

2025 WHAIC Survey Update

Heather Scambler, RHIA, CPC-A - *Program Specialist*

Cindy Case, BA, COC - *Director Data Management and Integrity*

Brian Competente -*Vice President*

March 4, 2026 and March 12, 2026



THE RESPECTED
SOURCE FOR
HEALTH CARE
DATA.

Agenda

About Us & Data Use

Updated Survey Website & Calendar Updates

Important Updates/SSO/Roles & Registration

Survey Application Changes & Survey Validation Cross Reference Guide

Survey Submission Process

Edits/Reports

Affirmation & Schedule C

The WHAIC Team



BRIAN COMPETENTE
Vice President & Privacy
Officer



PHYTO AUNG
Data Visualization Analyst



CINDY CASE
Director Of Data
Management And
Integrity



EMILY HOLDEN
Data Operations Specialist



AMBER HOLLERICH
Health Care Data Analyst



HEATHER SCAMBLER
Program Specialist



STEVE TRINKNER
Data Analyst



JANICE WILLIAMS
Application Development
Manager/Lead Developer

1989

Chapter 153 created;
State carries out data
collection



Oct. 2003

State hands off data
collection to the WHA
Information Center



Jan. 2004

WHAIC begins data
collection, analyzing
& sharing



2005

PricePoint, a price
transparency tool,
is created



2006

CheckPoint, a quality
improvement tool,
is created



The Wisconsin Hospital Association Information Center (WHAIC) is

CELEBRATING TWO DECADES

of Using Data to Improve the Health of Wisconsin Communities.



2016

Health Care Data
Modernization Act
signed into law



2019

WHAIC receives
Medicare QE
Designation



2020

COVID-19 Situational
Awareness
Dashboard is created



2023

PricePoint is redesigned



Oct. 2023

WHAIC celebrates
20 years

100%

OF WI HOSPITALS PROVIDE DATA

COVID DASHBOARD:

1.6M

VIEWS TO-DATE

PRICEPOINT:

15K

VIEWS PER MONTH

100%

FAVORABLE REVIEW
FROM THE STATE



A STRONG PARTNER OF THE STATE

- WHAIC collects hospital and ambulatory surgery center claims data on behalf of the state through Chapter 153.
- The state of Wisconsin provided one-time, start-up expenses of \$750,000 to WHAIC. Since 2004, WHAIC has been entirely self-sustained, requiring no funding from the state of Wisconsin for data collection or its operations.
- WHAIC's fees are approved by the state of Wisconsin and are very affordable.

THE TRUSTED SOURCE OF HEALTH CARE DATA

- WHAIC is trusted by DHS, Wisconsin hospitals, and researchers at Wisconsin's world class universities.
- WHAIC adheres to strict data privacy and security controls, which has enabled WHAIC to receive Medicare claims data through the Medicare QE Designation- the only hospital association in the country to have this recognition.
- Since its inception, WHAIC has received a 100% favorable review from the Dept. of Administration.

A CLOSER LOOK:



“WHAIC continues to make improvements in the accessibility, quality, and utility of hospital data...DHS is appreciative of this partnership and of WHAIC's continued efforts.”

- Karen Timberlake, DHS Secretary, 2021-2022

CONTINUED ACHIEVEMENTS SOLIDIFY ITS IMPACT

- The Healthcare Data Modernization Act, hailed by lawmakers as one of the most important health care policy accomplishments that session, allowed hospital data to be analyzed at a more granular level greatly improving the ability to target community health and wellness resources.
- Increasing the utility of its data collected, WHAIC developed and has managed the Psychiatric Bed Locator and the Wisconsin COVID-19 Dashboard, which has received 1.6 million hits.

A ROBUST SET OF DATA PRODUCTS

- WHAIC provides data products available to data purchasers and the public, including data sets, ready-to-use dashboards, custom reports and several publications.
- For a complete list of data products, visit www.whainfocenter.com/Data-Products



In one year, WHAIC collects:

13.4M

TOTAL RECORDS COLLECTED

3.25M

UNIQUE PATIENTS

\$20B

IN COMMERCIAL CHARGES

\$8.5B

IN MEDICAID CHARGES

\$28.4B

IN MEDICARE CHARGES

Yearly averages from 2019 - 2021.

These millions of records represent over:

Data Collected & Reported

Hospital Surveys (**Mandated by WI Statutes, Chapter 153*)

- Annual Survey of Hospitals
- Hospital Fiscal Survey
- Medicare Cost Report
- Uncompensated Health Care Survey
- Hospital Rate Increases

Data Collected & Reported

How Data is Used

- Analytics
 - Standard Survey Data Sets
 - Custom Data Sets
- Annual Publications
 - Guide to Wisconsin Hospitals
 - Uncompensated Care
- Workforce Analysis & Predictions

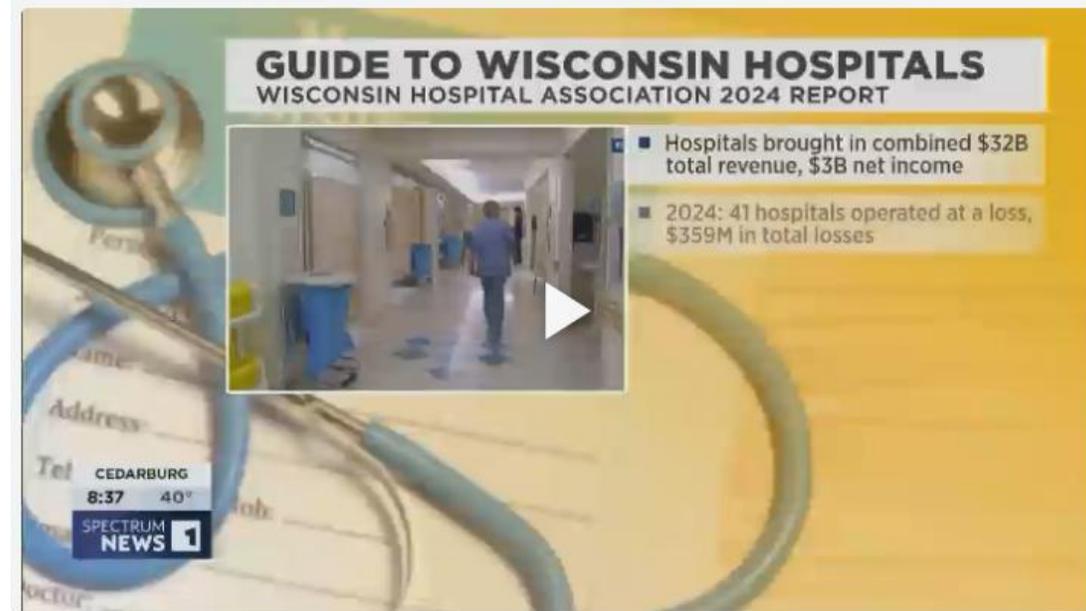
Data Uses

- *Guide to Wisconsin Hospitals*
 - *Utilization*
 - *Services Provided*
 - *Staffing*
 - *Financial Information*



Importance of Survey Data

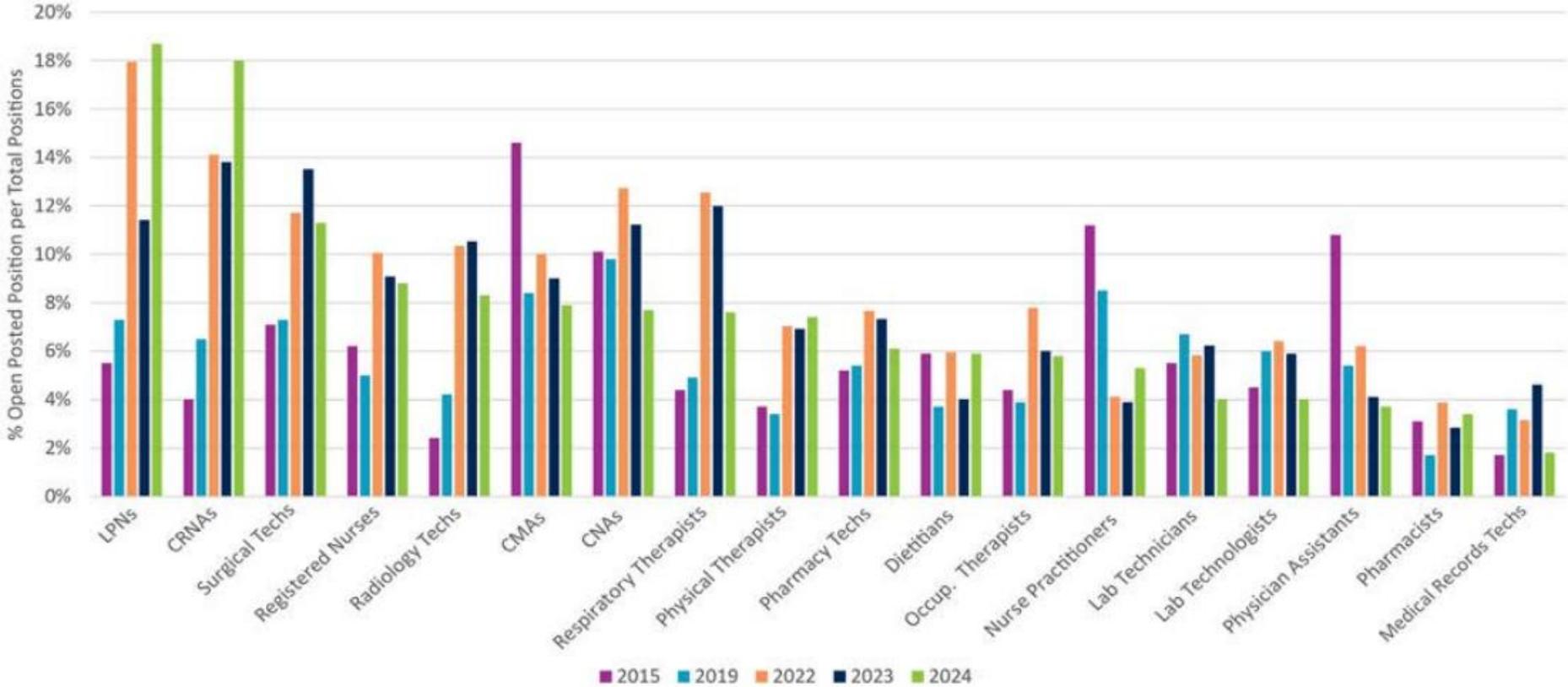
- The video clip.
- <https://iqmediacorp.com/ExternalframeMedia?mediaID=cd625392-81fe-4cd2-90b5-439c7f282d2e&isRM=false&rawMediaType=TV>



