

Major Equipment:

Description	Prior Years Costs	Current Year Cost	R=Replace N=New	Expansion
MountainView invested \$1,120,137 updating the Operating Rooms to better meet the needs of patients and doctors and new surgical techniques.	\$3,081,764	\$1,120,137	R	
MountainView invested \$759,592 in Anesthesia machines to insure the safety of our patients while in surgery.		\$759,592	R	
MountainView invested \$368,787 in a project to upgrade the IT infrastructure of the facility which will influence our ability to deliver quality healthcare in a timely fashion. Benefits of the project include reduced system downtimes, improved personnel productivity, improved security, and improved accessibility for physicians.	\$973,252	334,489	N	
MountainView invested \$812,178 on new hospital beds to advance the comfort of our patients.		\$812,178	R	
MountainView invested \$207,117 to upgrade our catheterization laboratory and equipment to make it state of the art and insuring fast, accurate and thorough catheterization procedures.		\$207,117		
MountainView invested \$176,851 in preparation to be performing craniotomy surgeries beginning in 2011.	\$	\$176,851	N	
MountainView invested \$224,715 upgrading our pharmacy and pharmaceutical equipment to insure the fast accurate tracking and distribution of patient medications.	\$217,688	\$224,715	N	
	\$	\$		
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	\$	\$		

Other Additions and Total Additions for the Period:

Other capital additions for the period not included above	\$1,199,602
Total Additions for the Period (Sum of Expansion, Equipment & Other Additions)	\$4,834,681

Home Office Allocation

Describe the methodology used to allocate home office costs to the hospital
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As a means to reduce costs, it is common for healthcare companies, including HCA, to utilize the services of a central oversight company, also referred to as a management company. Instead of having to employ several different individuals for each function (at each hospital), an affiliate contracts with one management company to provide the facility its essential services at a cost-effective rate. Using a management company's services streamlines an entity's operations and creates efficiencies that, without the management company, perhaps would not be achieved. In return for providing these integral services to the hospitals, corporate office receives an arms-length fee, charged monthly. The fee is calculated as a percentage of net revenues, which is similar to other management companies in the healthcare industry. The fee charged to HCA's wholly owned hospitals is calculated at 6.5% of net revenues.

Services provided under this management agreement include: consulting services in areas such as long-range planning, budget control systems, financial reporting systems and practices, contractual agreements, accounts receivable management, government reimbursement (including cost report preparation and filing), capital planning, internal audit, managed care contracting, legal services, and human resources services (including employee benefit design and management). Corporate office prepares and files federal, state and local tax returns and reports as well as tax audit and appeals management. HCA performs advisory services relating to design, construction and inspection of new physical facilities, and renovations, repairs and maintenance of existing physical facilities. Corporate office will provide direction in areas such as health services marketing, community and public relations, government affairs, quality assurance, patient safety initiatives and market research. HCA has placed a particular emphasis on patient safety and quality and has made a significant investment in these initiatives, which provides no additional reimbursement, but provides a safer environment for the patient. The preceding is certainly not a comprehensive list of all services but rather a quick snapshot of the extent and wide range of corporate office's business.

Community Benefits Structure

Hospital Mission Statement	MountainView Hospital is committed to the care and improvement of human life. In recognition of this commitment, we strive to deliver high quality, cost effective healthcare in the community we serve.
Hospital Vision	Caring, Compassion, and Commitment
Hospital Values	In pursuit of our mission, we believe the following value statements are essential and timeless. We recognize and affirm the unique and intrinsic worth of each individual. We treat all those we serve with compassion and kindness. We act with absolute honesty, integrity and fairness in the way we conduct our business and the way we live our lives. We trust our colleagues as valuable members of our healthcare team and pledge to treat one another with loyalty, respect and dignity.
Hospital Community Benefit Plan (groups to target, decision makers, goals)	Yes

Mission Mapping (these are not required fields)

	Yes	No
Does your mission map to your strategic planning process?	X	
Do you have a dedicated community benefits coordinator?		X
Do you have a charitable foundation?		X
Do you conduct teaching and research?	X	
Do you operate a Level I or Level II trauma center?		X
Are you the sole provider in your geographic area of any specific clinical services? (If Yes, list services.)		X

Community Health Improvements Services

	Benefit \$402,873
Community Health Education	43,709
Community-Based Clinical Services	50,657

Health Care Support Services	308,507
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Health Professions Education

	Benefit \$177,734
Physicians/Medical Students (net of Direct GME payments)	51,743
Nurses/Nursing Students	\$11,579
Other Health Professional Education	114,412
Scholarships/Funding for Professional Education	

Subsidized Health Services

	Benefit \$46,352,683
Total Uncompensated Cost from Uncompensated Cost Report filed with DHCFP	\$25,235,845
Less: Medicaid Disproportionate Share Payments received for the Period	0
Less: Other Payments Received for these Accounts (County Supplemental Funds, etc.)	\$290,512
Net Uncompensated Care	\$24,945,333
Uncompensated SCHIP (Nevada Checkup) Cost	\$12,155
Uncompensated Medicare Cost (see instructions)	\$21,703,702
Uncompensated Clinic or Other Cost	0
Other Subsidized Health Services	0
Less: Cost Reported in Another Category	(\$308,507)
Total Subsidized Health Services	\$46,352,683

Research

	Benefit \$
Clinical Research	\$
Community Health Research	\$
Other	\$

Financial Contributions

	Benefit \$72,611
Cash Donations	39,333
Grants	\$
In-Kind Donations	33,278
Cost of Fund Raising for Community Programs	\$

