

Hospital Department Report 2019

Wkst	Line	Line Description	Col Desc	Amount	Rank
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100002 BETHESDA HOSPITAL EAST BOYNTON BEACH, FL 33435

Nonprofit - Other		General Short Term	Revenue Rank	785
A00-030.00	Adults and Pediatrics - General Routine Care		23,775,804	924
A00-031.00	Intensive Care Unit		6,543,625	816
A00-032.00	Coronary Care Unit		9,031,342	82
A00-033.00	Burn Intensive Care Unit		0	0
A00-034.00	Surgical Intensive Care Unit		0	0
A00-035.00	Other Special Care		0	0
A00-040.00	Subprovider - IPF		0	0
A00-041.00	Subprovider - IRF		3,459,185	201
A00-042.00	Subprovider (Specify)		0	0
A00-043.00	Nursery		1,369,741	634
A00-044.00	Skilled Nursing Facility		0	0
A00-045.00	Nursing Facility		0	0
A00-046.00	Other Long Term Care		0	0
A00-050.00	Operating Room		12,604,815	872
A00-051.00	Recovery Room		3,024,511	373
A00-052.00	Delivery Room and Labor Room		2,389,121	907
A00-053.00	Anesthesiology		388,140	959
A00-054.00	Radiology - Diagnositic		5,133,461	1,036
A00-055.00	Radiology - Therapeutic		0	0
A00-056.00	Radioisotope		892,800	520
A00-057.00	Computer Tomography (CT) Scan		1,583,836	620
A00-058.00	Magnetic Resonance Imaging (MRI)		528,298	1,090
A00-059.00	Cardiac Catheterization		2,390,466	713
A00-060.00	Laboratory		6,256,538	1,262
A00-062.00	Whole Blood and Packed Red Blood Cells		0	0
A00-063.00	Blood Storing, Processing and Transportation		2,309,911	250
A00-064.00	Intravenous Therapy		0	0
A00-065.00	Respiratory Therapy		3,637,227	618
A00-066.00	Physical Therapy		7,988,201	206
A00-067.00	Occupational Therapy		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-068.00		Speech Pathology		0	0
A00-069.00		Electrocardiology		668,857	1,230
A00-070.00		Electroencephalography		0	0
A00-071.00		Medical Supplies Charged to Patients		30,767,127	210
A00-072.00		Implantable Devices Charged to Patients		17,642,883	674
A00-073.00		Drugs Charged to Patients		14,157,535	899
A00-074.00		Renal Dialysis		686,949	947
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		2,645,031	559
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		0	0
A00-091.00		Emergency		7,809,240	967
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		314,013,048	738
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		51	1,628
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		686,450	1,658
A00-200.00		Worksheet A Total (Line 118-199)		314,699,549	784

100168 BOCA RATON REGIONAL HOSPITAL BOCA RATON, FL 33486

Nonprofit - Other		General Short Term	Revenue Rank	639
A00-030.00	Adults and Pediatrics - General Routine Care		36,363,034	567
A00-030.00	Adults and Pediatrics - General Routine Care		9,056,456	567
A00-031.00	Intensive Care Unit		9,269,226	571
A00-031.00	Intensive Care Unit		2,377,205	571
A00-032.00	Coronary Care Unit		0	0
A00-032.00	Coronary Care Unit		0	0
A00-033.00	Burn Intensive Care Unit		0	0
A00-033.00	Burn Intensive Care Unit		0	0
A00-034.00	Surgical Intensive Care Unit		2,434,463	154
A00-034.00	Surgical Intensive Care Unit		520,605	154
A00-035.00	Other Special Care		0	0
A00-035.00	Other Special Care		0	0
A00-040.00	Subprovider - IPF		0	0
A00-040.00	Subprovider - IPF		0	0
A00-041.00	Subprovider - IRF		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-041.00		Subprovider - IRF		0	0
A00-042.00		Subprovider (Specify)		0	0
A00-042.00		Subprovider (Specify)		0	0
A00-043.00		Nursery		409,016	1,548
A00-043.00		Nursery		94,870	1,548
A00-044.00		Skilled Nursing Facility		0	0
A00-044.00		Skilled Nursing Facility		0	0
A00-045.00		Nursing Facility		0	0
A00-045.00		Nursing Facility		0	0
A00-046.00		Other Long Term Care		0	0
A00-046.00		Other Long Term Care		0	0
A00-050.00		Operating Room		23,268,961	401
A00-050.00		Operating Room		5,452,613	401
A00-051.00		Recovery Room		3,715,716	291
A00-051.00		Recovery Room		932,092	291
A00-052.00		Delivery Room and Labor Room		6,747,037	246
A00-052.00		Delivery Room and Labor Room		1,649,579	246
A00-053.00		Anesthesiology		1,056,489	490
A00-053.00		Anesthesiology		238,744	490
A00-054.00		Radiology - Diagnositc		7,166,793	690
A00-054.00		Radiology - Diagnositc		1,789,237	690
A00-055.00		Radiology - Therapeutic		15,013,189	53
A00-055.00		Radiology - Therapeutic		3,817,275	53
A00-056.00		Radioisotope		2,920,007	108
A00-056.00		Radioisotope		782,569	108
A00-057.00		Computer Tomography (CT) Scan		2,723,061	250
A00-057.00		Computer Tomography (CT) Scan		694,334	250
A00-058.00		Magnetic Resonance Imaging (MRI)		2,839,914	146
A00-058.00		Magnetic Resonance Imaging (MRI)		707,062	146
A00-059.00		Cardiac Catheterization		3,971,693	412
A00-059.00		Cardiac Catheterization		1,113,087	412
A00-060.00		Laboratory		13,309,292	513