Data Uses

Vacancy Rates for Selected Hospital Professions

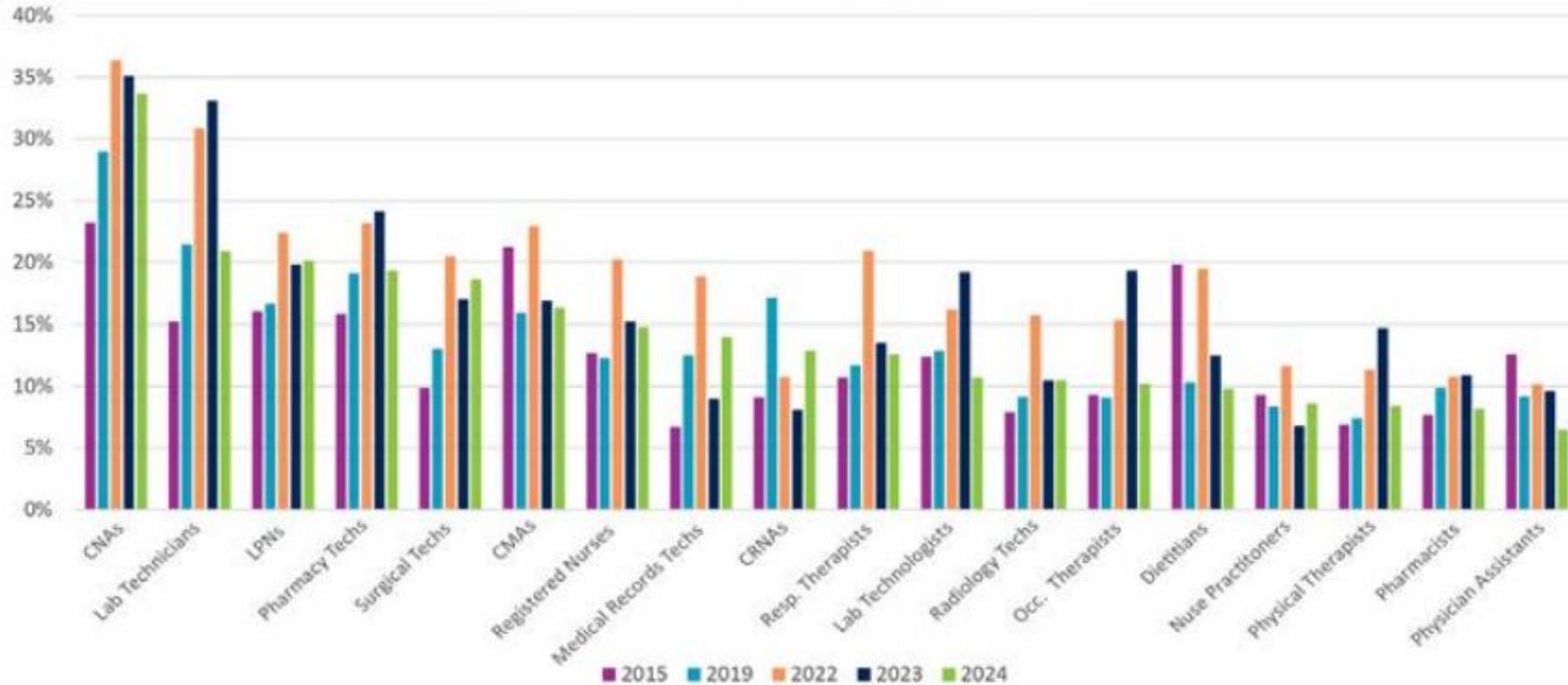
Source: Annual Survey of Hospitals - WHA Information Center



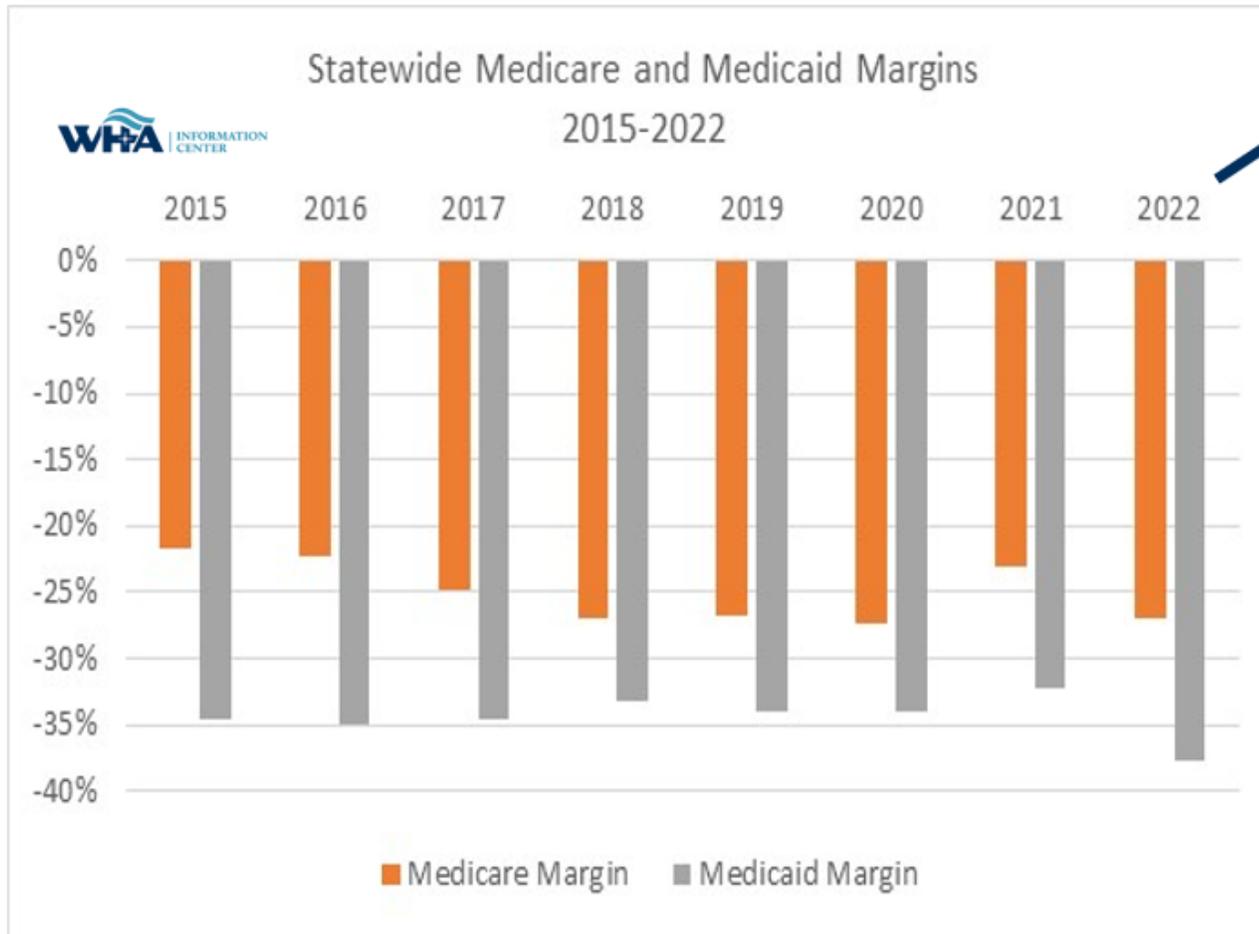
Data Uses

Turnover Rates for Selected Hospital Professions

Source: Annual Survey of Hospitals - WHA Information Center



Impacts on Hospital Payor Mix



In 2022 WI Hospitals lost 27% on Medicare and 38% on Medicaid

- 7 hospitals over 50% Medicaid patients
- 11 are >40% Medicaid
- 58 are >15% Medicaid

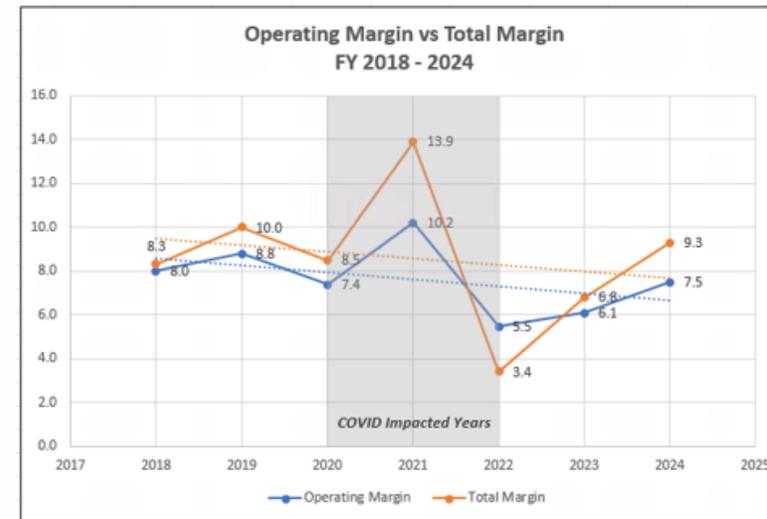
Other Survey Data Uses

- Analytics of Health Systems

WI Hospitals Operating Margin	
FY2022	5.5%
FY2023	6.1%
FY2024	7.5%

WI Health Systems Operating Margin	
FY2022	-0.1%
FY2023	-0.8%
FY2024	2.2%

FY2024 Hospital Numbers at a Glance
60 ↓ operating margin
56 ↓ total margin
41 had negative operating margin (<i>loss</i>)
40 had negative total margin (<i>loss</i>)
4 Critical Access Hospitals had negative total margin (<i>loss</i>)



Recap of Where Survey Data Goes

- **Annual/Personnel Survey**
 - Personnel survey has been combined with the Annual survey.
 - Collects vacancies of select employee categories; number of employees 55 and over; number of employee separations;
 - [Customs & Workforce Development](#)
 - 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](#)
 - **Medicare Cost Report Schedule C**
 - Used to calculate hospital tax
 - **Health System Survey**
 - Collects WI health care system information (if applicable)
- See our [Data Products](#) webpage for more information on publications, custom reports, and data sets.

WHAIC Website



[Newsroom](#) | [About Us](#) | [Applications Login](#)

*The Respected Source for
Health Care Data*

[Analytics](#) ▾ [Data Products](#) ▾ [Data Submitters](#) ▾ [Provider Services](#) ▾ [Transparency](#) ▾

Data Submitters

Wipop ▾

Survey ▾

Application Logins

- Survey Manuals
- Survey Submission Calendar
- News & Bulletins
- Education & Training
- FAQs
- Registration & Other Resources



Wipop



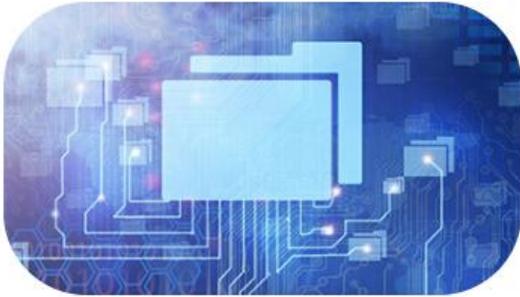
Survey



Application Logins

[Analytics](#) ▾ [Data Products](#) ▾ [Data Submitters](#) ▾ [Provider Services](#) ▾ [Transparency](#) ▾

Application Logins



Wipop



Survey



Data Deliverables

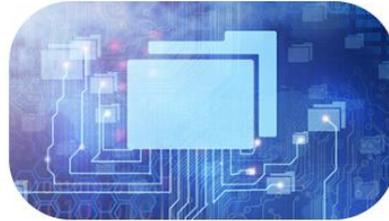
Survey Website

This is the survey website. <https://www.whainfocenter.com/data-submitters/survey>

- Survey Manuals – this tile links to the Survey Submission & Compliance manual, as well as the manual for each survey. It also provides an example of the Medicare Cost Report Schedule C.
- Survey submission calendar - will let you know all deadlines.
- News & Bulletins – The newsletters are typically sent out 2-3 times per year and provide useful information for survey submission. Bulletins are sent if immediate attention is needed for an issue or there is a change to a process/procedure.
- FAQ – Frequently asked questions to assist with survey submission. It is updated as questions come to WHAIC.
- Registration & other resources – provides information on the roles and registration as well as other useful documents such as a listing of all the edits you may encounter.
- Education and Training - will contain this training PowerPoint.

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 Login



Survey Manuals



Survey Submission Calendar



News & Bulletins



Education & Training



FAQs



Registration & Other Resources

Microsoft Accounts - Single Sign On

- Single sign-on is an authentication method that allows users to sign in using one set of credentials to multiple software systems.
- Users sign into Survey using their own Microsoft 365 work account.
- Most will use their facility email address/credentials to access site.
- **WHAIC no longer requires a WHAIC username or password.*

Survey

If you registered using a Microsoft account (hotmail, outlook.com, or business active directory account) you will log in with that email address and password.

