

Hospital Owned Provider-Based Clinic Reporting

1	Fiscal Year Ended: 2020	License #	H-164
2	Hospital Name	King County Public Hospital Dis	tr #2 (EVERGREENHE
а	The number of provider-based clinics owned or operated by the hospital that charge or bill a separate facility fee		2
b	The number of patient visits at owned for which a facility fee w	each provider-based clinic vas charged or billed for the year	18,657
С	The revenue received by the hospital for the year by means of facility fees at each provider-based clinic		\$2,740,789
d	The range of allowable facility payers at each provider-based		\$100-\$233
Please submit to DOH either by mail, fax or email to the following address:			
Washington State Department of Health			
Community Health Systems/Hospital and Financial and Charity Care Section			
MS: 47853			

Olympia, WA 98504-7853 Fax: (360) 236-2870 email: hos@doh.wa.gov

Facility fee means any separate charge or billing by a <u>off-campus</u> provider-based clinic in addition to a professional fee for physicians' services that is intended to cover building, electronic medical records systems, billing, and other administrative and operational expenses.

DOH 346-094 (REV 12/04/2017)