FY 2017 User Fee Methodology

Hospitals and Special Hospitals - 33%

½ of the total user fee assessment (\$3,960,000.00) times the ratio of the admissions of each facility to the total admissions of all facilities:

(1,980,000.00) x <u>individual facility admissions</u> total admissions of all facilities 586.119

then adding,

½ of the total user fee assessment (\$3,960,000.00) times the ratio of gross operating revenue of each facility to the total gross operating revenues of all facilities:

(\$1,980,000.00) x individual facility revenue total revenues of all facilities \$16,315,783,026.00

The calculated sum of (a) and (b) above is the FY2017 user fee assessment for each facility.

Nursing Homes - 17%

(hospitals w/long term care units)

½ of the total user fee assessment (\$2,040,000.00) times the ratio of the admissions of each facility to the total admissions of all facilities:

(\$1,020,000.00) x individual facility admissions total admissions of all facilities 84.729

then adding,

½ of the total user fee assessment (\$2,040,000.00) times the ratio of gross operating revenue of each facility to the total gross operating revenues of all facilities:

(\$1,020,000.00) x individual facility revenue total revenues of all facilities \$3,102,786,005.56

The calculated sum of (a) and (b) above is the FY2017 user fee assessment for each facility.

Payors - 28%

The SFA times the ratio of the individual total premiums written in the State for health benefit plans to the total premiums of health benefit plans of all payors in the State:

(\$3,360,000.00) x individual health benefit plan premiums total health benefit plan premiums \$5,435,069,343.85

The calculated sum above is the FY2017 user fee assessment for each payor.

Health Practitioners - 22%

Budget amount - \$2,640,000.00