Community Building Activities

	Benefit \$40,610
Physical Improvements and Housing	\$
Economic Development	\$
Community Support	32,192
Environmental Improvements	1,892
Leadership Development and Leadership Training for Community Members	
Coalition Building	\$2,010
Community Health Improvement Advocacy	842

Workforce Development	\$3,674
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Community Benefit Operations

	Benefit \$
Dedicated Staff	\$
Community Health Needs/Health Assets Assessment	\$
Other Resources	\$

Other Community Benefits

(Briefly explain other community Benefits provided but not captured in sections above)	Benefit \$
	\$
	\$
Other Community Benefits Subtotal	\$

Total Community Benefit

	Benefit \$47,046,511
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Other Community Support

	Benefit \$3,780,847
Property Tax	\$1,364,822
Sales and Use Tax	\$1,572,511
Modified Business Tax	\$843,514
Other Tax (describe)	\$
Assessment for not meeting minimum care obligation of NRS 439B.340	\$
Total Other Community Support	\$3,780,847

Total Community Benefits & Other Community Support

	\$50,827,358
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<p>List and briefly explain educational classes offered</p> <p>MountainView Hospital offers a wide variety of educational programming to support the Las Vegas community. Classes offered fall under several categories including general health education, support groups, staff development affecting the public, and student educational activities benefiting the public.</p> <p>General health educational programming includes specific disease processes and general wellness topics such as Mommy & Me, Daddy Basics (baby care educational programs), Health Fairs, CPR classes, Heart Health lectures, Health Screenings-Prostate and Skin Cancer, Cardiac Nutrition lectures, and Bariatric Surgery information sessions.</p> <p>Support Group activities held at MountainView Hospital strive to offer an educational forum for affected individuals, as well as a social support system for those with similar difficulties. Support Groups offered have Narcotics Anonymous support group, Gamblers Anonymous support group, and Bariatric Surgery Support Group.</p> <p>Student and professional growth for public welfare and benefit is supported at MountainView Hospital. Student groups hold</p>
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many educational meetings and complete clinical affiliations within the hospital. Student groups include RNs, LPNs, & allied health professionals (respiratory therapy, physical therapy, radiology technicians) and Medical Explorers.

General public activities are also hosted within MountainView hospital. These activities include local homeowner's association meetings, Eagle Scouts & blood drives.

List and briefly describe other community benefits provided to the community for which the costs cannot be captured

MountainView provides community benefits on a daily basis that cannot be quantified or captured for the purposes of this report since it has not been our process to track expenses in this manner. Our systems are not capable of tracking data for these purposes separately, but we know that more complete data would reflect additional benefit that MountainView provides to this community.

Patients are provided with medications and supplies for home use when we are made aware of the fact that patient's needs will not be met due to their inability to pay, which would result in poor quality healing process. These items are not tracked separately.

Teaching materials, supplies, and time for our seminars, health fairs, and community activities (such as sponsoring the Bariatric Walk or participating the Juvenile Diabetes Research Foundation walk) cannot be completely quantified, as our information systems for the reporting period were not designed to accumulate the information at the required level of detail.

Discounted Services & Reduced Charges Policy & Procedures

Charity Care Policy: (attach copies of actual policies if first filing or policy changed)	Policy Effective Date: January 1, 2005
Does the hospital have a policy? (Yes or No)	Yes
Policy covers up to what % of Federal Poverty Level?	200%
Discounts given up to what %?	100%
Amount of time to make arrangements (in days or months)	Unlimited time frame
Other comments	
Prompt Pay or Other Discounts: (attach copies of actual policies if first filing or policy changed)	Policy Effective Date: January 2, 2005 for Uninsured Discount
Does the hospital have a policy? (Yes or No)	Yes
Discounts given up to what %?	Inpatients 83% Same Day Surgery 83% Outpatient/ER 77% ER 77%
Amount of time to make arrangements? (in days or months)	Reviewed on a case by case basis, no designated time frame.
Other comments	It is Hospital policy to provide Hospital resources to qualify the patient for assistance, either Medicaid or the County Indigent Programs. If the patient does not qualify, the Hospital would review the patient for eligibility in the Hospitals Charity program. If the patient does not qualify for Medicaid, County or the Charity program, the Hospital will

	offer the patient the uninsured discount pursuant to NRS 439B.
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Collection of Accounts Receivable Policies & Procedures

Effective Date of Policy	
Does hospital have established policy?	Yes
Does hospital make every reasonable effort to help patient to obtain coverage? (Yes or No)	Yes
Number of patient contacts before referral to collection agency	Private Pay (FC99) >\$7,500 – 3 letters, 5 telephone contact attempts Private Pay (FC99) < \$7,500 – 2 letters, 2 telephone contact attempts Private Pay after insurance >\$3,000 – 3 letters, 5 telephone contact attempts Private Pay after insurance <\$3,000 – 3 letters, 2 telephone contact attempts Private Pay (FC99) & Private Pay after insurance < \$1,000 with a low credit score - 2 letters, 0 telephone contact attempts
Is collection policy consistent with the Fair Debt Collection Practices Act? (Yes or No)	Yes
Methods of communication with patient (e.g. phone, letter, etc.)	Phone and Letters
Number of days prior to referral to collection agency	Average 71 days - Maximum 140 days
Is the patient notified in writing of referral to collection agency?	Yes
Is the patient notified in writing prior to a lawsuit being begun?	Yes
Other comments	

Chargemaster

Is hospital chargemaster available in accordance with NRS 449.490 (4) requirements? (Yes or No)	Yes
Is the chargemaster updated at least monthly? (Yes or No)	Yes
How is the chargemaster made available? (E.g. format, location, etc.)	The charge master is in electronic format with the revenue integrity department and available upon request.