

**PROVIDER-RELATED DONATIONS AND  
HEALTH CARE RELATED TAXES, FEES AND ASSESSMENTS RECEIVED UNDER PUBLIC HEALTH LAW 102-334 BY**

New York State Department of Health

(Print or type name of agency)

FOR THE QUARTER ENDED

SEPTEMBER 30, 2021

CODE	NAME OF TAX/ASSESSMENT PROGRAM	ST. CITE	PROVIDER/SERVICE CLASS (42 CFR)	AMOUNT
1	Bad Debt and Charity Care and Capital Statewide Pool Assessment	PHL 2807-c(18)	Inpatient Hospital Services	112,448,500.00
1	Bad Debt and Charity Care Regional Allowance	PHL 2807-c(14) & (16)	Inpatient Hospital Services	0.00
1	Patient Services Payments	PHL 2807-j	Inpatient Hospital Services	512,081,946.97
1	Patient Services Payments	PHL 2807-j	Outpatient Hospital Services	458,863,852.21
1	Patient Services Payments	PHL 2807-j	Ambulatory Surgical Center Services	17,748,779.00
1	Patient Services Payments	PHL 2807-j	Diagnostic and Treatment Centers	24,925,055.93
1	Patient Services Payments	PHL 2807-j	Clinical Laboratories	0.00
1	Patient Services Payments	PHL 2807-s	Inpatient Hospital Services	685,399.00
1	Health Facility Cash Assessment Program	PHL 2807-d	Nursing Facility Services (6.0%)	115,848,552.36
1	Health Facility Cash Assessment Program	PHL 2807-d	Nursing Facility Services (5.0%)	16,866.02
1	Health Facility Cash Assessment Program	PHL 2807-d	Inpatient Hospital Services (.35%)	70,142,391.00
1	Health Facility Cash Assessment Program	PHL 3614-a & b	Home Health Care Services (.35%)	1,439,607.39

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1	Health Facility Cash Assessment Program	PHL 3614-a & b	LT Home Health Care Services (.35%)	7,693.00
5	Health Facility Cash Assessment Program	Social Services Law 367-i	Personal Care Providers (.35%)	1,755,075.48
1	Health Facility Cash Assessment Program	Section 90 of Part H of Chapter 59 of the Laws of 2011	LT Home Health Care Services (.7%)	0.00
1	Health Facility Cash Assessment Program	Section 90 of Part H of Chapter 59 of the Laws of 2011	Nursing Facility Services (.8%)	15,444,662.48
1	Health Facility Cash Assessment Program	PHL 2807-dd	Nursing Facility Services (.4%)	0.00
1	Health Facility Cash Assessment Program	PHL 2807-dd	Nursing Facility Services (.2%)	0.00
1	Hospital Quality Contribution Report	PHL 2807-d-1	Inpatient Hospital Services (1.6%)	14,141,136.00
	Total			<b>1,345,549,516.84</b>

I certify that this report represents a true and accurate statement of actual cash revenues collected by the above agency during the quarter described above.

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Codes: 1 – Permissible