Sign In

Register

Roles and Responsibilities – Primary Contacts

There are two roles, **Survey Primary** and **Survey User**.

Primary Contacts:

- Every facility must have at least one, but we prefer two or more Primary Contacts.
- Primary source to monitor the facility user's access.
- Receive communications of Survey submissions and extension requests (if they logged the request), notice of affirmations, and newly registered Survey users.
- Responsible for affirming the data and ensuring the Schedule C is uploaded.
- Authority to electronically sign and submit affirmation statement.

Roles and Responsibilities – Survey Users

Survey Users:

- Limited communications from WHAIC –contacted only in the event there is no response from Primary.
- Surveys Users should expect to receive pertinent information from the Primary contact.
- Access to all surveys but responsibility for compliance lies with the Survey Primary.
- Authority to upload Medicare Cost Report Schedule C.
- May freely contact WHAIC with survey contact changes/facility changes.

Roles and Responsibilities

Important:

- We will continue to protect the data by:
- Reaching out to facilities when we receive bounce back emails.
- Monitoring and working toward at least two primary contacts.
- Facility is responsible for monitoring, updating and/or notifying WHAIC of any Staff changes or termed employees.

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
Jeremiah Test	Brockman	Tester	jbrockman@whaorg.onmicrosoft.com	User

- Contact us at: whainfocenter@wha.org

Statutory Compliance



- *DHS 120.12 Data submission procedures*
- “Every hospital shall annually file with [WHAIC] within 120 [4 months] calendar days following the close of the hospital’s fiscal year.”
- “[WHAIC] may grant an extension for up to 30 calendar days.”

Additional Statutory Reminders

- **Hospitals that close/mergers/acquisitions:**

- Survey data is required from a closing facility to include the Uncompensated, Fiscal and Annual/Personnel surveys to the best of the facilities ability.
- A Medicare Cost Report is required, even if it is for a partial year.

Waiver from data submission requirements.

1. DHS 120.12(3)(f)1.1. There shall be no waivers from the data submission requirements under this subsection. **2.** Hospitals that close, merge or change their reporting fiscal year shall submit an annual survey for the applicable partial year.
2. There is no exception to uncompensated or fiscal survey submissions.

- **Hospitals that change fiscal years**

- Ensure that the Annual/Personnel, Fiscal, Uncompensated and Medicare Cost Report includes **12 months of data**.

- **Notify us of all changes as soon as possible**

Open	2025 SURVEYS OPEN: Week of February 11 th *
Calendar	Follow calendar to submit data by due date listed (based on FYE). *This year there is a special one-time calendar.*
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 Overview

Hospital / Health System Survey Submission - Fiscal Year End 2025

Annual/Personnel*, Fiscal, Uncompensated, Medicare Cost Report and Health System

Surveys are open for submission on November 1	
MARCH – JUNE FYE (APR/JULY 1 FY)	
March – June FYE Extension Request Deadline	12/19/2025
March – June FYE <i>Standard</i> Submission Deadline	01/02/2026
March – June FYE <i>Extended</i> Submission Deadline (submit request by deadline)	02/03/2026
March – June Affirmation Deadline	02/13/2026
JULY – SEPTEMBER FYE (AUG/OCT 1 FY)	
July – September FYE Extension Request Deadline	01/23/2026
July – September FYE <i>Standard</i> Submission Deadline	01/30/2026
July – September FYE <i>Extended</i> Submission Deadline (submit request by deadline)	03/03/2026
July – September Affirmation Deadline	03/13/2026
DECEMBER FYE (JAN 1 FY)	
December FYE Extension Request Deadline	04/17/2026
December FYE <i>Standard</i> Submission Deadline	04/29/2026
December FYE <i>Extended</i> Submission Deadline (submit request by deadline)	05/29/2026
December Affirmation Deadline	06/12/2026
MEDICARE COST REPORT SUBMISSION	
January – June FYE Submission Deadline & Upload Schedule C Copy in Data Deliverables by Affirmation Deadline	02/03/2026
July – December FYE Submission Deadline & Upload Schedule C Copy in Data Deliverables by Affirmation Deadline	06/03/2026

- The calendar dates reflect some combined FYE survey submission timelines to improve efficiency.
- ***Annual/Personnel Surveys** – Personnel survey was combined with the Annual survey in FY 2024.
- **Medicare Cost Report (MCR)** – complete survey and upload [Worksheet C](#) as applicable. Due dates are allowed to match [CMS](#) due dates. If given a CMS extension, please inform WHAIC as soon as possible via email with the attached CMS approval letter.
- **Health System Survey** completion is included in the 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**.
- All surveys are supported through a comprehensive manual on the [WHAIC website](#).

Hospital / Health System Survey Submission – EXCEPTION CALENDAR for Fiscal Year End 2025

Due to the late release of the survey, new submission dates are provided below. Feel free to contact [WHAIC](#) with questions.

Annual/Personnel*, Fiscal, Uncompensated, Medicare Cost Report and Health System

Expected Survey Open Date: TBD	
JANUARY - DECEMBER FYE	
<i>For previous year's deadlines (March-Sept,) if possible, complete and submit your surveys as time permits prior to April deadlines. That allows WHAIC time to validate surveys in a timely manner.</i>	
FY 2025 Extension Request Deadline	04/17/2026
FY 2025 Standard Submission Deadline	04/29/2026
FY 2025 Extended Submission Deadline (submit request by deadline)	05/29/2026
FY 2025 Affirmation Deadline	06/12/2026
MEDICARE COST REPORT SUBMISSION	
January – June FYE Submission Deadline & Upload Schedule C Copy in Data Deliverables by Affirmation Deadline	03/03/2026
July – December FYE Submission Deadline & Upload Schedule C Copy in Data Deliverables by Affirmation Deadline	06/03/2026

- This is a one-time exception calendar to account for the delayed availability of the surveys for FY2025. The submission dates have been adjusted. The January-June FYE for the Medicare Cost Report was updated as well.
- The statute remains the same with the standard deadlines. However, given the late release, we will continue to be flexible with your survey submissions.
- ***Annual/Personnel Surveys** – Personnel survey was combined with the Annual survey in FY 2024.
- **Medicare Cost Report (MCR)** – complete survey and upload [Worksheet C](#) as applicable. Due dates are allowed to match [CMS](#) due dates. If given a CMS extension, please inform WHAIC as soon as possible via email with the attached CMS approval letter.
- **Health System Survey** completion is included in the 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**.
- All surveys are supported through a comprehensive manual on the [WHAIC website](#).

Recap of Facility Reminders

- **New facility/hospital requirements** – when a new facility opens:
 - Primary contact is required for WHAIC to communicate important information.
 - Newly opened facilities can wait to submit Annual/Personnel, Fiscal, Uncompensated surveys until they have been open a full fiscal year.
 - A Medicare Cost Report (MCR) is required, even if it is for a partial year (6 months or more).
 - If a facility is separately licensed by the [state](#), it's required to submit its own hospital Annual/Personnel, Fiscal, and Uncompensated surveys.
 - Hospitals sharing a MCR report need to notify WHAIC and determine the primary location; only need to submit one Cost Report survey and Worksheet/Schedule C.

Survey Updates – NEW for 2025



Q&A From 2024 Training

- ❖ Q. Can WHAIC get the Schedule C information directly from CMS (rather than hospitals directly entering the data into the MCR survey)?
A. The answer is no because this is a statutory requirement.
- ❖ Q. Can the Annual and Fiscal survey affirmations be separated by survey?
A. The answer is no. The affirmation is a compilation of both the annual and fiscal surveys. The material is drawn together to put into multiple publications.
- ❖ Q. Can the payroll date be changed from the week of September 30th to December 31st at midnight?
A. The answer is no. The week was picked to represent an average normal work week.



FY 2025 Highlights & Improvements

➤ Survey Validation Cross Reference Guide

- Useful tool for validating the affirmation data.
- Goes through each item on the affirmation and cross references to questions on the annual and fiscal surveys.
- It can be found once the surveys are submitted on the affirmation page under Validation Tips.
- It is also found under [Data Deliverables](#).

Affirmation Summary Data
FY Summary Report
Action Edits
Sign & Submit Affirmation
Reopen Surveys
Validation Tips

Summary Report Description	Survey and survey question or formula that corresponds to the question/section.
Selected Financial Statistics	Fiscal Survey
Gross Revenue as % of Total Gross Patient Revenue	Q.37 + Q.38 Q.39 + Q.40 Q.43 + Q.44 + Q.45
<ul style="list-style-type: none"> • Medicare • Medicaid • Commercial 	
• All Other Public Sources \$	Q.41 + Q.42 + Q.46 + Q.47 + Q.48 = \$
• All Other Public Sources %	(Q.41 + Q.42 + Q.46 + Q.47 + Q.48) ÷ Q.36 = %
• All other Public Sources Ratio	Current FY value ÷ Previous FY value = Ratio

Summary Report Description	Survey and survey question or formula that corresponds to the question/section.
	Pediatrics = Inpatient days Q. 36 ÷ days in year
Average Length of Stay ANNUAL Survey Inpatient Days ÷ Discharges	Total Hospital = Inpatient days Q. 171 ÷ discharges Q. 172 Adult Med/Surg = Inpatient days ÷ discharges Q. 29 OB = Inpatient days ÷ discharges Q. 33 Pediatrics = Inpatient days ÷ discharges Q. 36
Surgical operations <ul style="list-style-type: none"> • Inpatient • Outpatient 	Annual Q. 157, 158, 159
Outpatient Visits <ul style="list-style-type: none"> • Non-Emergency Visits • Emergency 	Annual Q. 160-163 Non-Emergency Visits <u>is</u> not the same as what's listed in the survey. The FY Summary Report is adding Observation beds (Q.162) to Other visits (Q.161) to get the number.
Full-Time Equivalents (FTEs) Total FTEs: A calculation that comes from the Annual survey.	WHAIC calculation FTE = Part-Time Total No. of P-T Hours ÷ Workweek that the hospital indicates in q. 254. + Full Time Total No. of Persons



FY 2025 Highlights & Improvements

Survey FAQ updated:

- ✓ How to determine whether an ancillary service is provided by the hospital vs system.
- ✓ How to determine whether to choose hospital or contract for telemedicine.
- ✓ Additional Personnel examples.
- ✓ Where to find fillable survey templates to hand out to staff that need to complete the surveys.
- ✓ How to view last year's survey's answers.
- ✓ How to view the survey answers before submitting the survey.

- ✓ The Survey FAQ can be accessed [here](#).

FY 2025 Current Improvements

- The Annual survey manual and the online survey instructions now have better explanations:
 - All Sections have updated instructions to provide more clarity and more examples.
 - Section II. Selected Inpatient Units: updated instructions for the H, S, C, N Codes; new soft edits for average LOS.

- If a hospital has **beds of more than one type in a mixed unit**, report **all bed and utilization data** for all bed types on the line corresponding to the mixed unit. Code the mixed unit as **H**.
- For each service listed, enter the utilization data (# of discharges) in the text box and select the **status code (H, S, C, N)** that best describes where the service is offered **as of the last day of the fiscal year**.
- Code **H** allows zeroes for all four boxes (beds/discharges/inpatient days/discharge days), however if your hospital does provide the service, it would be beneficial for you to indicate the # of discharges, inpatient days and discharge days for tools such as [PricePoint](#) and the Hospital Finder.
- Soft edits will be triggered if the totals are less than or above the average Length of Stay (LOS) for this type of service or treatment. The LOS is calculated by number of inpatient days/discharges. (For example: 12,828 inpatient days divided by 2,015 number of discharges = 6.4 days.) The same edit applies to discharge days. If this applies, and the data is correct, acknowledge the question.
- To review the previous year's response, click on the underlined question number.