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-060.00		Laboratory		3,097,003	513
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		4,477,050	128
A00-063.00		Blood Storing, Processing and Transportation		1,129,015	128
A00-064.00		Intravenous Therapy		893,135	274
A00-064.00		Intravenous Therapy		242,407	274
A00-065.00		Respiratory Therapy		3,242,147	722
A00-065.00		Respiratory Therapy		761,538	722
A00-066.00		Physical Therapy		4,814,464	2,079
A00-066.00		Physical Therapy		1,238,222	2,079
A00-067.00		Occupational Therapy		539,151	1,071
A00-067.00		Occupational Therapy		146,992	1,071
A00-068.00		Speech Pathology		863,669	257
A00-068.00		Speech Pathology		240,172	257
A00-069.00		Electrocardiology		609,783	2,129
A00-069.00		Electrocardiology		164,471	2,129
A00-070.00		Electroencephalography		198,307	859
A00-070.00		Electroencephalography		37,885	859
A00-071.00		Medical Supplies Charged to Patients		17,891,266	452
A00-071.00		Medical Supplies Charged to Patients		3,361,235	452
A00-072.00		Implantable Devices Charged to Patients		43,106,111	181
A00-072.00		Implantable Devices Charged to Patients		9,693,049	181
A00-073.00		Drugs Charged to Patients		69,359,003	158
A00-073.00		Drugs Charged to Patients		15,719,456	158
A00-074.00		Renal Dialysis		1,157,164	588
A00-074.00		Renal Dialysis		252,562	588
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		942,106	1,180
A00-076.00		Other Ancillary Cost		213,956	1,180
A00-088.00		Rural Health Clinic		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		589,611	2,069
A00-090.00		Clinic		163,935	2,069
A00-091.00		Emergency		6,984,618	1,109
A00-091.00		Emergency		1,664,645	1,109
A00-092.00		Observation Beds		0	0
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		2,166,484	264
A00-101.00		Home Health Agency		509,498	264
A00-105.00		Kidney Acquisition		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		485,630,031	412
A00-118.00		Sub Total (Lines 01-117)		122,225,268	412
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		1,072,057	238

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		419,428	238
A00-191.00		Research		1,815,688	211
A00-191.00		Research		466,912	211
A00-192.00		Physicians Private Offices		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		383,546	245
A00-193.00		Nonpaid Workers		82,540	245
A00-194.00		Other Nonreimbursable Cost		0	0
A00-194.00		Other Nonreimbursable Cost		0	0
A00-200.00		Worksheet A Total (Line 118-199)		488,901,322	431
A00-200.00		Worksheet A Total (Line 118-199)		123,194,148	431

100258 DELRAY MEDICAL CENTER DELRAY BEACH, FL 33484

Proprietary - Corporation General Short Term Revenue Rank 650

A00-030.00		Adults and Pediatrics - General Routine Care		34,160,952	603
A00-031.00		Intensive Care Unit		14,152,899	336
A00-032.00		Coronary Care Unit		0	0
A00-033.00		Burn Intensive Care Unit		0	0
A00-034.00		Surgical Intensive Care Unit		0	0
A00-035.00		Other Special Care		0	0
A00-040.00		Subprovider - IPF		5,706,247	198
A00-041.00		Subprovider - IRF		5,277,967	94
A00-042.00		Subprovider (Specify)		0	0
A00-043.00		Nursery		0	0
A00-044.00		Skilled Nursing Facility		0	0
A00-045.00		Nursing Facility		0	0
A00-046.00		Other Long Term Care		0	0
A00-050.00		Operating Room		12,341,509	897
A00-051.00		Recovery Room		0	0
A00-052.00		Delivery Room and Labor Room		0	0
A00-053.00		Anesthesiology		120,163	1,634
A00-054.00		Radiology - Diagnostc		8,034,508	579
A00-055.00		Radiology - Therapeutic		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-056.00		Radioisotope		0	0
A00-057.00		Computer Tomography (CT) Scan		0	0
A00-058.00		Magnetic Resonance Imaging (MRI)		552,205	1,065
A00-059.00		Cardiac Catheterization		0	0
A00-060.00		Laboratory		8,904,299	852
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		2,540,526	218
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		2,709,109	904
A00-066.00		Physical Therapy		4,300,726	593
A00-067.00		Occupational Therapy		2,052,531	201
A00-068.00		Speech Pathology		919,151	239
A00-069.00		Electrocardiology		2,997,906	364
A00-070.00		Electroencephalography		90,117	1,152
A00-071.00		Medical Supplies Charged to Patients		17,656,528	459
A00-072.00		Implantable Devices Charged to Patients		44,149,524	171
A00-073.00		Drugs Charged to Patients		9,571,651	1,204
A00-074.00		Renal Dialysis		1,662,079	368
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		2,322,079	621
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		939,359	1,818
A00-091.00		Emergency		12,005,905	547
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		329,845,585	698
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		518,218	1,849
A00-200.00		Worksheet A Total (Line 118-199)		330,363,803	740

