average Number of Beds

49. NON-MEDICARE-CERTIFIED

Average Number of Beds

50. Newborn nursery

Question 47 Hard Edit

TOTAL HOSPITAL FACILITY (Exclude Medicare-certified swing bed inpatient days and non-Medicare-certified, swing-bed inpatient days.)

[Help](#)

Validation Rule 3382 Failed:
The sum of line 27 discharges through line 46 discharges must equal line 47 discharges.
Difference: 1

2018 Answer:
Total Beds (add lines 27-46): 24
Total discharges (add lines 27-46): 1,309
Total Inpatient Days (add lines 27-46): 4,271
Total discharge days (add lines 27-46): 5,312

OK

(Use codes listed above) 1 2 3 4 5 O B

(Use codes listed above) 1 2 3 4 5 O B

(Use codes listed above) O B

Hospital Survey Grid:--

Survey Name	Enter/View Survey	Status	Print PDF	Progress
2020 ANNUAL SURVEY	Incomplete	Open		
2020 FISCAL SURVEY	Incomplete	Open		
2020 MEDICARE COST REPORT SURVEY	View Only	Closed Reopen		
2020 PERSONNEL SURVEY	Incomplete	Open		
2020 UNCOMPENSATED HEALTH CARE PLAN	View Only	Closed Reopen		

Action Needed
Stats Edits
Stats Edits
Submitted
Stats Edits
Submitted



WHAIC Survey

Wisconsin Hospital Association
Madison, 53725
2020 FISCAL SURVEY

[Make Changes](#)
[Print](#)
[Close Window](#)

Statistical Alert(s) :--

Question 112: All other pay sources: (B1) Number of Newborns**
 Current Year Value: 3,239
 Previous Year Value: 39
 Difference: 3,200

I have reviewed this statistical alert and have determined that the submitted value(s) is/are accurate.

Question 113: TOTALS: (B1) Number of Newborns**
 Current Year Value: 3,293
 Previous Year Value: 93
 Difference: 3,200

I have reviewed this statistical alert and have determined that the submitted value(s) is/are accurate.

[I Agree](#)

Wisconsin Hospital Association
Madison, 53725
2020 FISCAL SURVEY

[Make Changes](#)
[Print](#)
[Close Window](#)

Not done yet!

Enter/View Survey	Status	Print PDF	Progress	Action Needed
View Only	Closed Reopen		100%	Submitted
View Only	Closed Reopen		100%	Submitted
View Only	Closed Reopen		100%	Submitted
Ready to Submit	Open		100%	Submit Survey
View Only	Closed Reopen		100%	Submitted