INPATIENT RADIO BUTTON OPTIONS:

Code	Description/Usage
H	Choose "H" if the service is provided in or by this hospital, regardless of whether it is in a separate or distinct unit. If the service is provided in a separate or distinct unit, include the number of beds and utilization data for that inpatient unit. For example, choose "H" if the hospital provides orthopedic services but not in a distinct or separate unit, and enter zeroes for all corresponding fields.
S	Choose "S" if the service is not provided in this hospital but is available within the health care system. Enter zeroes for all corresponding fields. (This is to prevent double counting of data for the hospital in the health care system that does provide the service.)
C	Choose "C" if the service is not maintained by the hospital but is available in the hospital or at another facility through a formal contractual arrangement with another hospital or provider, including networks or joint ventures.
N	Choose "N" if the service is not available, either within the hospital or through a formal contractual arrangement with another hospital or provider. Enter zeroes for all corresponding fields.

FY 2025 Current Improvements

I. HOSPITAL INFORMATION AND CLASSIFICATION (4%) ▾

II. SELECTED INPATIENT UNITS (5%) ▲

General Medical / Surgical / ICU [28 - 55] (5%)

III. SELECTED ANCILLARY AND OTHER SERVICES (0%) ▾

IV. SELECTED SERVICE UTILIZATION (0%) ▾

V. TOTAL FACILITY UTILIZATION AND BEDS (0%) ▾

VI. MEDICAL STAFF (0%) ▾

VII. PERSONNEL ON HOSPITAL PAYROLL (4%) ▾

VIII. COMMUNITY BENEFITS AND POPULATION HEALTH (0%) ▾

IX. SERVICE QUALITY/ PATIENT SAFETY (0%) ▾

X. INFORMATION TECHNOLOGY AND CYBERSECURITY (0%) ▾

XI. SOCIAL DETERMINANTS OF HEALTH (SDOH) (0%) ▾

II. SELECTED INPATIENT UNITS

General Medical / Surgical / ICU 📱 ⓘ 🗄

Instructions and Guidelines:
If information for a category is **zero**, enter **0**. If a category is **Not Applicable**, also enter **0**. **Do not use spaces, dashes, NA, N/AV, or M.**

Code	Description
H	Choose "H" if the service is provided in or by this hospital, regardless of whether it is in a separate or distinct unit. If the service is provided in a separate or distinct unit, include the number of beds and utilization data for that inpatient unit. For example, choose "H" if orthopedic services are provided but not in a distinct or separate unit, and enter zeros for all corresponding fields.
S	Choose "S" if the service is not provided in this hospital but is available within the health care system.
C	Choose "C" if the service is not maintained by the hospital but is available in the hospital or at another facility through a formal contractual arrangement with another hospital or provider, including networks or joint ventures.
N	Choose "N" if the service is not available, either within the hospital or through a formal contractual arrangement with another hospital or provider.

NOTE: WHAIC is interested in whether or not the service is offered.

28. Acute Long-Term Care (Hospital Only)

Beds set-up and staffed last day of fiscal year	Number of discharges	Inpatient days for fiscal year	Discharge days	(Use codes listed above)
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	○ ○ ○ ○ H S C N

29. Adult Medical / Surgical, Acute (include gynecology)

Beds set-up and staffed last day of fiscal year	Number of discharges	Inpatient days for fiscal year	Discharge days	(Use codes listed above)
<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="15"/>	<input type="text" value="15"/>	○ ○ ○ ○ H S C N

30. Alcohol/ Substance Use Disorder (Inpatient Care)

Beds set-up and staffed last day of fiscal year	Number of discharges	Inpatient days for fiscal year	Discharge days	(Use codes listed above)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	○ ○ ○ ○ H S C N

FY 2025 Current Improvements

- The Annual survey manual now has better explanations:
 - Section III. Selected Ancillary and Other Services instructions and the H, S, C, N Codes.

Code	Code Description/Usage
H	Choose "H" if the service is provided in or by the hospital, regardless of whether it is in a separate or distinct unit.
S	Choose "S" if the service is not provided in this hospital but is available within the health care system
C	Choose "C" if the service is not maintained by the hospital but is available in the hospital or at another facility through a formal contractual arrangement with another hospital or provider, including networks or joint ventures
N	Choose "N" if the service is not available, either within the hospital or through a formal contractual arrangement with another hospital or provider

FY 2025 Current Improvements

In addition, the Annual survey has the following changes:

- ✓ *Rehabilitation and Physical Medicine Inpatient* question is back on the Annual survey, Section II, Inpatient Services.
- ✓ Duplicate question regarding *On Campus Emergency department* was removed in Annual, Section III, Ancillary Services.
- ✓ Combined *Surgical Technologist and Surgical Technician* in Annual survey, Personnel section.
- ✓ *Swing Bed* -This question was removed because it's a duplicate of the information already collected in Questions 53 (*Medicare Certified Swing Unit*) and 54 (*Non-Medicare Certified Swing Unit*).
- ✓ *ICU/CCU* was added as a separate question to the Annual survey, Section II, Inpatient Services.
- ✓ *RNs hired from nursing schools*, a zero (0) option was added to the answers on the Annual survey, Section VII, Personnel.

FY 2025 Important **SAVE** Reminders

2025 revisions included edit and save updates.

- The current edit updates run more frequently than in the past. You may see, for instance, the red hard edits hitting before you are done entering all of the data if you are hitting save as you go along. You will also see the “Survey Saved” message.
- This simply means for this year we are asking you to save more often so as not to lose data. We don’t anticipate that happening, but we are trying to be proactive to prevent any inadvertent issues.
- For the past few years, we had auto-save that was consistently running every 3 seconds, but the edits were not running in the background until the survey was complete. Now the edits run right away and according to our programmer, it’s too late to change it this year. We are looking at process improvements for next year.
- One final point about saving, is the issue of timing-out of the survey. Our programmer has adjusted the system to not time-out however your system may have session time-outs and therefore we encourage you to save your work before leaving the application as a precaution.

2026 improvements we are seeking guidance on.

- As you complete the survey, we are interested in your thoughts as to edits running as you work through the survey or running edits after you complete the survey, as in past years.
- We are looking for direction on auto-save as well. We realize continuous saving can be time-consuming but at the same time we don’t want to create frustration with the survey process.
- The feedback would be most effective in an email that we can compile and share with our programmer.

FY 2025 Important Reminders

- ✓ Annual survey, Section VII Personnel – With these lengthy sections, and in order not to lose any entered data, we recommended you click on Save often.
- ✓ The questions will turn red, which is correct, because they are required fields.
- ✓ We are interested in your feedback as you complete this section, or if there are issues.
- ✓ whainfocenter@wha.org

VII. PERSONNEL ON HOSPITAL PAYROLL Occupational Personnel Section A-N

Instructions and Guidelines:

All personnel data must be reported for the week of September 30, regardless of the hospital's fiscal year end date. If the hospital closed prior to September 30, use the last normal work week the hospital was open as your full week. A normal week means the numbers closely reflect average data for the year.

Report hospital data only.

- Hospital personnel shared with the nursing home should be reported as part-time employees, report only hospital hours.
- Do not report full-time equivalents or portions.
- Do not use dashes or N/A. Round to nearest whole number. Do not use decimals.
- If information for a category is zero and/or does not apply, fill in '0'.
- Include trainees and members of religious orders if on the hospital payroll as of September 30.
- Personnel working in more than one area should be counted only once and in the category of their primary responsibility.
- *Number of Employee Separations should be counted for the entire fiscal year and not only for the week of September 30.

209. Administrators

FT Total No. of Persons (35 Hr/Wk or more) <input type="text" value="0"/>	PT Total No. of Persons (less than 35 Hr/Wk) <input type="text" value="0"/>	PT Total No. of P-T hours <input type="text" value="0"/>
FT Total No. of Vacant Persons (35 Hr/Wk or more) <input type="text" value="0"/>	PT Total No. of Vacant Persons (Less than 35 Hr/Wk) <input type="text" value="0"/>	PT Total No. of Vacant P-T hours <input type="text" value="0"/>
Number of Consultants and/or Contracted Staff <input type="text" value="0"/>	Employees Over 55 <input type="text" value="0"/>	Employee Separations* <input type="text" value="0"/>

210. Certified nurse midwives

FT Total No. of Persons (35 Hr/Wk or more) <input type="text" value=""/>	PT Total No. of Persons (less than 35 Hr/Wk) <input type="text" value=""/>	Part Time Total No. of P-T hours <input type="text" value=""/>
FT Total No. of Vacant Persons (35 Hr/Wk or more) <input type="text" value=""/>	PT Total No. of Vacant Persons (Less than 35 Hr/Wk) <input type="text" value=""/>	PT Total No. of Vacant P-T hours <input type="text" value=""/>
Number of Consultants and/or Contracted Staff <input type="text" value=""/>	Employees Over 55 <input type="text" value=""/>	Employee Separations* <input type="text" value=""/>

211. Certified registered nurse anesthetist (CRNA)

FT Total No. of Persons (35 Hr/Wk or more) <input type="text" value=""/>	PT Total No. of Persons (less than 35 Hr/Wk) <input type="text" value=""/>	PT Total No. of P-T hours <input type="text" value=""/>
FT Total No. of Vacant Persons (35 Hr/Wk or more) <input type="text" value=""/>	PT Total No. of Vacant Persons (Less than 35 Hr/Wk) <input type="text" value=""/>	PT Total No. of Vacant P-T hours <input type="text" value=""/>

FY 2025 Important Reminders

- ✓ **Fiscal survey, Section IV (Hospital Inpatient Utilization by Pay Source) -** When entering data, if the number of inpatient discharges is entered into this section, there should be data in the number of discharge days fields and not zeros.
- ✓ We have refined the edits for this section to get more accurate meaningful data.
- ✓ New edits are going to populate if you enter discharges without discharge days, which is what we've seen in the past.

IV. HOSPITAL INPATIENT UTILIZATION BY PAY SOURCE
Pay Source

Instructions and Guidelines:
* This figure should include all inpatients discharged during the reporting period. Report the number of adults, pediatric, and intensive and intermediate care neonatal patients (including deaths). Exclude newborn, Medicare-certified swing bed, and hospital unit transfer patients.
** Exclude fetal deaths.
*** Include both skilled and intermediate Medicare-certified swing beds.

The following lines and columns refer to hospital inpatient utilization and are divided into four shaded collection blocks, one for acute-care patients (inpatients), one for discharge days, one for newborns, and one for Newborn Discharge Days.

The next set of questions are divided into 2 columns: number of discharges from Medicare-certified swing-bed patients and number of discharge days. Refer to the notes indicated by asterisks

106. Medicare (T-18) Including HMOs reimbursed by T-18

(A1) Number of Inpatient Discharges*	(A2) Number of Discharge Days*	(B1) Number of Newborns**	(B2) Number of Newborn Discharge Days**
15	0	0	0

107. Medical Assistance (T-19) Including HMOs reimbursed by T-19

(A1) Number of Inpatient Discharges*	(A2) Number of Discharge Days*	(B1) Number of Newborns**	(B2) Number of Newborn Discharge Days**
20	0	0	0

108. Self-Pay

(A1) Number of Inpatient Discharges*	(A2) Number of Discharge Days*	(B1) Number of Newborns**	(B2) Number of Newborn Discharge Days**
30	0	0	0

109. All other pay sources

(A1) Number of Inpatient Discharges*	(A2) Number of Discharge Days*	(B1) Number of Newborns**	(B2) Number of Newborn Discharge Days**
30	0	0	0

FY 2025 Important Reminders

✓ Fiscal survey, all Sections:

- ✓ When entering data, if your columns are not adding up, click on the calculator and then click Save.
- ✓ Need to enter all the data in the entire survey because some calculations are dependent on other line items.
- ✓ Recommend going back to Section I, opening each subsection, click calculator and save to recalculate the line items and get rid of the red hard edits. (For example, line 3 Total Revenue is dependent on other lines in the survey.)