100287 GOOD SAMARITAN MEDICAL CENTER WEST PALM BEACH, FL 33401

	Proprietary - Corporation	General Short Term	Revenue Rank	1355
A00-030.00		Adults and Pediatrics - General Routine Care	19,363,908	1,131
A00-031.00		Intensive Care Unit	2,636,577	1,587
A00-032.00		Coronary Care Unit	0	0
A00-033.00		Burn Intensive Care Unit	0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-034.00		Surgical Intensive Care Unit		0	0
A00-035.00		Other Special Care		806,369	513
A00-040.00		Subprovider - IPF		0	0
A00-041.00		Subprovider - IRF		0	0
A00-042.00		Subprovider (Specify)		0	0
A00-043.00		Nursery		215,692	1,931
A00-044.00		Skilled Nursing Facility		0	0
A00-045.00		Nursing Facility		0	0
A00-046.00		Other Long Term Care		0	0
A00-050.00		Operating Room		7,445,546	1,423
A00-051.00		Recovery Room		0	0
A00-052.00		Delivery Room and Labor Room		1,513,358	1,211
A00-053.00		Anesthesiology		112,664	1,657
A00-054.00		Radiology - Diagnositc		3,979,827	1,351
A00-055.00		Radiology - Therapeutic		0	0
A00-056.00		Radioisotope		805,093	566
A00-057.00		Computer Tomography (CT) Scan		0	0
A00-058.00		Magnetic Resonance Imaging (MRI)		0	0
A00-059.00		Cardiac Catheterization		0	0
A00-060.00		Laboratory		5,749,325	1,363
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		0	0
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		1,610,772	1,490
A00-066.00		Physical Therapy		1,007,798	2,382
A00-067.00		Occupational Therapy		216,883	1,807
A00-068.00		Speech Pathology		227,282	1,168
A00-069.00		Electrocardiology		2,437,479	470
A00-070.00		Electroencephalography		109,057	1,078
A00-071.00		Medical Supplies Charged to Patients		10,500,681	805
A00-072.00		Implantable Devices Charged to Patients		8,812,561	1,211
A00-073.00		Drugs Charged to Patients		7,028,852	1,456

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-074.00		Renal Dialysis		783,216	836
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		1,107,523	1,078
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		9,480,701	547
A00-091.00		Emergency		4,145,717	1,697
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		167,591,555	1,356
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		592	1,986
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		422,274	1,993
A00-200.00		Worksheet A Total (Line 118-199)		168,014,421	1,408

100080 JFK MEDICAL CENTER ATLANTIS, FL 33462

Proprietary - Corporation		General Short Term	Revenue Rank	380
A00-030.00	Adults and Pediatrics - General Routine Care		50,273,428	347
A00-031.00	Intensive Care Unit		14,948,742	314
A00-032.00	Coronary Care Unit		0	0
A00-033.00	Burn Intensive Care Unit		0	0
A00-034.00	Surgical Intensive Care Unit		0	0
A00-035.00	Other Special Care		0	0
A00-040.00	Subprovider - IPF		9,473,747	75
A00-041.00	Subprovider - IRF		0	0
A00-042.00	Subprovider (Specify)		0	0
A00-043.00	Nursery		7,152	2,509
A00-044.00	Skilled Nursing Facility		0	0
A00-045.00	Nursing Facility		0	0
A00-046.00	Other Long Term Care		0	0
A00-050.00	Operating Room		21,731,442	449
A00-051.00	Recovery Room		2,761,051	415
A00-052.00	Delivery Room and Labor Room		2,614,218	851
A00-053.00	Anesthesiology		1,185,204	450
A00-054.00	Radiology - Diagnostc		9,016,929	489
A00-055.00	Radiology - Therapeutic		2,218,956	487
A00-056.00	Radioisotope		831,130	554
A00-057.00	Computer Tomography (CT) Scan		2,873,052	222

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-058.00		Magnetic Resonance Imaging (MRI)		1,420,370	385
A00-059.00		Cardiac Catheterization		8,810,425	137
A00-060.00		Laboratory		11,889,550	592
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		2,186,660	264
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		4,645,373	469
A00-066.00		Physical Therapy		2,909,055	962
A00-067.00		Occupational Therapy		0	0
A00-068.00		Speech Pathology		482,580	529
A00-069.00		Electrocardiology		1,322,291	780
A00-070.00		Electroencephalography		453,202	560
A00-071.00		Medical Supplies Charged to Patients		25,232,254	277
A00-072.00		Implantable Devices Charged to Patients		52,020,045	127
A00-073.00		Drugs Charged to Patients		21,727,594	616
A00-074.00		Renal Dialysis		0	0
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		4,020,076	379
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		471,856	2,170
A00-091.00		Emergency		16,498,626	325
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		501,339,578	397
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		573,868	323
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		620,689	1,732
A00-200.00		Worksheet A Total (Line 118-199)		502,534,135	420

100253 JUPITER MEDICAL CENTER JUPITER, FL 33458

	Nonprofit - Other	General Short Term	Revenue Rank	1029
A00-030.00		Adults and Pediatrics - General Routine Care	18,838,806	1,179
A00-031.00		Intensive Care Unit	5,987,934	883
A00-032.00		Coronary Care Unit	0	0
A00-033.00		Burn Intensive Care Unit	0	0
A00-034.00		Surgical Intensive Care Unit	0	0
A00-035.00		Other Special Care	0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-040.00		Subprovider - IPF		0	0
A00-041.00		Subprovider - IRF		0	0
A00-042.00		Subprovider (Specify)		0	0
A00-043.00		Nursery		1,175,132	741
A00-044.00		Skilled Nursing Facility		0	0
A00-045.00		Nursing Facility		0	0
A00-046.00		Other Long Term Care		0	0
A00-050.00		Operating Room		12,218,989	905
A00-051.00		Recovery Room		1,296,666	894
A00-052.00		Delivery Room and Labor Room		2,609,349	854
A00-053.00		Anesthesiology		645,117	701
A00-054.00		Radiology - Diagnositc		11,310,619	339
A00-055.00		Radiology - Therapeutic		4,900,579	210
A00-056.00		Radioisotope		0	0
A00-057.00		Computer Tomography (CT) Scan		0	0
A00-058.00		Magnetic Resonance Imaging (MRI)		0	0
A00-059.00		Cardiac Catheterization		3,254,015	523
A00-060.00		Laboratory		8,986,194	840
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		0	0
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		2,081,748	1,211
A00-066.00		Physical Therapy		4,667,010	528
A00-067.00		Occupational Therapy		0	0
A00-068.00		Speech Pathology		0	0
A00-069.00		Electrocardiology		453,482	1,499
A00-070.00		Electroencephalography		0	0
A00-071.00		Medical Supplies Charged to Patients		13,708,588	615
A00-072.00		Implantable Devices Charged to Patients		19,731,995	573
A00-073.00		Drugs Charged to Patients		20,250,935	655
A00-074.00		Renal Dialysis		0	0
A00-075.00		ASC (Non-Distinct Part)		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-076.00		Other Ancillary Cost		1,358,899	948
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		733,023	1,965
A00-091.00		Emergency		3,750,413	1,844
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-118.00		Sub Total (Lines 01-117)		250,812,737	960
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		918,703	946
A00-193.00		Nonpaid Workers		691,380	196
A00-194.00		Other Nonreimbursable Cost		757,377	1,611
A00-200.00		Worksheet A Total (Line 118-199)		253,180,197	988