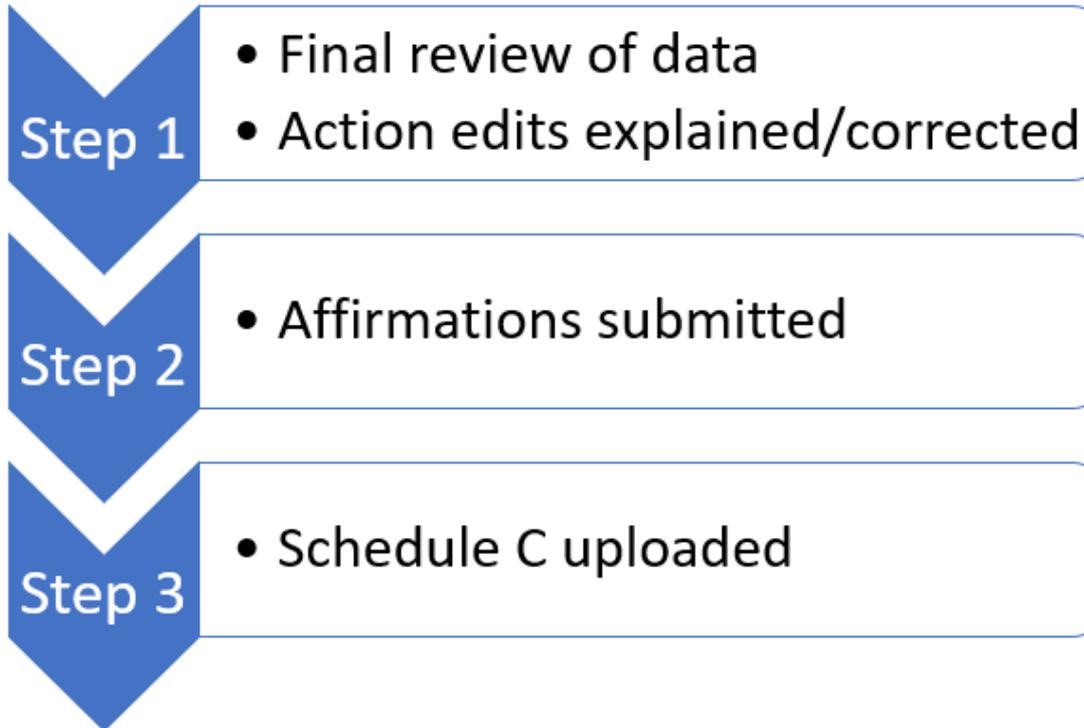


Progress	Complete
100%	Submitted

Completed Submissions:

- ✓ Progress is 100%
- ✓ All surveys have a thumbs up and say Submitted.
- ✓ The final column header says Complete in green.

Final Steps of Submission Process



Affirmation & Schedule C

1. Click on Data Deliverables



2. Click on Survey Affirmations and Schedule C



Welcome to the WHA Information Center Data Deliverables site. Posted files will remain online for 30 days.

**Effective with Q2 2021, profile and validation reports are no longer encrypted, and therefore do not require 7-Zip. We rely on hospitals to implement their own best practices and follow HIPAA and other Security Standards. Please be sure to download your reports and save them to your own secured system for a rolling 5 quarters of data to accurately validate and trend the history of reporting.

You will access your affirmation by clicking links under the Select column. For more information - click Definitions and Frequently Asked Questions.

Survey Affirmations and Schedule C

Definitions and Frequently Asked Questions

Filter for Year:

Select	ID	Facility	Year	FYE	Submitted	Approved By	Schedule C	
Complete Affirmation	000	Wisconsin Hospital Association (Madison)	2020	12/31	No	test	No	Upload
Download	001	Amery Regional Medical Center (Amery)	2020	12/31			No	Upload
Download	002	Aspirus Langlade Hospital (Antigo)	2020	06/30			No	Upload

Instructions for Survey Affirmations and Schedule C Table

- Four columns are sortable: ID, Facility, Submitted, Schedule C
- **Select** has three possible values:
 - **Complete Affirmation** means that all required surveys have been submitted. Click the link to open the affirmation for submission.
 - **Surveys Incomplete** means that not all required surveys have been submitted. Nothing can be done with this facility, except uploading Schedule C.
 - **Download** means the affirmation has already been submitted. The affirmation can be downloaded but no further changes can be made.
- The **Schedule C** column has the values:
 - **Yes or No**, depending on whether the MCR Schedule C has been uploaded.
 - Click **Yes** to view the most recent Schedule C upload.
 - **Upload**-prompts the user to upload the Schedule C. Upload may be visible even after a file has been uploaded. It will be available, and changes can be made until the affirmation has been submitted. After that point, the record is considered locked.
- The **Year** column defaults to the current year but can be changed to view affirmations from previous years.