IV. HOSPITAL INPATIENT UTILIZATION BY PAY SOURCE

Pay Source

Instructions and Guidelines:
* This figure should include all inpatients discharged during the reporting period. Report the number of adults, pediatric, and intensive and intermediate care neonatal patients (including deaths). Exclude newborn, Medicare-certified swing bed, and hospital unit transfer patients.
** Exclude fetal deaths.
*** Include both skilled and intermediate Medicare-certified swing beds.
The following lines and columns refer to hospital inpatient utilization and are divided into four shaded collection blocks, one for acute-care patients (inpatients), one for discharge days, one for newborns, and one for Newborn Discharge Days.
The next set of questions are divided into 2 columns: number of discharges from Medicare-certified swing-bed patients and number of discharge days. Refer to the notes indicated by asterisks.

106. Medicare (T-18) Including HMOs reimbursed by T-18

(A1) Number of Inpatient Discharges*	(A2) Number of Discharge Days*	(B1) Number of Newborns**	(B2) Number of Newborn Discharge Days**
6,052	32,786	0	0

107. Medical Assistance (T-19) Including HMOs reimbursed by T-19

(A1) Number of Inpatient Discharges*	(A2) Number of Discharge Days*	(B1) Number of Newborns**	(B2) Number of Newborn Discharge Days**
1,783	7,663	418	725

108. Self-Pay

(A1) Number of Inpatient Discharges*	(A2) Number of Discharge Days*	(B1) Number of Newborns**	(B2) Number of Newborn Discharge Days**
137	520	130	204

109. All other pay sources

(A1) Number of Inpatient Discharges*	(A2) Number of Discharge Days*	(B1) Number of Newborns**	(B2) Number of Newborn Discharge Days**
3,047	11,313	593	972

110. TOTALS

(A1) Number of Inpatient Discharges*	(A2) Number of Discharge Days*	(B1) Number of Newborns**	(B2) Number of Newborn Discharge Days**
11,019	52,282	1,141	1,901

FY 2025 Important Reminders

✓ Medicare Cost Report Survey (MCR)

- When entering data, account for all lines from the Schedule C.
- WHAIC added additional instructions to Question 40 to include Line 76 through Line 87.
- A new question (Question 66) was added to account for any additional cost centers that have not been included in the survey.

40. Other Ancillary (if multiple "Other ancillary services", provide sum totals below) - Line 76 through Line 87

Inpatient \$	Outpatient \$	Total \$
<input type="text"/>	<input type="text"/>	<input type="text"/>

66. Account for any additional cost centers that have not been included in this survey

Inpatient \$	Outpatient \$	Total \$
44 <input type="text"/>	44 <input type="text"/>	44 <input type="text"/>

Health System Survey

- Health System Surveys (HSS) are entered under a 900 series system name.
- They are due at the same time as the other surveys.
- Those responsible for the HSS must have their own current portal account. If you need access and do not have it, contact WHAIC.



Select Facility:	902 - Aspirus
	902 - Aspirus
GENERAL INFORMATION submission encompassed Wisconsin State Stat	903 - Aurora Health Care
	904 - Bellin Health System
Each section of the s	905 - Beloit Health System (System)
	906 - Children's Wisconsin
	908 - Froedtert ThedaCare, South Region
Hospital Sur	909 - Gundersen Health System

Survey Submission Process



3-Digit Facility ID

3-Digit Facility ID

- The unique 3-digit identification number assigned to each facility by WHAIC.
- You will notice this ID in the Select Facility drop-down.
- Please include this number in the subject line when contacting WHAIC.



Select Facility: 000 - WHA Test Hospital

000 - WHA Test Ho
Hospital Surveys:

Survey Name
2024 ANNUAL SURV
2024 FISCAL SURV

000 - WHA Test Hospital
001 - Amery Regional Medical Center
002 - Aspirus Langlade Hospital
003 - ThedaCare Regional Medical Center - Appleton, Inc.
004 - Ascension NE Wisconsin - St. Elizabeth Campus
006 - Memorial Medical Center
007 - Western Wisconsin Health

Survey Application

WHA INFORMATION CENTER

Welcome, Heather S. | [Sign out](#)
[Administration](#) | [Edit Survey](#)

Survey

Home User Links Survey Manuals Data Detail Data Deliverables

WHA Website
Survey Webpage
Contact Us
Calendar
FAQs
Survey How-to
News/Bulletins
Roles

Annual Survey
Fiscal Survey
Uncompensated Care Survey
Medicare Cost Report
Health System Survey

Pre-Filled Report
Survey Edit Checks
Registration & Resources
Annual Survey Template
Fiscal Survey Template
MCR Survey Template
Uncompensated Survey Template
Healthcare System Survey Template

Affirmation and Schedule C Upload

9/3/2024 [2024 Surveys](#)

Survey Submission

Attention Survey Users

As of November 1, 2024, the WHAIC Survey application has been updated and moved out of the old WHAIC Portal. The application login process has also changed to a Single Sign On (SSO) system. This means you will use your ORGANIZATION CREDENTIALS in order to log in.

Key Submission Guidelines:

- **Hospital Details:** be prepared to provide your hospital's Medicare, Medicaid, accreditation details and status, along with other general information about the hospital, inpatient beds and details about each unit. To reference your facility ID – click here: [3-digit WHA Information Center Hospital ID Number](#).
- **Completeness and Accuracy:** All data items must be completed. For items deemed not applicable, enter "0." Responses of "not available" or "missing" are unacceptable.
- **Pre-filled radio buttons:** The facility is responsible for making any necessary changes and/or updates to each pre-filled section.
- **Rounding/Decimals:** Round all financial figures to the nearest dollar.
- **Hospital changes:** Hospitals that merge, close, or change their reporting fiscal year are still required to submit data covering a **full 12-month period**.
- **Separate Submissions:** Hospitals affiliated with a healthcare system must submit individual surveys for each entity unless otherwise arranged.

Survey Submission Home Page



Welcome, Heather S. | [Sign out](#)
[Administration](#) | [Edit Survey](#)

Survey

[Home](#) [User Links](#) [Survey Manuals](#) [Data Detail](#) [Data Deliverables](#)

Select Facility:

Year:

[Extensions](#)

Hospital Surveys:

000 - WHA Test Hospital -- (), FY End: 12/31

Survey Name	Enter/View Survey	Status	Print/View Survey	Progress	Action Needed	Date Submitted
2025 ANNUAL SURVEY	Continue	Open		<div><div style="width: 4%;">4%</div></div>		
2025 FISCAL SURVEY	Continue	Open		<div><div style="width: 1%;">1%</div></div>		
2025 MEDICARE COST REPORT SURVEY	Continue	Open		<div><div style="width: 1%;">1%</div></div>		
2025 UNCOMPENSATED HEALTH CARE PLAN	New	Open		<div><div style="width: 0%;">0%</div></div>		

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
Jeremiah Test	Brockman	Tester	jbrockman@whaorg.onmicrosoft.com	User



Filing An Extension

- Extension requests can be completed by hospital staff inside the survey application.
- Process Improvement highlights:
 - WHAIC made the extension request process more efficient this year. You can choose one or more facilities (if applicable) and one or more surveys. Select All Facilities if you are part of a system.
- Once requested, an automated email will be sent. Only the person requesting the extension is notified of the acceptance, so please share this information with others who are responsible for the survey(s).

Select Facility: 132 - Stoughton Health Year: 2025 [Extensions](#)

Hospital Surveys:
132 - Stoughton Health -- (), FY End: 09/30

Survey Name	Enter/View Survey	Status	Print/View Survey	Progress	Action Needed	Date Submitted
2025 ANNUAL SURVEY	Continue	Open		<div style="width: 19%;"><div style="width: 19%;"></div></div> 19%		
2025 FISCAL SURVEY	New	Open		<div style="width: 0%;"><div style="width: 0%;"></div></div> 0%		
2025 MEDICARE COST REPORT SURVEY	New	Open		<div style="width: 0%;"><div style="width: 0%;"></div></div> 0%		
2025 UNCOMPENSATED HEALTH CARE PLAN	New	Open		<div style="width: 0%;"><div style="width: 0%;"></div></div> 0%		

Filing An Extension

Specify Surveys and Reason for Extension

Select Applicable Facilities*



- 018 - Aurora Medical Center Burlington
- 032 - Aurora Lakeland Medical Center
- 043 - Aurora Medical Center - Washington County
- 067 - Aurora Medical Center - Bay Area
- 087 - Aurora St. Luke's Medical Center
- 124 - Aurora Medical Center - Sheboygan County
- 137 - Aurora Medical Center Manitowoc County

Select All Facilities

Surveys:*

- Annual
- Fiscal
- Uncompensated
- Medicare Cost Report

Extension Reason:

If other, please explain:

Select Facility: Year:

Survey Extension Requests:

Any facility that anticipates delays in submitting hospital survey data within the standard submission deadline must file an extension request through the survey submission application. An extension of up to 30 days past the submission deadline may be granted under limited circumstances.

As a reminder, extension requests should not be a routine function of the survey submission process; the state statute has specific language that applies to extension requests. WHAIC will monitor reasons for extensions carefully.

To request an extension, click on the icon under the "request extension" column. You will then be prompted to select a reason for the request, and add any additional comments. You will receive an email confirmation once your request has been received.

Hospital Surveys:

132 - Stoughton Health -- (), FY End: 09/30

Survey Name	Request Extension	Status	Progress
2025 ANNUAL SURVEY	Request	Open	<div style="width: 19%;"><div style="width: 19%;"></div></div> 19%
2025 FISCAL SURVEY	Request	Open	<div style="width: 0%;"></div> 0%
2025 MEDICARE COST REPORT SURVEY	Request	Open	<div style="width: 0%;"></div> 0%
2025 UNCOMPENSATED HEALTH CARE PLAN	Request	Open	<div style="width: 0%;"></div> 0%

←

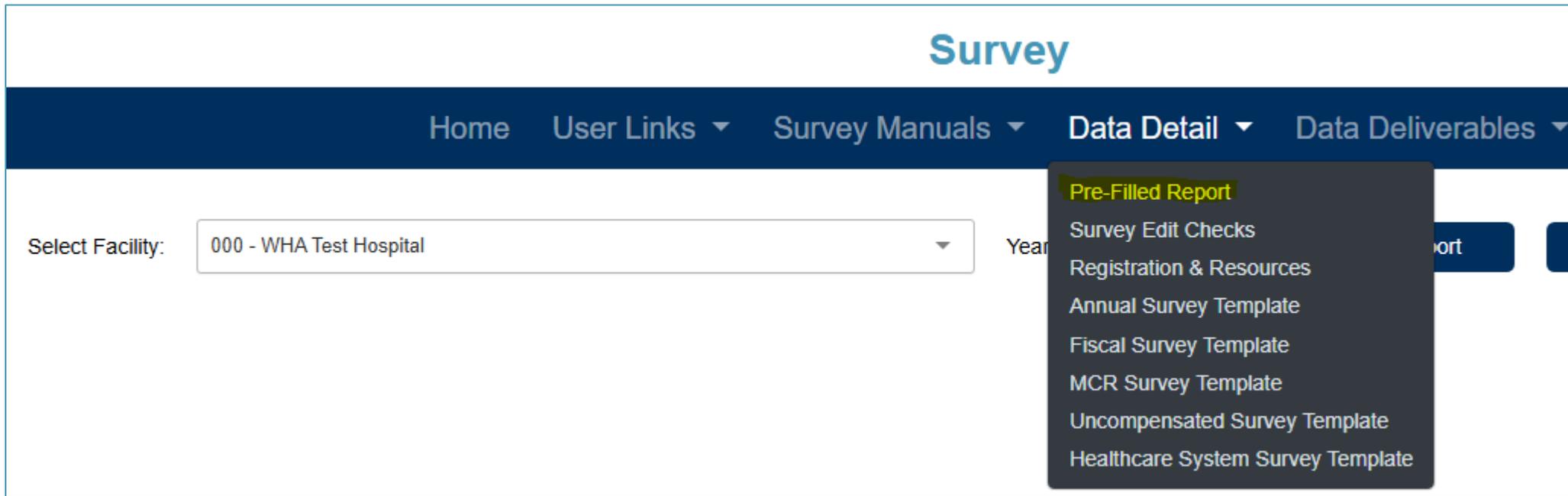
Request Extension

Request
Request
Request
Requested

←

Pre-Filled Report

- **The pre-filled report will not be available this year.** We do anticipate pre-filled radio buttons being available next year.
- The report provides the user with a complete list of fields that have been completed from previous year's surveys.