102025 KINDRED HOSPITAL THE PALM BEACHES RIVIERA BEACH, FL 33418

Proprietary - Corporation		General Long Term	Revenue Rank	3679
A00-030.00	Adults and Pediatrics - General Routine Care		0	0
A00-030.00	Adults and Pediatrics - General Routine Care		4,739,304	2,789
A00-031.00	Intensive Care Unit		0	0
A00-031.00	Intensive Care Unit		1,457,314	2,057
A00-032.00	Coronary Care Unit		0	0
A00-032.00	Coronary Care Unit		0	0
A00-033.00	Burn Intensive Care Unit		0	0
A00-033.00	Burn Intensive Care Unit		0	0
A00-034.00	Surgical Intensive Care Unit		0	0
A00-034.00	Surgical Intensive Care Unit		0	0
A00-035.00	Other Special Care		0	0
A00-035.00	Other Special Care		0	0
A00-040.00	Subprovider - IPF		0	0
A00-040.00	Subprovider - IPF		0	0
A00-041.00	Subprovider - IRF		0	0
A00-041.00	Subprovider - IRF		0	0
A00-042.00	Subprovider (Specify)		0	0
A00-042.00	Subprovider (Specify)		0	0
A00-043.00	Nursery		0	0
A00-043.00	Nursery		0	0
A00-044.00	Skilled Nursing Facility		0	0
A00-044.00	Skilled Nursing Facility		0	0
A00-045.00	Nursing Facility		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-045.00		Nursing Facility		0	0
A00-046.00		Other Long Term Care		0	0
A00-046.00		Other Long Term Care		0	0
A00-050.00		Operating Room		0	0
A00-050.00		Operating Room		256,869	3,959
A00-051.00		Recovery Room		0	0
A00-051.00		Recovery Room		0	0
A00-052.00		Delivery Room and Labor Room		0	0
A00-052.00		Delivery Room and Labor Room		0	0
A00-053.00		Anesthesiology		0	0
A00-053.00		Anesthesiology		0	0
A00-054.00		Radiology - Diagnositc		0	0
A00-054.00		Radiology - Diagnositc		306,512	5,368
A00-055.00		Radiology - Therapeutic		0	0
A00-055.00		Radiology - Therapeutic		0	0
A00-056.00		Radioisotope		0	0
A00-056.00		Radioisotope		0	0
A00-057.00		Computer Tomography (CT) Scan		0	0
A00-057.00		Computer Tomography (CT) Scan		0	0
A00-058.00		Magnetic Resonance Imaging (MRI)		0	0
A00-058.00		Magnetic Resonance Imaging (MRI)		0	0
A00-059.00		Cardiac Catheterization		0	0
A00-059.00		Cardiac Catheterization		0	0
A00-060.00		Laboratory		0	0
A00-060.00		Laboratory		680,564	4,098
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		0	0
A00-063.00		Blood Storing, Processing and Transportation		0	0
A00-064.00		Intravenous Therapy		0	0
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-065.00		Respiratory Therapy		1,369,663	1,698
A00-066.00		Physical Therapy		0	0
A00-066.00		Physical Therapy		1,115,981	2,218
A00-067.00		Occupational Therapy		0	0
A00-067.00		Occupational Therapy		0	0
A00-068.00		Speech Pathology		0	0
A00-068.00		Speech Pathology		0	0
A00-069.00		Electrocardiology		0	0
A00-069.00		Electrocardiology		0	0
A00-070.00		Electroencephalography		0	0
A00-070.00		Electroencephalography		0	0
A00-071.00		Medical Supplies Charged to Patients		0	0
A00-071.00		Medical Supplies Charged to Patients		404,129	3,117
A00-072.00		Implantable Devices Charged to Patients		0	0
A00-072.00		Implantable Devices Charged to Patients		0	0
A00-073.00		Drugs Charged to Patients		0	0
A00-073.00		Drugs Charged to Patients		1,189,247	3,122
A00-074.00		Renal Dialysis		0	0
A00-074.00		Renal Dialysis		607,350	1,048
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		0	0
A00-076.00		Other Ancillary Cost		0	0
A00-088.00		Rural Health Clinic		0	0
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		0	0
A00-090.00		Clinic		0	0
A00-091.00		Emergency		0	0
A00-091.00		Emergency		0	0
A00-092.00		Observation Beds		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		0	0
A00-118.00		Sub Total (Lines 01-117)		24,984,125	3,753
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-194.00		Other Nonreimbursable Cost		172,960	2,583
A00-200.00		Worksheet A Total (Line 118-199)		0	0
A00-200.00		Worksheet A Total (Line 118-199)		25,157,085	3,803