Affirmation Summary Data

FY Summary Report

Action Edits

Sign & Submit Affirmation

Download / Reopen Surveys

Cancel

2020 Survey Affirmation

000-Wisconsin Hospital Association (Madison)

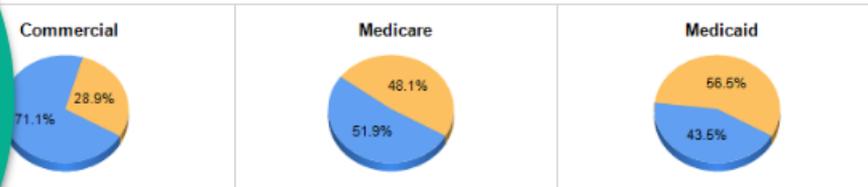
According to the Department of Health Services (DHS) 120.11, hospitals must adhere to standard data verification, review, and comment procedures. This must occur before the data is signed off on via the affirmation statement.

Portions of the Annual and/or Fiscal survey data is publicly available on the WHAIC website in various publications, custom reports, and PricePoint to display Payer Mix details for various payers as well as Charity/Other Uncompensated care. For more information and validation of this data, see the Preliminary Fiscal Year Summary Report on the left toolbar.

Review the Summary Data in the charts and table below for accuracy. Line items listed in red indicate a significant variation of 30% or greater from the previous years reporting. *Review these changes carefully as they are often the focus of public interest. If changes are required for the current year, use the toolbar on the left to reopen the appropriate survey and make necessary corrections. If no corrections to the figures below are required, but you choose to provide a comment, you must do so prior to submitting your electronic affirmation.



Survey Summary Data



	Commercial	Medicare	Medicaid
Charges	\$37,983,055	\$61,740,239	\$15,368,398
Deductions	\$10,972,137	\$29,726,390	\$9,250,244
Net Revenue	\$27,010,918	\$32,013,849	\$7,118,154

	Current Year	Previous Year	Percent Change
Gross Patient Revenue	\$120,702,741	\$120,702,741	0.0%
Less Deductions	\$59,343,330	\$59,343,330	0.0%
Net Patient Revenue	\$61,359,411	\$61,359,411	0.0%
Plus Other Operating Revenue	\$1,202,150	\$1,202,150	0.0%
Total Revenue	\$62,561,561	\$62,561,561	0.0%
Less Expenses	\$61,533,214	\$61,533,214	0.0%
Operating Margin	\$1,028,347	\$1,028,347	0.0%
Operating Margin %	1.6%	1.6%	0.0%
Non-Operating (Gains/Losses)	\$1,073,081	\$1,073,081	0.0%
Net Income (Total Margin)	\$2,101,428	\$2,101,428	0.0%
Total Margin %	3.3%	3.3%	0.0%

	Current Year	Previous Year	Percent Change
Bad Debt	\$2,301,601	\$2,301,601	0.0%
Charity Care	\$1,221,881	\$1,221,881	0.0%
Inpatient Discharges	1,138	1,138	0.0%
Total Outpatient Visits	113,870	113,870	0.0%
Total FTEs	338.0	313.4	7.8%
Total Beds	18	18	0.0%

*Fields highlighted in red indicate 30% or more variance from last year.

May also advance sections by clicking next



Next

2020 Survey Affirmation

000-Wisconsin Hospital Association (Madison)

This document represents a compilation of what will be displayed in the [Guide to Wisconsin Hospitals](#) and is produced for your review prior to publication. WHAIC encourages you to **review this information carefully for accuracy**. Once the data is processed and published on the WHAIC website any egregious errors or misrepresented data cannot be adjusted. This is your last opportunity to validate the data and make any corrections.

This FY Summary Report provides detailed information about your hospital, including (as applicable) general medical-surgical, long-term acute-care, psychiatric, alcohol and other drug abuse, and rehabilitation. The information is drawn from responses to the Annual Survey of Hospitals, the Hospital Fiscal Survey, and the Personnel Survey. Tables present selected measures of utilization, service, staffing and finance. Once the data is published in the Guide, comparison data for hospitals of the same type, in the same analysis area, and for the same patient volume group will be displayed.

To make any corrections, re-open the applicable survey, make corrections and resubmit (including going through the edit process). This will prompt your reports to refresh. Contact WHAIC staff if you have questions.