The screenshot displays the 'Survey' application interface. At the top, the word 'Survey' is centered in a blue font. Below it is a dark blue navigation bar with the following items: 'Home', 'User Links' (with a dropdown arrow), 'Survey Manuals' (with a dropdown arrow), 'Data Detail' (with a dropdown arrow), and 'Data Deliverables' (with a dropdown arrow). The main content area features a 'Select Facility:' label followed by a dropdown menu showing '000 - WHA Test Hospital'. To the right of this is a 'Year' label and a dropdown menu. A dark grey dropdown menu is open under 'Data Detail', listing the following options: 'Pre-Filled Report' (highlighted in yellow), 'Survey Edit Checks', 'Registration & Resources', 'Annual Survey Template', 'Fiscal Survey Template', 'MCR Survey Template', 'Uncompensated Survey Template', and 'Healthcare System Survey Template'. A 'Report' button is partially visible on the right side of the interface.

Layout Of Survey Questions

I. HOSPITAL INFORMATION AND CLASSIFICATION (39%) ^
Organization Information [1 - 10] (38%)
Service [11 - 12] (50%)
Certification Status [13 - 15] (100%)
Managed Care Information [16 - 22] (20%)
Nursing Home Data [23 - 27] (0%)
II. SELECTED INPATIENT UNITS (15%) v
III. SELECTED ANCILLARY AND OTHER SERVICES (84%) v
IV. SELECTED SERVICE UTILIZATION (0%) v
V. TOTAL FACILITY UTILIZATION AND BEDS (0%) v
VI. MEDICAL STAFF (0%) v
VII. PERSONNEL ON HOSPITAL PAYROLL (0%) v
VIII. COMMUNITY BENEFITS AND POPULATION HEALTH (100%) v
IX. SERVICE QUALITY/ PATIENT SAFETY (0%) v
X. INFORMATION TECHNOLOGY AND CYBERSECURITY (0%) v

Survey Layout:

- Navigational Tree Control
- Percentage of each section completed
- Percentage of each subsection of questions completed

Survey Questions

- ❖ Clicking on the underlined question number will show the previous years response.
- ❖ If a question does not have an underlined link, this is because there is no response from the previous year.

29. Adult Medical / Surgical, Acute (include gynecology)

Beds set-up and staffed last day of fiscal year Number of discharges Inpatient days for fiscal year Discharge days (Use codes listed above)

 ○ ○ ○ ○
H S C N

Question 29 Validation Errors

Previous Year Response:

29. Adult Medical / Surgical, Acute (include gynecology)

Beds set-up and staffed last day of fiscal year	25
Number of discharges	374
Inpatient days for fiscal year	1866
Discharge days	2227
(Use codes listed above)	5

25. If answers to both 23 and 24 are YES, check the appropriate box regarding the location of the nursing home facility. (If answers to both 23 and 24 are YES, submit data for columns (1) and (2) in Section V.)

Saving To Trigger Edits

- Save before moving to the next page as this will trigger the validation edits and prevent any lost data.
- **Important:** after clicking Save, wait until the “Survey Saved” message disappears before moving to the next section or moving out of the survey.

The screenshot displays a survey interface with a sidebar on the left and a main content area on the right. The sidebar contains sections I through IX, with 'II. SELECTED INPATIENT UNITS (19%)' selected. The main content area shows 'II. SELECTED INPATIENT UNITS' with a sub-section 'General Medical / Surgical / ICU'. Below this, there are instructions and guidelines, a table of codes (H, S, C, N) with descriptions, and a form for '28. Acute Long-Term Care (Hospital Only)'. A 'Survey saved!' notification is overlaid on the bottom right of the main content area, showing a green checkmark and the time 'Survey saved at 2:22:08 PM'. A green arrow points to a save icon in the top right corner of the main content area.

I. HOSPITAL INFORMATION AND CLASSIFICATION (39%)

II. SELECTED INPATIENT UNITS (19%)

General Medical / Surgical / ICU [28 - 55] (19%)

III. SELECTED ANCILLARY AND OTHER SERVICES (100%)

IV. SELECTED SERVICE UTILIZATION (0%)

V. TOTAL FACILITY UTILIZATION AND BEDS (0%)

VI. MEDICAL STAFF (0%)

VII. PERSONNEL ON HOSPITAL PAYROLL (0%)

VIII. COMMUNITY BENEFITS AND POPULATION HEALTH (100%)

IX. SERVICE QUALITY/ PATIENT SAFETY (0%)

II. SELECTED INPATIENT UNITS
General Medical / Surgical / ICU

Instructions and Guidelines:
If information for a category is zero, enter 0. If a category is **Not Applicable**, also enter 0. **Do not use spaces, dashes, NA, N/AV, or M.**

Code	Description
H	Choose "H" if the service is provided in or by this hospital, regardless of whether it is in a separate or distinct unit. If the service is provided in a separate or distinct unit, include the number of beds and utilization data for that inpatient unit. For example, choose "H" if orthopedic services are provided but not in a distinct or separate unit, and enter zeros for all corresponding fields.
S	Choose "S" if the service is not provided in this hospital but is available within the health care system.
C	Choose "C" if the service is not maintained by the hospital but is available in the hospital or at another facility through a formal contractual arrangement with another hospital or provider, including networks or joint ventures.
N	Choose "N" if the service is not available, either within the hospital or through a formal contractual arrangement with another hospital or provider.

NOTE: WHAIC is interested in whether or not the service is offered.

28. Acute Long-Term Care (Hospital Only)

Beds set-up and staffed last day of fiscal year	Number of discharges	Inpatient days for fiscal year	Discharge days	(Use codes listed above)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> H <input type="radio"/> S <input type="radio"/> C <input checked="" type="radio"/> N

29. Adult Medical / Surgical, Acute (include gynecology)

Beds set-up and staffed last day of fiscal year	Number of discharges	Inpatient days for fiscal year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Survey saved!

Survey saved at 2:22:08 PM

Edits Overview

Red = Hard Edit
Gold = Soft Edit
Purple = Stat Edit

I. HOSPITAL INFORMATION AND CLASSIFICATION (100%)
II. SELECTED INPATIENT UNITS (100%)
General Medical / Surgical / ICU [28 - 55] (100%)



Hard Edit – Required changes to make. A field is required to be entered. Mathematical or logical error: Edit that must be fixed to submit survey (ex: Fiscal survey line 1 + line 4 must equal line 5).

I. HOSPITAL INFORMATION AND CLASSIFICATION (100%)
II. SELECTED INPATIENT UNITS (100%)
General Medical / Surgical / ICU [28 - 55] (100%)



Soft Edit – Flagged for review. The values imply an unusual situation. Edit that must be verified to submit survey. (ex: are you sure there should be a 50% variance b/t inpatient days and discharge days in your psychiatric unit or are you sure the avg. LOS for rehab is 20 days?)

I. GENERAL INFORMATION (100%)
Statement of Revenue [1 - 7] (100%)
Payroll Expenses [8 - 13] (100%)
Nonpayroll Expenses [14 - 26] (100%)
Nonoperating Gains/Losses [27 - 32] (100%)



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. (ex: are you sure you had a 40% increase in Total Revenue?)

Hard Edits

- Hard Edits can be viewed by clicking **Incomplete** to enter the survey.
- The Navigation tree Section, Collection and Question number will turn Red.
- Once you locate the edits, hover over or click on the red text to view the Edit.
- Hard Edits must be complete before moving onto the next phase. If you have questions about Hard Edits, contact WHAIC.

II. DETAIL OF PATIENT SERVICE REVENUE (100%)

Gross Patient Service Revenue and Its Sources
[33 - 36] (100%)

Public Sources
[37 - 42] (100%)

Commercial Sources
[43 - 49] (100%)

Hospital Surveys:

133 - Door County Medical Center -- (Sturgeon Bay), FY End: 12/31

Survey Name	Enter/View Survey	Status	Print PDF	Progress	Action Needed
2024 ANNUAL SURVEY	Continue	Open		<div style="width: 77%;"><div>77%</div></div>	
2024 FISCAL SURVEY	Incomplete	Open		<div style="width: 100%;"><div>100%</div></div>	▲ Hard Edits
2024 MEDICARE COST REPORT SURVEY	Submit Survey	Open		<div style="width: 100%;"><div>100%</div></div>	
2024 UNCOMPENSATED HEALTH CARE PLAN	Submit Survey	Open		<div style="width: 100%;"><div>100%</div></div>	

49. TOTAL GROSS revenue from service to patients, by source (Add lines 37-48. Should equal dollar value on line 36)

Total \$
224,694,440

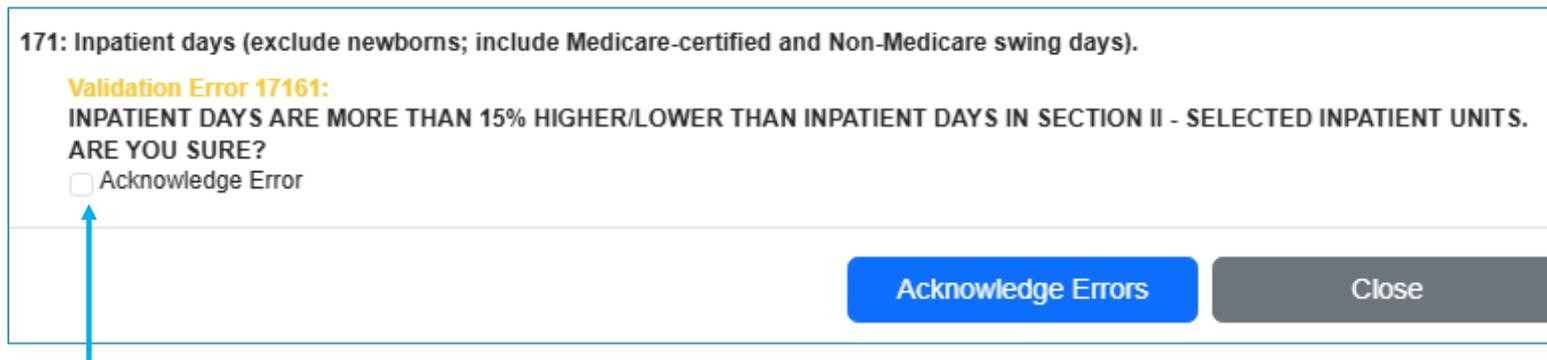
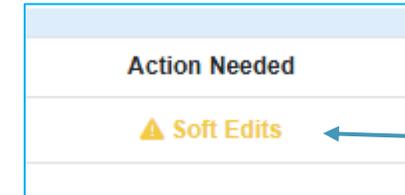
Line 36 != Line 49 TOT

Inpatient \$
25,592,167

Outpatient \$
199,102,273

Soft Edits

- Soft Edits can be viewed and acknowledged by clicking on soft edits in the Action Needed column.
- Click on Soft Edits
 - A separate window will open.
 - Review and validate the data contained in the edit.
 - Click the Acknowledge Error box under each item.
 - Click the blue Acknowledge Errors button and close.
- Once all Soft Edits are acknowledged, the system should trigger **stats edits** or to **submit survey**.