100130 LAKESIDE MEDICAL CENTER BELLE GLADE, FL 33430

Government - Hospital Dis		General Short Term	Revenue Rank	3831
A00-030.00	Adults and Pediatrics - General Routine Care		5,430,789	2,599
A00-031.00	Intensive Care Unit		1,310,478	2,141
A00-032.00	Coronary Care Unit		0	0
A00-033.00	Burn Intensive Care Unit		0	0
A00-034.00	Surgical Intensive Care Unit		0	0
A00-035.00	Other Special Care		0	0
A00-040.00	Subprovider - IPF		0	0
A00-041.00	Subprovider - IRF		0	0
A00-042.00	Subprovider (Specify)		0	0
A00-043.00	Nursery		418,544	1,533
A00-044.00	Skilled Nursing Facility		0	0
A00-045.00	Nursing Facility		0	0
A00-046.00	Other Long Term Care		0	0
A00-050.00	Operating Room		1,397,124	2,947
A00-051.00	Recovery Room		0	0
A00-052.00	Delivery Room and Labor Room		230,766	2,093
A00-053.00	Anesthesiology		0	0
A00-054.00	Radiology - Diagnositic		2,478,519	1,974
A00-055.00	Radiology - Therapeutic		0	0
A00-056.00	Radioisotope		0	0
A00-057.00	Computer Tomography (CT) Scan		0	0
A00-058.00	Magnetic Resonance Imaging (MRI)		0	0
A00-059.00	Cardiac Catheterization		0	0
A00-060.00	Laboratory		2,443,281	2,405
A00-062.00	Whole Blood and Packed Red Blood Cells		0	0
A00-063.00	Blood Storing, Processing and Transportation		0	0
A00-064.00	Intravenous Therapy		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-065.00		Respiratory Therapy		1,295,606	1,788
A00-066.00		Physical Therapy		153,005	4,712
A00-067.00		Occupational Therapy		0	0
A00-068.00		Speech Pathology		0	0
A00-069.00		Electrocardiology		0	0
A00-070.00		Electroencephalography		0	0
A00-071.00		Medical Supplies Charged to Patients		1,443,390	2,235
A00-072.00		Implantable Devices Charged to Patients		0	0
A00-073.00		Drugs Charged to Patients		2,166,191	2,485
A00-074.00		Renal Dialysis		340,498	1,407
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		0	0
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		0	0
A00-091.00		Emergency		2,876,261	2,224
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-046.00		Other Long Term Care		0	0
A00-050.00		Operating Room		9,485,149	1,174
A00-051.00		Recovery Room		0	0
A00-052.00		Delivery Room and Labor Room		0	0
A00-053.00		Anesthesiology		0	0
A00-054.00		Radiology - Diagnositc		2,931,223	1,758
A00-055.00		Radiology - Therapeutic		0	0
A00-056.00		Radioisotope		469,187	907
A00-057.00		Computer Tomography (CT) Scan		964,205	1,122
A00-058.00		Magnetic Resonance Imaging (MRI)		0	0
A00-059.00		Cardiac Catheterization		2,254,001	760
A00-060.00		Laboratory		5,803,309	1,356
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		0	0
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		2,062,449	1,223
A00-066.00		Physical Therapy		3,381,215	799
A00-067.00		Occupational Therapy		0	0
A00-068.00		Speech Pathology		170,458	1,415
A00-069.00		Electrocardiology		629,036	1,274
A00-070.00		Electroencephalography		113,153	1,068
A00-071.00		Medical Supplies Charged to Patients		15,646,305	535
A00-072.00		Implantable Devices Charged to Patients		30,612,266	322
A00-073.00		Drugs Charged to Patients		7,866,750	1,373
A00-074.00		Renal Dialysis		876,568	753
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		0	0
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		0	0
A00-091.00		Emergency		3,905,034	1,788
A00-092.00		Observation Beds		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		193,225,761	1,225
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		535,548	1,827

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-200.00		Worksheet A Total (Line 118-199)		193,761,309	1,257
100269 PALMS WEST HOSPITAL LOXAHATCHEE, FL 33470					
		Proprietary - Corporation	General Short Term	Revenue Rank	1327
A00-030.00		Adults and Pediatrics - General Routine Care		19,493,359	1,120
A00-031.00		Intensive Care Unit		4,331,750	1,162
A00-032.00		Coronary Care Unit		0	0
A00-033.00		Burn Intensive Care Unit		0	0
A00-034.00		Surgical Intensive Care Unit		0	0
A00-035.00		Other Special Care		1,839,358	417
A00-040.00		Subprovider - IPF		0	0
A00-041.00		Subprovider - IRF		0	0
A00-042.00		Subprovider (Specify)		0	0
A00-043.00		Nursery		396,838	1,573
A00-044.00		Skilled Nursing Facility		0	0
A00-045.00		Nursing Facility		0	0
A00-046.00		Other Long Term Care		0	0
A00-050.00		Operating Room		7,985,127	1,337
A00-051.00		Recovery Room		1,142,953	969
A00-052.00		Delivery Room and Labor Room		4,024,916	547
A00-053.00		Anesthesiology		366,232	990
A00-054.00		Radiology - Diagnostc		4,404,384	1,222
A00-055.00		Radiology - Therapeutic		0	0
A00-056.00		Radioisotope		208,395	1,310
A00-057.00		Computer Tomography (CT) Scan		885,504	1,208
A00-058.00		Magnetic Resonance Imaging (MRI)		498,094	1,136
A00-059.00		Cardiac Catheterization		0	0
A00-060.00		Laboratory		4,486,424	1,654
A00-062.00		Whole Blood and Packed Red Blood Cells		796,327	310
A00-063.00		Blood Storing, Processing and Transportation		0	0
A00-064.00		Intravenous Therapy		452,156	420
A00-065.00		Respiratory Therapy		2,217,294	1,132
A00-066.00		Physical Therapy		2,034,767	1,392

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-067.00		Occupational Therapy		0	0
A00-068.00		Speech Pathology		0	0
A00-069.00		Electrocardiology		0	0
A00-070.00		Electroencephalography		76,071	1,225
A00-071.00		Medical Supplies Charged to Patients		5,929,331	1,197
A00-072.00		Implantable Devices Charged to Patients		7,270,754	1,371
A00-073.00		Drugs Charged to Patients		7,302,969	1,429
A00-074.00		Renal Dialysis		579,487	1,076
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		47,558	2,783
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		0	0
A00-091.00		Emergency		5,575,673	1,341
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		149,920,118	1,489
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		42,485	3,150
A00-200.00		Worksheet A Total (Line 118-199)		149,962,603	1,541