[Download Preliminary Fiscal Year Summary Report - Printable PDF](#)

[FY Summary FAQ](#)

000 Wisconsin Hospital Association
5510 Research Park Dr PO Box 259038
Madison, WI 53725
608-274-1820

Fiscal Year: 02/01 to 12/31
Type: GMS
Critical Access Hospital
Control: Other Not-For-Profit

County:
Analysis Area: ()

Selected Utilization Statistics	FY 2020	FY 2019	Ratio
Occupancy Rate (%)			
Adult Medical-Surgical	52.9%	53.0%	1.00
Obstetrics	48.6%	48.8%	1.00
Pediatrics	0.0%	0.0%	N/A
Total Hospital	70.3%	70.5%	1.00
Average Census (Patients)			
Adult Medical-Surgical	5.3	5.3	1.00
Obstetrics	0.5	0.5	1.00
Pediatrics	0.0	0.0	N/A
Total Hospital	12.7	12.7	1.00
Average Length of Stay (Days)			
Adult Medical-Surgical	2.9	2.9	1.00
Obstetrics	1.9	1.9	1.00
Pediatrics	0.0	0.0	N/A

The FY Summary Report is a preview of the 3-page document that will be published in The Guide to Wisconsin Hospitals.

- ❖ Action edits must have an explanation provided for the edit. If the edit brings attention to an error, surveys should be reopened and corrected before signing off on the data.

Affirmation Summary Data

FY Summary Report

[Action Edits](#)

Sign & Submit Affirmation

Download / Reopen Surveys

Cancel

2020 Survey Affirmation

The following action edits were marked as accurate at the completion of your survey. An explanation and/or reasoning is required in the space provided below for each questionable **Action Edit** in order to complete submission of the electronic affirmation statement.

If you would like to review the **Action Edits** in the survey and/or make any necessary changes, see the left tool bar "Download/Reopen Surveys". If changes are needed, the survey must be reopened. Once changes are made you will be required to go through the edit process and resubmit the survey in order to regenerate a new Affirmation Statement.

000-Wisconsin Hospital Association (Madison)

Question	Survey	2020	2019	% Change	2018	Trend
235 - TOTAL hospital personnel (add lines 199-234) - Part Time Total No. of P-T hours	ANNUAL	2,765	1,765	57%	1,939	
<p style="color: #0056b3; font-size: 0.8em;">Enter Explanation:</p> <hr style="border: 0.5px solid #ccc;"/>						
113 - TOTALS - (B1) Number of Newborns	FISCAL	3,293	93	3441%	120	
<p style="color: #0056b3; font-size: 0.8em;">Enter Explanation:</p> <hr style="border: 0.5px solid #ccc;"/>						

Next

- ❖ Surveys can be reopened in two ways
 - ❖ from the Download/Reopen page of the Affirmation or
 - ❖ from the Survey Application
- ❖ Note: Once the affirmation is submitted, surveys must be reopened by WHAIC staff and the affirmation will need to be resubmitted.

Affirmation Summary Data

FY Summary Report

Action Edits

Sign & Submit Affirmation

Download / Reopen Surveys

Cancel

2020 Survey Affirmation

000-Wisconsin Hospital Association (Madison)

This section is optional.

You may download a printable PDF of this affirmation or any survey: Survey Affirmation Statement [Download](#)

If survey data needs to be changed, you can reopen the desired survey(s) by clicking the link below. You can then make the changes at the Survey site. Reopening will close and reset this affirmation form.