A screenshot of a validation error dialog box. The text inside the box reads: "171: Inpatient days (exclude newborns; include Medicare-certified and Non-Medicare swing days).", "Validation Error 17161:", "INPATIENT DAYS ARE MORE THAN 15% HIGHER/LOWER THAN INPATIENT DAYS IN SECTION II - SELECTED INPATIENT UNITS.", "ARE YOU SURE?", and a checkbox labeled "Acknowledge Error". Below the text, there are two buttons: a blue "Acknowledge Errors" button and a grey "Close" button. A blue arrow points upwards from the bottom left towards the "Acknowledge Error" checkbox.

Soft Edits

- Soft Edits definitions.
 - Here is an example of the LOS error. The LOS is calculated by number of inpatient days/discharges. (For example: 12,828 inpatient days divided by 2,015 number of discharges = 6.4 days.) The same edit applies to discharge days.
 - If this applies, and the data is correct, acknowledge the question.

Validation Error List

34: Orthopedic

Validation Error 18938:
LENGTH OF STAY BASED ON INPATIENT DAYS IS LESS THAN 1.0 OR GREATER THAN 5.0. ARE YOU SURE?
 Acknowledge Error

Validation Error 19108:
LENGTH OF STAY BASED ON DISCHARGE DAYS IS LESS THAN 1.0 OR GREATER THAN 5.0. ARE YOU SURE?
 Acknowledge Error



Stats Edits

- Stats edits can be viewed and acknowledged by clicking on Stat edits in the Action Needed column.
- This is the last phase of correcting edits, and they compare previous year's answers to the current year's answers.
- Click on Stats Edits.
 - A separate window will open.
 - Review and validate the data contained in the edit.
 - *Click Close if not accurate and go back into the survey to fix it.
 - Click the Acknowledge Error box under each item.
 - Click the blue Acknowledge Errors button and close.
- Once all Stat Edits are acknowledged, the system should trigger to **submit survey**.

The screenshot shows a 'Validation Error List' window with a callout box titled 'Action Needed'. The callout box contains three items: 'Hard Edits', 'Stat Edits', and 'Stat Edits', each with a red triangle icon. The main window lists four error items, each with a 'Stats Edit (>30% change from previous year):' label, a dollar sign, current and previous year values, a difference, and an 'Acknowledge Error' checkbox. A blue arrow points to the 'Acknowledge Error' checkbox for item 75. At the bottom of the window are two buttons: 'Acknowledge Errors' (blue) and 'Close' (grey).

Item ID	Item Description	Stats Edit (>30% change from previous year)	Current Year Value	Previous Year Value	Difference	Acknowledge Error
71	Inter-corporate account(s)	\$	250	0	250	<input type="checkbox"/>
77	Other accounts receivable	\$	843,468	4,993	838,475	<input type="checkbox"/>
74	Net patient accounts receivable: Self-Pay*	\$	3,201,089	512,018	2,689,071	<input type="checkbox"/>
75	Net patient accounts receivable: All other pay sources*	\$	4,725,386	9,188,859	-4,463,473	<input type="checkbox"/>
78	Other current assets					

Submitting The Survey

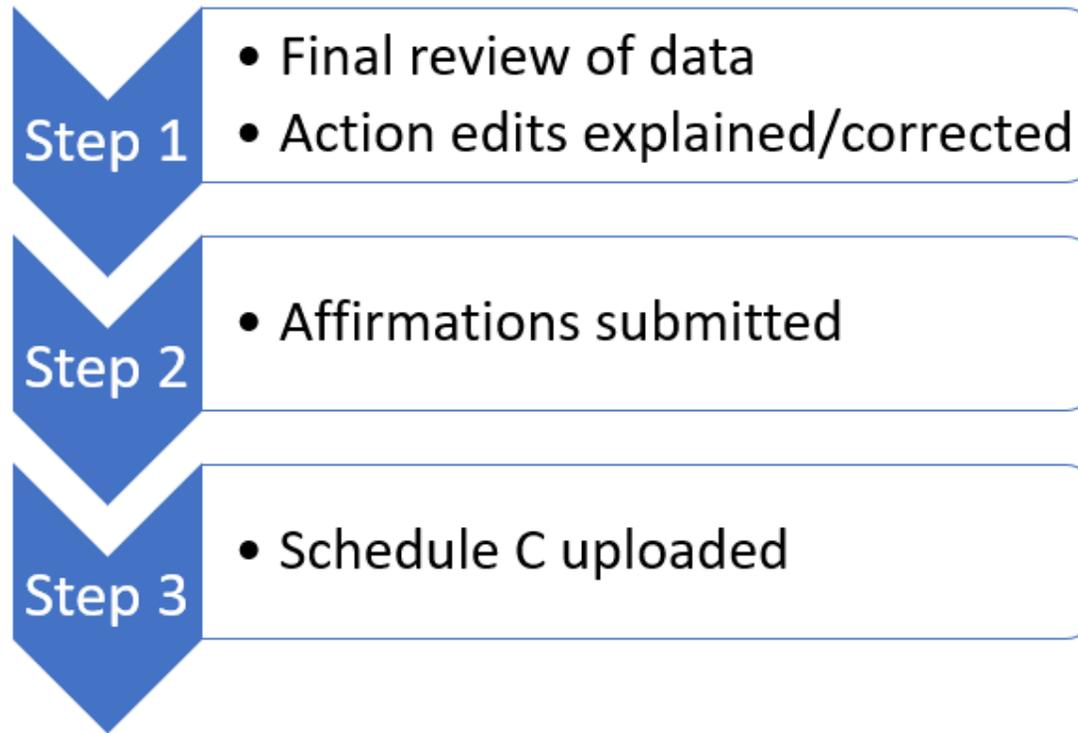
Survey Name	Enter/View Survey	Status	Print/View Survey	Progress	Action Needed	Date Submitted
2024 ANNUAL SURVEY	Continue	Open		<div style="width: 77%;"><div>77%</div></div>		
2024 FISCAL SURVEY	Submit Survey	Open		<div style="width: 100%;"><div>100%</div></div>		10/15/2025
2024 MEDICARE COST REPORT SURVEY	Continue	Open		<div style="width: 98%;"><div>98%</div></div>		
2024 UNCOMPENSATED HEALTH CARE PLAN	Submit Survey	Open		<div style="width: 100%;"><div>100%</div></div>		02/24/2025

Survey Name	Enter/View Survey	Status	Print/View Survey	Progress	Action Needed	Date Submitted
2024 ANNUAL SURVEY	Continue	Open		<div style="width: 77%;"><div>77%</div></div>		
2024 FISCAL SURVEY	View Only	Closed Reopen		<div style="width: 100%;"><div>100%</div></div>	<input checked="" type="checkbox"/> Survey Submitted	10/31/2025
2024 MEDICARE COST REPORT SURVEY	Continue	Open		<div style="width: 98%;"><div>98%</div></div>		
2024 UNCOMPENSATED HEALTH CARE PLAN	View Only	Closed Reopen		<div style="width: 100%;"><div>100%</div></div>	<input checked="" type="checkbox"/> Survey Submitted	10/31/2025

Completed Submissions:

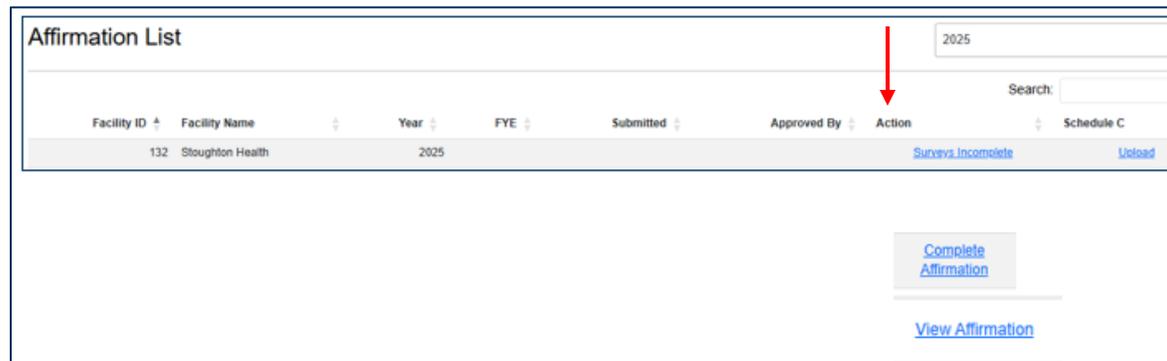
- ✓ Progress is 100%
- ✓ All surveys have a checkmark and say Survey Submitted.

Final Steps Of Submission Process



Survey Affirmations And Schedule C

- The Affirmation is a compilation of data from the annual and fiscal surveys. It must be reviewed and validated by hospital staff.
- View the Affirmation in Data Deliverables/Affirmation List/Action column.
 - **Complete Affirmation** means that all required surveys have been submitted. Click the link to open the Affirmation for review, validation and submission.
 - **Surveys Incomplete** means that not all required surveys have been submitted. Click the link to be taken to the surveys.
 - **View Affirmation** means the Affirmation has already been submitted. The Affirmation can be downloaded but no further changes can be made unless WHAIC reopens the surveys.



Affirmation List

2025

Search:

Facility ID	Facility Name	Year	FYE	Submitted	Approved By	Action	Schedule C
132	Stoughton Health	2025				Surveys Incomplete	Upload

[Complete Affirmation](#)

[View Affirmation](#)

Survey Affirmations And Schedule C

Affirmation List

2025

Search:

Facility ID	Facility Name	Year	FYE	Submitted	Approved By	Action	Schedule C
132	Stoughton Health	2025				Surveys Incomplete	Upload

[Complete Affirmation](#)

[View Affirmation](#)



Survey Affirmations And Schedule C

- View the Schedule C in Data Deliverables/Affirmation List/Schedule C column.
 - **Upload** - prompts the user to upload the Schedule C.
 - **Download** – the Schedule C is available to be viewed because it has been uploaded.
 - **Delete** – the Schedule C can be deleted, and a new one can be uploaded.