102023 SELECT SPECIALTY HOSPITAL-PALM BEACH LAKE WORTH, FL 33461

Proprietary - Corporation		General Long Term	Revenue Rank	3507
A00-030.00		Adults and Pediatrics - General Routine Care	9,100,190	1,948
A00-031.00		Intensive Care Unit	0	0
A00-032.00		Coronary Care Unit	0	0
A00-033.00		Burn Intensive Care Unit	0	0
A00-034.00		Surgical Intensive Care Unit	0	0
A00-035.00		Other Special Care	0	0
A00-040.00		Subprovider - IPF	0	0
A00-041.00		Subprovider - IRF	0	0
A00-042.00		Subprovider (Specify)	0	0
A00-043.00		Nursery	0	0
A00-044.00		Skilled Nursing Facility	0	0
A00-045.00		Nursing Facility	0	0
A00-046.00		Other Long Term Care	0	0
A00-050.00		Operating Room	493,950	3,635

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-051.00		Recovery Room		0	0
A00-052.00		Delivery Room and Labor Room		0	0
A00-053.00		Anesthesiology		0	0
A00-054.00		Radiology - Diagnositc		254,912	4,508
A00-055.00		Radiology - Therapeutic		0	0
A00-056.00		Radioisotope		0	0
A00-057.00		Computer Tomography (CT) Scan		0	0
A00-058.00		Magnetic Resonance Imaging (MRI)		0	0
A00-059.00		Cardiac Catheterization		0	0
A00-060.00		Laboratory		630,806	4,190
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		0	0
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		1,667,913	1,461
A00-066.00		Physical Therapy		552,803	3,368
A00-067.00		Occupational Therapy		321,281	1,482
A00-068.00		Speech Pathology		193,666	1,319
A00-069.00		Electrocardiology		28,879	2,804
A00-070.00		Electroencephalography		0	0
A00-071.00		Medical Supplies Charged to Patients		2,232,137	1,900
A00-072.00		Implantable Devices Charged to Patients		0	0
A00-073.00		Drugs Charged to Patients		2,046,972	2,525
A00-074.00		Renal Dialysis		504,280	1,164
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		0	0
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		0	0
A00-091.00		Emergency		0	0
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		32,449,233	3,341
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		66,404	3,018
A00-200.00		Worksheet A Total (Line 118-199)		32,515,637	3,406

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Wkst	Line	Line Description	Col Desc	Amount	Rank
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100288 ST MARY'S MEDICAL CENTER WEST PALM BEACH, FL 33407

Proprietary - Corporation	General Short Term	Revenue Rank	811
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A00-030.00	Adults and Pediatrics - General Routine Care		27,255,812	795
A00-031.00	Intensive Care Unit		5,338,103	974
A00-032.00	Coronary Care Unit		0	0
A00-033.00	Burn Intensive Care Unit		0	0
A00-034.00	Surgical Intensive Care Unit		0	0
A00-035.00	Other Special Care		8,648,439	145
A00-040.00	Subprovider - IPF		3,523,262	340
A00-041.00	Subprovider - IRF		3,400,923	205
A00-042.00	Subprovider (Specify)		0	0
A00-043.00	Nursery		797,804	1,018
A00-044.00	Skilled Nursing Facility		0	0
A00-045.00	Nursing Facility		0	0
A00-046.00	Other Long Term Care		0	0
A00-050.00	Operating Room		9,467,574	1,176
A00-051.00	Recovery Room		2,043,386	581
A00-052.00	Delivery Room and Labor Room		5,449,826	359
A00-053.00	Anesthesiology		126,580	1,604
A00-054.00	Radiology - Diagnositic		4,112,659	1,310
A00-055.00	Radiology - Therapeutic		0	0
A00-056.00	Radioisotope		517,954	847
A00-057.00	Computer Tomography (CT) Scan		0	0
A00-058.00	Magnetic Resonance Imaging (MRI)		0	0
A00-059.00	Cardiac Catheterization		0	0
A00-060.00	Laboratory		9,549,967	776
A00-062.00	Whole Blood and Packed Red Blood Cells		0	0
A00-063.00	Blood Storing, Processing and Transportation		0	0
A00-064.00	Intravenous Therapy		0	0
A00-065.00	Respiratory Therapy		2,690,152	914
A00-066.00	Physical Therapy		5,643,219	387
A00-067.00	Occupational Therapy		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-068.00		Speech Pathology		0	0
A00-069.00		Electrocardiology		412,387	1,573
A00-070.00		Electroencephalography		277,901	747
A00-071.00		Medical Supplies Charged to Patients		13,728,915	611
A00-072.00		Implantable Devices Charged to Patients		18,047,863	654
A00-073.00		Drugs Charged to Patients		10,800,881	1,111
A00-074.00		Renal Dialysis		1,833,371	322
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		2,289,480	631
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		3,320,283	1,055
A00-091.00		Emergency		9,460,032	765
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		276,415,573	860
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		1,884,968	1,101
A00-200.00		Worksheet A Total (Line 118-199)		278,300,541	904