Annual Survey Only
 Fiscal Survey Only
 Annual and Fiscal Surveys
 All Surveys

[Reopen the survey\(s\) and close this form](#)

000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31

Hospital Survey Grid:--		Status	Survey How-To	
Survey Name	Enter/View Survey	Open	Progress	Action Needed
2019 ANNUAL SURVEY	Continue	Open	4%	
2019 FISCAL SURVEY	New	Open	0%	
2019 MEDICARE COST REPORT SURVEY	New	Open	0%	
2019 PERSONNEL SURVEY	View Only	Closed Reopen	100%	Submitted
2019 UNCOMPENSATED HEALTH CARE PLAN	New	Open	0%	

Affirmations & Schedule C

Home File Downloads File Administration Provider Based Locations Data Affirmations Survey Affirmations and Schedule C

Affirmation Summary Data

FYE Summary Report

Action Edits

[Sign & Submit Affirmation](#)

Download / Reopen Surveys

Cancel

2018 Survey Affirmation

The electronic signature on this affidavit affirms that the chief executive officer, administrator, or designee have reviewed the following data as presented from the surveys submitted by ThedaCare Regional Medical Center - Appleton, Inc. in Appleton.

- Affirmation Summary Data
- FYE Summary Report
- Any Applicable Action Edits

This is a legally binding equivalent

I HEREBY ATTEST, that I or my designee have reviewed the data submitted to WHA Information Center

Provide e-signature for the Electronic Signature

Suzanne Staudenmayer
Name of person submitting the Electronic Signature

Provide additional comments as needed

[Submit Survey Affirmation Statement](#)

- ✓ The electronic signature is provided by the CEO, administrator, or designee.
- ✓ The electronic signature attests that the data has been reviewed and verified internally by the hospital.
- ✓ The signee may designate someone to electronically sign on their behalf.
- ✓ The name of the person submitting the document can be different and will populate based on portal login credentials.
- ✓ Additional comments can be provided to explain variances not included on the Action Edits page.

Affirmations & Schedule C

Home | File Downloads | File Administration | Provider Based Locations | Data Affirmations | Survey Affirmations and Schedule C

Affirmation Summary Data
FYE Summary Report
Action Edits
[Sign & Submit Affirmation](#)
Download / Reopen Surveys
Cancel

2018 Survey Affirmation

The electronic signature on this affidavit affirms that the chief executive officer, administrator, or designee have reviewed the following data as presented from the surveys submitted by ThedaCare Regional Medical Center - Appleton, Inc. in Appleton.

- Affirmation Summary Data
- FYE Summary Report
- Any Applicable Action Edits

This is a legally binding equivalent of the individual's handwritten signature as per [DHS 120.12](#).

I HEREBY ATTEST, that I or my designated representative, to the best of my knowledge, reviewed and verified internally the data that was submitted to WHA Information Center and the data is accurate.

Provide e-signature for the Electronic Survey Affirmation Statement

Suzanne Staudenmayer

Name of person submitting the Electronic Survey Affirmation Statement

Provide additional comments as needed:

Submit when complete

Submit Survey Affirmation Statement

Download Affirmation Statement Printable PDF

From this screen, you can also upload your schedule C. Click [Upload](#).

Remember we need a copy of your schedule C only, not your entire cost report.



Survey Affirmations and Schedule C

Welcome sstaudenmayer8! [[Portal Home](#)]

Home | [File Downloads](#) | [File Administration](#) | [Provider Based Locations](#) | [Data Affirmations](#) | [Survey Affirmations and Schedule C](#)

Survey Affirmations and Schedule C

[Definitions and Frequently Asked Questions](#)