Affirmation List								2025
Facility ID	Facility Name	Year	FYE	Submitted	Approved By	Action	Schedule C	
132	Stoughton Health	2025				Surveys Incomplete	Upload	

[Download](#)
[Delete](#)

Example Of Schedule/Worksheet C

Health Financial Systems		[REDACTED]			In Lieu of Form CMS-2552-1 ⁺			
COMPUTATION OF RATIO OF COSTS TO CHARGES					Period: Worksheet C From 07/01/2024 Part I To 06/30/2025 Date/Time Prepared: 11/5/2025 3:15 pm			
		Title XVIII			Hospital		PPS	
Cost Center Description		Charges			Cost or Other Ratio	TEFRA Inpatient Ratio		
		Inpatient	Outpatient	Total (col. 6 + col. 7)				
		6.00	7.00	8.00	9.00	10.00		
INPATIENT ROUTINE SERVICE COST CENTERS								
30.00	03000	ADULTS & PEDIATRICS	102,298,199		102,298,199		30.00	
31.00	03100	INTENSIVE CARE UNIT	18,425,067		18,425,067		31.00	
31.01	02060	SPECIAL CARE NURSERY	0		0		31.01	
33.00	03300	BURN INTENSIVE CARE UNIT	0		0		33.00	
33.01	03301	BURN INTENSIVE CARE UNIT	0		0		33.01	
40.00	04000	SUBPROVIDER - IPF	0		0		40.00	
41.00	04100	SUBPROVIDER - IRF	0		0		41.00	
43.00	04300	NURSERY	0		0		43.00	
ANCILLARY SERVICE COST CENTERS								
50.00	05000	OPERATING ROOM	69,200,400	149,581,422	218,781,822	0.254522	0.000000	50.00
51.00	05100	RECOVERY ROOM	4,901,217	11,351,384	16,252,601	0.131675	0.000000	51.00

Affirmation Process – New Guide

- **New for 2025:** Survey Validation and Cross Reference Guide. This cross-reference guide goes through every item in the affirmation and matches it back to the specific questions and surveys.
- Hospitals can now easily validate the data on the Affirmation Summary Data and FY Summary Report.
- Items on affirmations are cross referenced to survey questions.
- Access it by going to Validation Tips and downloading the PDF or under Data Deliverables.

Summary Report Description	Survey and survey question or formula that corresponds to the question/section.
	Pediatrics = Inpatient days Q. 36 + days in year
Average Length of Stay ANNUAL Survey Inpatient Days + Discharges	Total Hospital = Inpatient days Q. 171 + discharges Q. 172 Adult Med/Surg = Inpatient days + discharges Q. 29 OB = Inpatient days + discharges Q. 33 Pediatrics = Inpatient days + discharges Q. 36
Surgical operations <ul style="list-style-type: none"> • Inpatient • Outpatient 	Annual Q. 157, 158, 159
Outpatient Visits <ul style="list-style-type: none"> • Non-Emergency Visits • Emergency 	Annual Q. 160-163 Non-Emergency Visits is not the same as what's listed in the survey. The FY Summary Report is adding Observation beds (Q.162) to Other visits (Q.161) to get the number.
Full-Time Equivalents (FTEs) Total FTEs: A calculation that comes from the Annual survey.	WHAIC calculation FTE = Part-Time Total No. of P-T Hours ÷ Workweek that the hospital indicates in q. 254. + Full Time Total No. of Persons

Affirmation Summary Data	Survey Tips Click here to download the PDF of Validation Tips
FY Summary Report	
Action Edits	
Sign & Submit Affirmation	
Reopen Surveys	
Validation Tips	

Summary Report Description	Survey and survey question or formula that corresponds to the question/section.
Selected Financial Statistics	Fiscal Survey
Gross Revenue as % of Total Gross Patient Revenue <ul style="list-style-type: none"> • Medicare • Medicaid • Commercial 	Q.37 + Q.38 Q.39 + Q.40 Q.43 + Q.44 + Q.45
<ul style="list-style-type: none"> • All Other Public Sources \$ 	Q.41 + Q.42 + Q.46 + Q.47 + Q.48 = \$
<ul style="list-style-type: none"> • All Other Public Sources % • All other Public Sources Ratio 	(Q.41 + Q.42 + Q.46 + Q.47 + Q.48) ÷ Q.36 = % Current FY value ÷ Previous FY value = Ratio

Data Deliverables ▾

Affirmation and Schedule C Upload

Validation Tips

Affirmation Process

- Affirmation Summary Data
- FY Summary Report
- Action Edits
- Sign & Submit Affirmation
- Reopen Surveys

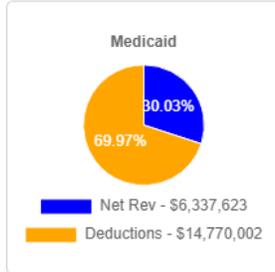
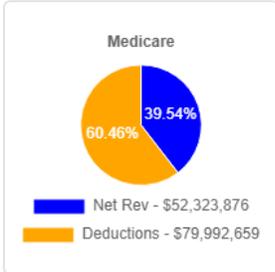
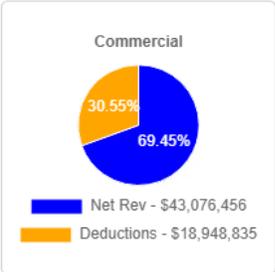
Begin on Affirmation Survey Data. The area will turn green when on the active page.

2024 Survey Affirmation

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 the necessary corrections. If no corrections to the figures below are required, but you choose to provide a comment, you may do so prior to submitting your electronic affirmation.*



	Current Year	Previous Year	% Change
Gross Patient Revenue	\$224,694,440	\$224,694,440	.0%
Less Deductions	\$121,718,907	\$121,718,907	.0%
Net Patient Revenue	\$102,975,533	\$102,975,533	.0%
Plus Other Operating Revenue	\$3,357,935	\$3,357,935	.0%
Total Revenue	\$3,357,935	\$106,333,468	-96.8%
Less Expenses	\$105,463,339	\$105,463,339	.0%
Operating Margin	(\$102,105,404)	\$870,129	-11834.5%
Operating Margin %	-3040.7%	.8%	-371688.9%

	Current Year	Previous Year	% Change
Bad Debt	\$1,294,647	\$1,294,647	.0%
Charity Care	\$2,101,235	\$2,101,235	.0%
Inpatient Discharges	1,099	1,099	.0%
Total Outpatient Visits	194,666	194,666	.0%
Total FTEs	689.6	596.8	15.6%
Total Beds	25	25	.0%

Next

Affirmation Process

Affirmation Summary Data

FY Summary Report

Action Edits

Sign & Submit Affirmation

Reopen Surveys

Validation Tips

2024 Survey Affirmation

Print/Download PDF

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.

Fiscal Year:	2024	County:	
Type:		Analysis Area:	1
		Volume Group:	3
Control:	Other Not-For-Profit		

Selected Utilization Statistics	FY 2024	FY 2023	Ratio
Occupancy Rates (%)			
Adult Medical Surgical	64.7%	43.7%	0.64

Affirmation Process

- ❖ Action edits are data that must be reviewed carefully and signed off on.
- ❖ If the edit brings attention to an error, surveys should be reopened and corrected before signing off on the data.
- ❖ They must have a thorough explanation for WHAIC to validate the data.
- ❖ Once all explanations are provided, click Acknowledge Edits. You will receive a confirmation that all edits were acknowledged at the top of the page.

2024 Survey Affirmation

Question:	Current Year:	Previous Year:	Explanation:
209 - TOTAL Medical Staff: - Active Privileged Medical Staff	24	16	[This was due to the fact that more staff were hired.]
209 - TOTAL Medical Staff: - Board Certified on Active Medical Staff (Not to exceed Privileged Staff)	24	16	
163 - TOTAL outpatient visits (add lines 160, 161 and 162) -	104,475	84,292	
176 - Total Medicare (Title 18) outpatient visits - [1] Hospital	39,790	31,476	
124 - TOTAL charges for uncompensated health care for the fiscal year - Fiscal Year 2024 (add lines 120 and 122) \$	3,479,680	2,537,284	

Acknowledge Edits

Next

Affirmation Process

- If No Action Edits were found, it is ok to submit the affirmation.

Affirmation Summary Data	2024 Survey Affirmation No Action Edits were found. You may submit the affirmation.
FY Summary Report	
Action Edits	
Sign & Submit Affirmation	
Reopen Surveys	

Electronic Signature Of Affirmation

Affirmation Summary Data

FY Summary Report

Action Edits

Sign & Submit Affirmation

Reopen Surveys

2024 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 [REDACTED]

- Affirmation Summary Data
- FY 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

Name of person submitting the Electronic Survey Affirmation Statement

Provide additional comments as needed:

- ✓ 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.

Electronic Signature Of Affirmation

Affirmation Summary Data

FY Summary Report

Action Edits

Sign & Submit Affirmation

Reopen Surveys

2024 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 [REDACTED]

- Affirmation Summary Data
- FY 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

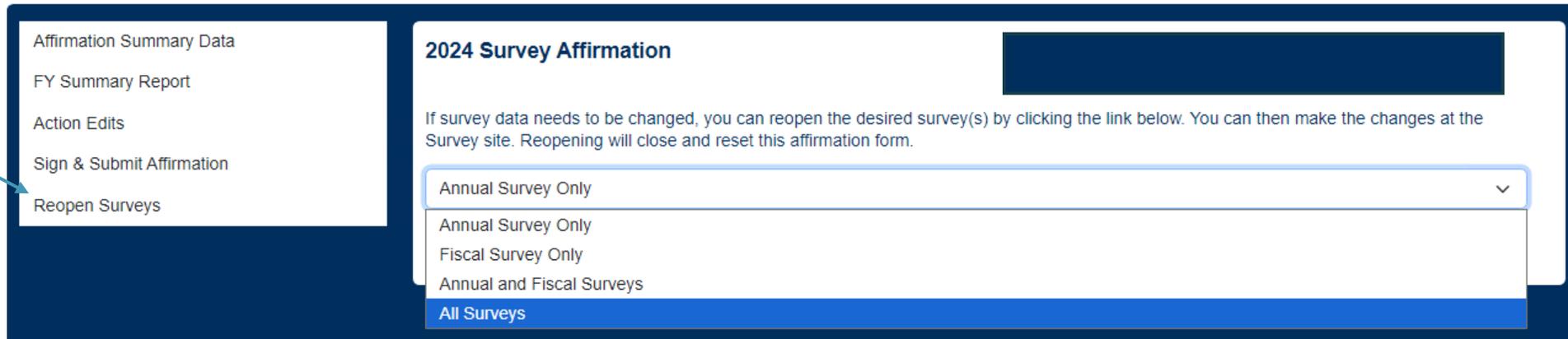
Name of person submitting the Electronic Survey Affirmation Statement

Provide additional comments [Download Affirmation Statement Printable PDF](#)

Submit Affirmation

Reopening Of Surveys

- If changes to the data need to be made after the affirmation has been submitted, WHAIC must be contacted. Surveys can be reopened in two ways:
 - 1. The Reopen Surveys tab of the Affirmation *before* the affirmation is submitted.
 - 2. If the Affirmation has been submitted, surveys must be reopened by the WHAIC staff.
 - The Affirmation will need to be resubmitted after going through the Edits again.



The screenshot displays the '2024 Survey Affirmation' interface. On the left sidebar, the 'Reopen Surveys' option is highlighted with a blue arrow. The main content area shows a dropdown menu with the following options: 'Annual Survey Only', 'Annual Survey Only', 'Fiscal Survey Only', 'Annual and Fiscal Surveys', and 'All Surveys' (which is currently selected and highlighted in blue). The text above the dropdown states: '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.'

Coming up in 2026

Beginning with the 2026 survey, WHAIC will require bad debt and charity care data to be reported separately for insured and uninsured patients. This change reflects the growing impact of high-deductible health plans, which are contributing to increases in both categories. Unfortunately, the public often associates bad debt and charity care exclusively with uninsured patients, a misconception that can portray hospitals in a negative light. Our goal is to correct this misunderstanding by demonstrating that these issues also affect insured patients, and the requested data will be critical in informing that discussion.

WHAIC will collect:

- Estimated Number of Patients for Charity Care that were insured.
- Estimated Number of Patients for Bad Debt that were insured.
- Estimated Charges for Charity Care that were insured.
- Estimated Charges for Bad Debt that were insured.



Any
Questions?



Contact Us

For more information online:

- www.whainfocenter.com
- whainfocenter@wha.org
- hscambler@wha.org

