

Profile Definitions and Methodology

Identification and Characteristics

The report you are viewing for Mayo Clinic Health System in Red Wing with period ending 12/31/2018 uses the 2552-10 format.

HCRIS format **2552-96** **2552-10**

[Close Window](#)

Hospital Name, address, telephone number, website, and system affiliation

Hospital name, address, telephone number, website, and system affiliation are taken from three sources according to the following precedence:

- Information may be collected and updated as the result of direct communications with hospitals, news items, etc. Such information has highest precedence over other sources.
- Information may be collected or updated directly from a hospital's website or from a system's website.
- Information for hospitals without websites may be taken from their most recent Medicare cost report and/or the Medicare Provider of Services file. (Data for these hospitals are updated quarterly as new versions of these files become available. Data from these sources are only used when information is not available from a website or through direct communications.)

Notes

Notes are continually updated to reflect important information regarding mergers, new ownership, changes in operations, etc.

CMS Certification Number

All facilities that participate in the Medicare program are assigned a unique number that identifies the facility and is used for claims processing, cost reporting, etc. This number was originally referred to as the "Medicare Provider Number" but is now known as the CMS Certification Number (CCN).

Operating Status

Closed

Hospital is no longer in operation. Reasons might include financial difficulties, a facility closure as part of consolidation with another hospital, inability to meet changing regulations, etc.

Operating

Hospital is currently in operation.

Operating - Consolidated

Hospital is open but operations have been consolidated with another hospital or within a health system. This may mean that some services are shared among hospitals. When hospitals are consolidated one of them will be designated for all reporting based on Medicare claims data and cost reports. When known, a description of the consolidation will appear in the Notes section of the Profile.

Operating - Does not Participate in Medicare

Hospital is in operation but does not participate in Medicare. For example, some children's hospitals do not have a significant number of Medicare-eligible patients. There will be no reporting based on Medicare claims data and cost reports for non-participating hospitals.

Will Open in Future

Hospital is currently closed or under construction but is scheduled to be opened in the future.

Type of Facility

The type of facility is determined from the last four digits of its CMS Certification Number:

Short Term Acute Care	0001-0899
Childrens	3300-3399
Critical Access	1300-1399
Long Term	2000-2299
Psychiatric	4000-4499
Rehabilitation	3025-3099
Other	none of above

Sole Community Hospital (SCH)

Sole Community Hospitals are the only reasonable source for inpatient Medicare services in an isolated location. Criteria for an SCH are based on the proximity of closest hospitals, market share, and the accessibility to neighboring hospitals throughout the year. Qualifying hospitals receive an inpatient payment rate that is the greater of the federal rate or an adjusted hospital-specific rate. Rural SCHs also receive an outpatient rate that is 7.1% higher.

SCH status is taken from a hospital's most recent Medicare Cost Report (W/S S2, Part I, line 35, column 1).

Rural Referral Center

Rural Referral Centers are high-volume acute care rural hospitals that treat a large number of complicated cases. Generally, they are in rural areas and have more than 275 beds with at least 50 percent of its Medicare patients referred from other hospitals or by physicians who are not on staff at the hospital and where at least 60 percent of its Medicare patients live more than 25 miles away from the hospital. Qualifying RRCs receive a higher DSH adjustment than do other rural hospitals and are exempt from two of three criteria for geographic reclassification.

Rural referral center status is taken from a hospital's most recent Medicare cost report (W/S S2, Part I, line 116, column 1).

Low Volume Hospital

A low volume hospital must have fewer than 1,600 Medicare annual discharges and be 15 road miles or greater from the nearest like hospital. The applicable low-volume payment adjustment (percentage increase) is based on and in addition to all other IPPS per discharge payments, including capital, Disproportionate Share Hospital (DSH), Indirect Medical Education (IME), and outliers.

Low volume hospital status is taken from a hospital's most recent Medicare cost report (W/S S2, Part I, line 39, column 1).

Medicare Dependent Hospital

The MDH program provides enhanced payment to support small rural hospitals for which Medicare patients make up a significant percentage of inpatient days or discharges. An MDH must have at least 60 percent of its inpatient days or discharges attributable to Medicare beneficiaries, be located in a rural area, have 100 or fewer beds, and not be classified as a sole community hospital.

Medicare dependent hospital status is taken from a hospital's most recent Medicare cost report (W/S S2, Part I, line 37, column 1).