104008 THE JEROME GOLDEN CENTER FOR BEHAVIORAL HEALTH, IN WEST PALM BEACH, FL 33407

Nonprofit - Other		Psychiatric	Revenue Rank	4528
A00-030.00	Adults and Pediatrics - General Routine Care		5,178,592	2,660
A00-031.00	Intensive Care Unit		0	0
A00-032.00	Coronary Care Unit		0	0
A00-033.00	Burn Intensive Care Unit		0	0
A00-034.00	Surgical Intensive Care Unit		0	0
A00-035.00	Other Special Care		0	0
A00-040.00	Subprovider - IPF		0	0
A00-041.00	Subprovider - IRF		0	0
A00-042.00	Subprovider (Specify)		0	0
A00-043.00	Nursery		0	0
A00-044.00	Skilled Nursing Facility		0	0
A00-045.00	Nursing Facility		0	0
A00-046.00	Other Long Term Care		0	0
A00-050.00	Operating Room		0	0
A00-051.00	Recovery Room		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-052.00		Delivery Room and Labor Room		0	0
A00-053.00		Anesthesiology		0	0
A00-054.00		Radiology - Diagnositc		0	0
A00-055.00		Radiology - Therapeutic		0	0
A00-056.00		Radioisotope		0	0
A00-057.00		Computer Tomography (CT) Scan		0	0
A00-058.00		Magnetic Resonance Imaging (MRI)		0	0
A00-059.00		Cardiac Catheterization		0	0
A00-060.00		Laboratory		158,080	5,065
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		0	0
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		0	0
A00-066.00		Physical Therapy		0	0
A00-067.00		Occupational Therapy		0	0
A00-068.00		Speech Pathology		0	0
A00-069.00		Electrocardiology		0	0
A00-070.00		Electroencephalography		0	0
A00-071.00		Medical Supplies Charged to Patients		0	0
A00-072.00		Implantable Devices Charged to Patients		0	0
A00-073.00		Drugs Charged to Patients		0	0
A00-074.00		Renal Dialysis		0	0
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		0	0
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		0	0
A00-091.00		Emergency		0	0
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		2,176,427	13
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		15,137,365	4,667
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		6,339,458	74
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		0	0
A00-200.00		Worksheet A Total (Line 118-199)		21,476,823	4,091

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Wkst	Line	Line Description	Col Desc	Amount	Rank
100275 WELLINGTON REGIONAL MEDICAL CENTER LLC WELLINGTON, FL 33414					
		Proprietary - Corporation	General Short Term	Revenue Rank	1389
A00-030.00		Adults and Pediatrics - General Routine Care		17,676,754	1,241
A00-031.00		Intensive Care Unit		6,356,786	841
A00-032.00		Coronary Care Unit		0	0
A00-033.00		Burn Intensive Care Unit		0	0
A00-034.00		Surgical Intensive Care Unit		0	0
A00-035.00		Other Special Care		0	0
A00-040.00		Subprovider - IPF		0	0
A00-041.00		Subprovider - IRF		0	0
A00-042.00		Subprovider (Specify)		0	0
A00-043.00		Nursery		1,090,440	800
A00-044.00		Skilled Nursing Facility		0	0
A00-045.00		Nursing Facility		0	0
A00-046.00		Other Long Term Care		0	0
A00-050.00		Operating Room		16,503,457	639
A00-051.00		Recovery Room		5,368,145	177
A00-052.00		Delivery Room and Labor Room		0	0
A00-053.00		Anesthesiology		268,209	1,183
A00-054.00		Radiology - Diagnositic		2,349,411	2,038
A00-055.00		Radiology - Therapeutic		678,553	837
A00-056.00		Radioisotope		0	0
A00-057.00		Computer Tomography (CT) Scan		648,969	1,527
A00-058.00		Magnetic Resonance Imaging (MRI)		165,217	2,025
A00-059.00		Cardiac Catheterization		1,563,851	978
A00-060.00		Laboratory		4,550,292	1,636
A00-062.00		Whole Blood and Packed Red Blood Cells		1,238,317	250
A00-063.00		Blood Storing, Processing and Transportation		0	0
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		2,573,528	959
A00-066.00		Physical Therapy		1,468,405	1,834
A00-067.00		Occupational Therapy		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-068.00		Speech Pathology		292,809	932
A00-069.00		Electrocardiology		275,626	1,837
A00-070.00		Electroencephalography		31,510	1,410
A00-071.00		Medical Supplies Charged to Patients		4,337,942	1,455
A00-072.00		Implantable Devices Charged to Patients		10,063,803	1,099
A00-073.00		Drugs Charged to Patients		7,775,661	1,381
A00-074.00		Renal Dialysis		826,794	794
A00-075.00		ASC (Non-Distinct Part)		946,065	403
A00-076.00		Other Ancillary Cost		361,074	1,861
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		0	0
A00-091.00		Emergency		5,849,572	1,283
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		170,732,891	1,339
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		528,787	1,123
A00-193.00		Nonpaid Workers		1,736,157	135
A00-194.00		Other Nonreimbursable Cost		0	0
A00-200.00		Worksheet A Total (Line 118-199)		172,997,835	1,371

100268 WEST BOCA MEDICAL CENTER BOCA RATON, FL 33428

Proprietary - Corporation		General Short Term	Revenue Rank	1330
A00-030.00	Adults and Pediatrics - General Routine Care		11,413,732	1,700
A00-031.00	Intensive Care Unit		3,369,304	1,384
A00-032.00	Coronary Care Unit		0	0
A00-033.00	Burn Intensive Care Unit		0	0
A00-034.00	Surgical Intensive Care Unit		0	0
A00-035.00	Other Special Care		4,368,324	266
A00-040.00	Subprovider - IPF		0	0
A00-041.00	Subprovider - IRF		0	0
A00-042.00	Subprovider (Specify)		0	0
A00-043.00	Nursery		705,346	1,123
A00-044.00	Skilled Nursing Facility		0	0
A00-045.00	Nursing Facility		0	0
A00-046.00	Other Long Term Care		0	0
A00-050.00	Operating Room		9,573,256	1,160
A00-051.00	Recovery Room		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-052.00		Delivery Room and Labor Room		3,715,067	605
A00-053.00		Anesthesiology		71,918	1,843
A00-054.00		Radiology - Diagnositc		4,238,730	1,276
A00-055.00		Radiology - Therapeutic		0	0
A00-056.00		Radioisotope		0	0
A00-057.00		Computer Tomography (CT) Scan		857,039	1,251
A00-058.00		Magnetic Resonance Imaging (MRI)		281,176	1,653
A00-059.00		Cardiac Catheterization		0	0
A00-060.00		Laboratory		5,515,925	1,400
A00-062.00		Whole Blood and Packed Red Blood Cells		0	0
A00-063.00		Blood Storing, Processing and Transportation		617,812	640
A00-064.00		Intravenous Therapy		0	0
A00-065.00		Respiratory Therapy		2,045,793	1,230
A00-066.00		Physical Therapy		1,300,071	2,004
A00-067.00		Occupational Therapy		0	0
A00-068.00		Speech Pathology		0	0
A00-069.00		Electrocardiology		839,668	1,072
A00-070.00		Electroencephalography		103,359	1,102
A00-071.00		Medical Supplies Charged to Patients		6,449,797	1,129
A00-072.00		Implantable Devices Charged to Patients		11,228,748	1,012
A00-073.00		Drugs Charged to Patients		4,795,669	1,769
A00-074.00		Renal Dialysis		159,545	1,815
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		286,995	1,990
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		2,581,990	1,200
A00-091.00		Emergency		6,911,045	1,118
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		147,105,800	1,508
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		658,571	1,678
A00-200.00		Worksheet A Total (Line 118-199)		147,764,371	1,561