Filter for Year: ▼

Select	ID	Facility	Year	FYE	Submitted	Approved By	Schedule C	Validated
Download	000	Wisconsin Hospital Association (Madison)	2018	12/31	7/23/2019	ttt	Yes	<input checked="" type="checkbox"/>
Complete Affirmation	001	Amery Regional Medical Center (Amery)	2018	12/31	No		No Upload	<input type="checkbox"/>
Complete Affirmation	002	Aspirus Langlade Hospital (Antigo)	2018	06/30	No		No Upload	<input type="checkbox"/>
Complete Affirmation	003	ThedaCare Regional Medical Center - Appleton, Inc. (Appleton)	2018	12/31	No		No Upload	<input type="checkbox"/>
Complete Affirmation	004	Ascension St. Elizabeth Hospital, Inc. (Appleton)	2018	06/30	No		No Upload	<input type="checkbox"/>
Complete Affirmation	006	Memorial Medical Center (Ashland)	2018	09/30	No		No Upload	<input type="checkbox"/>
Complete Affirmation	007	Western Wisconsin Health (Baldwin)	2018	09/30	No		No Upload	<input type="checkbox"/>
Complete Affirmation	008	St Clare Hospital & Health Services (Baraboo)	2018	12/31	No		No Upload	<input type="checkbox"/>
Complete Affirmation	009	Mayo Clinic Health System – Northland in Barron (Barron)	2018	12/31	No		Yes Upload	<input type="checkbox"/>
Complete Affirmation	010	Beaver Dam Community Hospitals Inc (Beaver Dam)	2018	06/30	No		No Upload	<input type="checkbox"/>



COMPUTATION OF RATIO OF COSTS TO CHARGES

Provider CCN: 2200007

Period:
From 01/01/2019
To 12/31/2019

Worksheet C
Part I
Date/Time Prepared:
7/23/2020 10:47 am

Cost Center Description	Total Cost (from Wkst. B, Part I, col. 26)	Therapy Limit Adj.	Title XVIII		Hospital		PPS
			Total Costs	RCE Disallowance	Total Costs	Total Costs	
	1.00	2.00	3.00	4.00	5.00		
INPATIENT ROUTINE SERVICE COST CENTERS							
30.00	03000	ADULTS & PEDIATRICS					10
31.00	03100	INTENSIVE CARE UNIT					10
43.00	04300	NURSERY	0	0	0	0	10
ANCILLARY SERVICE COST CENTERS							
50.00	05000	OPERATING ROOM					10
50.01	05001	ENDOSCOPY					11
51.00	05100	RECOVERY ROOM					10
52.00	05200	DELIVERY ROOM & LABOR ROOM					10
53.00	05300	ANESTHESIOLOGY					10
54.00	05400	RADIOLOGY-DIAGNOSTIC					10
56.00	05600	RADIOISOTOPE					10
57.00	05700	CT SCAN					10
58.00	05800	MAGNETIC RESONANCE IMAGING (MRI)					10
60.00	06000	LABORATORY					10
65.00	06500	RESPIRATORY THERAPY					10
66.00	06600	PHYSICAL THERAPY					10
67.00	06700	OCCUPATIONAL THERAPY					10
68.00	06800	SPEECH PATHOLOGY					10
69.00	06900	ELECTROCARDIOLOGY					10
70.00	07000	ELECTROENCEPHALOGRAPHY					10
71.00	07100	MEDICAL SUPPLIES CHARGED TO PATIENTS					10
72.00	07200	IMPL. DEV. CHARGED TO PATIENT					10
73.00	07300	DRUGS CHARGED TO PATIENTS					10
74.00	07400	RENAL DIALYSIS					10
76.00	03020	ULTRASOUND					10
76.97	07697	CARDIAC REHABILITATION					17
OUTPATIENT SERVICE COST CENTERS							
90.00	09000	CLINIC					10
91.00	09100	EMERGENCY					10
92.00	09200	OBSERVATION BEDS (NON-DISTINCT PART)					10
93.00	04040	DAY CARE SURGERY			0		10
OTHER REIMBURSABLE COST CENTERS							
98.00	09850	OTHER REIMBURSABLE COST CENTERS	0	0	0	0	10
SPECIAL PURPOSE COST CENTERS							
113.00	11300	INTEREST EXPENSE					10
117.00	06950	OTHER SPECIAL PURPOSE					10
200.00		Subtotal (see instructions)		0			10
201.00		Less Observation Beds					10
202.00		Total (see instructions)		0			10

Any
Questions?



Contact Information

You can find more information online at:



Thank You!



www.whainfocenter.com



whainfocenter@wha.org



hscambler@wha.org