Participates in 340B

The 340B Drug Pricing Program allows certain hospitals and other health care providers ("covered entities") to obtain discounted prices on "covered outpatient drugs" (prescription drugs and biologics other than vaccines) from drug manufacturers. Manufacturers must offer 340B discounts to covered entities to have their drugs covered under Medicaid.

Eligible hospitals include disproportionate share (DSH) hospitals, critical access hospitals (CAHs), rural referral centers, sole community hospitals, children's hospitals, and freestanding cancer hospitals. Each eligible hospital must be owned by a state or local government, be a public or nonprofit hospital that is formally delegated governmental powers by a state or local government, or be a nonprofit hospital under contract with a state or local government to provide services to low-income patients who are not eligible for Medicare or Medicaid. Each type of eligible hospital except for CAHs must have a minimum DSH adjustment percentage.

The names of hospitals participating in the 340B Drug Pricing Program, are provided by the U.S. Department of Health and Human Services, Health Resources & Services Administration.

Type of Control

A hospital's type of control is taken from its most recent Medicare cost report (HCRIS file):

- Voluntary Nonprofit, Church
- Voluntary Nonprofit, Other
- Proprietary, Individual
- Proprietary, Corporation
- Proprietary, Partnership
- Proprietary, Other
- Governmental, Federal
- Governmental, City-County
- Governmental, County
- Governmental, State
- Governmental Hospital District
- Governmental, City
- Governmental, Other

Health Care System

Hospital affiliations are obtained from websites and other commercial sources. System affiliations are continually monitored and update through industry news sources (i.e. acquisitions, divestitures, etc.).

Beds

Numbers of staffed beds are taken from a hospital's most recent Medicare cost report (W/S S-3, Part I, line 7 column 2). Cost report instructions define staffed beds as, "the number of beds available for use by patients at the end of the cost reporting period. A bed means an adult bed, pediatric bed, birthing room, or newborn bed maintained in a patient care area for lodging patients in acute, long term, or domiciliary areas of the hospital. Beds in labor room, birthing room, postanesthesia, postoperative recovery rooms, outpatient areas, emergency rooms, ancillary departments, nurses' and other staff residences, and other such areas which are regularly maintained and utilized for only a portion of the stay of patients (primarily for special procedures or not for inpatient lodging) are not termed a bed for these purposes." *Note that beds by unit are reported elsewhere on the Profile and the Departments reports.*

- General Medical/Surgical Beds are the beds used for routine care.
- Special Care Beds include Intensive Care Units, Coronary Care Units, etc.

Total Employees

The total number of employees is taken from a hospital's most recent Medicare Cost Report (W/S S-3, part I, line 14, column 10).

Total Discharges

The total number of inpatient discharges (all payors) is taken from a hospital's most recent Medicare Cost Report (W/S S-3, part I, line 14, column 15).

Total Patient Days

The total number of patient days (all payors) is taken from a hospital's most recent Medicare Cost Report (W/S S-3, part I, line 14, column 8).

Total Patient Revenue

The total patient revenue (inpatient and outpatient) is taken from a hospital's most recent Medicare Cost Report (W/S G-2, part I, line 28, column 3).

Geographic Information

A hospital's county, Core Based Statistical Area (CBSA), and geographic coordinates (i.e. longitude and latitude) are determined through commercial geocoding based on the hospital's address. Please note that CBSAs replaced Metropolitan Statistical Areas (MSAs) upon implementation of new standards in 2000.

Medicare Administrative Contractors (MACs)

Medicare Administrative Contractors (MACs) are private insurance companies that serve as the federal government's agents in the administration of the Medicare program, including the payment of claims. The name of the MAC is obtained from a hospital's most recent Medicare cost report.

Urban / Rural Designation

Medicare classifies a hospital as either "Urban" or "Rural" based on their Metropolitan Statistical Area. Hospital's can, however, be reclassified from rural to urban if they meet certain criteria. A hospital's designation is taken from its most recent Medicare Cost Report (W/S S-2, part I, line 26, column 1 OR W/S S-2, part I, column 27, line 1).

Medicare Certified Beds

The total number of beds in Medicare and/or Medicaid certified areas within a facility. The total certified beds are reported from the Medicare Provider of Services file.

This page last updated 05/15/2019