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Wkst	Line	Line Description	Col Desc	Amount	Rank
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10065F WEST PALM BEACH VA MEDICAL CENTER WEST PALM BEACH, FL 33410

Revenue Rank 5511

A00-030.00	Adults and Pediatrics - General Routine Care			0	0
A00-031.00	Intensive Care Unit			0	0
A00-032.00	Coronary Care Unit			0	0
A00-033.00	Burn Intensive Care Unit			0	0
A00-034.00	Surgical Intensive Care Unit			0	0
A00-035.00	Other Special Care			0	0
A00-040.00	Subprovider - IPF			0	0
A00-041.00	Subprovider - IRF			0	0
A00-042.00	Subprovider (Specify)			0	0
A00-043.00	Nursery			0	0
A00-044.00	Skilled Nursing Facility			0	0
A00-045.00	Nursing Facility			0	0
A00-046.00	Other Long Term Care			0	0
A00-050.00	Operating Room			0	0
A00-051.00	Recovery Room			0	0
A00-052.00	Delivery Room and Labor Room			0	0
A00-053.00	Anesthesiology			0	0
A00-054.00	Radiology - Diagnositic			0	0
A00-055.00	Radiology - Therapeutic			0	0
A00-056.00	Radioisotope			0	0
A00-057.00	Computer Tomography (CT) Scan			0	0
A00-058.00	Magnetic Resonance Imaging (MRI)			0	0
A00-059.00	Cardiac Catheterization			0	0
A00-060.00	Laboratory			0	0
A00-062.00	Whole Blood and Packed Red Blood Cells			0	0
A00-063.00	Blood Storing, Processing and Transportation			0	0
A00-064.00	Intravenous Therapy			0	0
A00-065.00	Respiratory Therapy			0	0
A00-066.00	Physical Therapy			0	0
A00-067.00	Occupational Therapy			0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-068.00		Speech Pathology		0	0
A00-069.00		Electrocardiology		0	0
A00-070.00		Electroencephalography		0	0
A00-071.00		Medical Supplies Charged to Patients		0	0
A00-072.00		Implantable Devices Charged to Patients		0	0
A00-073.00		Drugs Charged to Patients		0	0
A00-074.00		Renal Dialysis		0	0
A00-075.00		ASC (Non-Distinct Part)		0	0
A00-076.00		Other Ancillary Cost		0	0
A00-088.00		Rural Health Clinic		0	0
A00-089.00		Federally Qualified Health Center (FQHC)		0	0
A00-090.00		Clinic		0	0
A00-091.00		Emergency		0	0
A00-092.00		Observation Beds		0	0
A00-093.00		Other Outpatient Services		0	0
A00-094.00		Home Program Dialysis		0	0
A00-095.00		Ambulance Services		0	0
A00-096.00		Durable Medical Equipment - Rented		0	0
A00-097.00		Durable Medical Equipment - Sold		0	0
A00-098.00		Other Reimbursable Cost Centers		0	0
A00-099.00		Outpatient Rehabilitation Provider - CMHC		0	0
A00-099.10		Outpatient Rehabilitation Provider - CORF		0	0
A00-099.20		Outpatient Rehabilitation Provider - OPT		0	0
A00-099.30		Outpatient Rehabilitation Provider - OOT		0	0
A00-099.40		Outpatient Rehabilitation Provider - OSP		0	0
A00-100.00		Intern-Resident Service (Not Approved Teaching Pro		0	0
A00-101.00		Home Health Agency		0	0
A00-105.00		Kidney Acquisition		0	0
A00-106.00		Heart Acquisition		0	0
A00-107.00		Liver Acquisition		0	0
A00-108.00		Lung Acquisition		0	0
A00-109.00		Pancreas Acquisition		0	0

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Wkst	Line	Line Description	Col Desc	Amount	Rank
A00-110.00		Intestinal Acquisition		0	0
A00-111.00		Islet Acquisition		0	0
A00-112.00		Other Organ Acquisition		0	0
A00-113.00		Interest Expense		0	0
A00-114.00		Utilization Review - SNF		0	0
A00-115.00		Ambulatory Surgical Center (Distinct Part)		0	0
A00-116.00		Hospice		0	0
A00-117.00		Other Special Purpose Cost Centers		0	0
A00-118.00		Sub Total (Lines 01-117)		0	0
A00-190.00		Gifts, Flowers, Coffee Shops and Canteen		0	0
A00-191.00		Research		0	0
A00-192.00		Physicians Private Offices		0	0
A00-193.00		Nonpaid Workers		0	0
A00-194.00		Other Nonreimbursable Cost		0	0
A00-200.00		Worksheet A Total (Line 118-199)		0	0

Name Order

5:18 PM

Healthcare Almanac 561-594-7551

1/22/2021

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