

2012 OHIO HOSPITAL ASSOCIATION DUES STRUCTURE

TYPE I – SHORT TERM HOSPITALS

Maximum \$112,000

Minimum \$ 3,000

Rates Based on Total Expenses

First \$11,000 @ 97 cents/thousand

Second \$11,000 @ 58 cents/thousand

Third \$11,000 @ 38 cents/thousand

Balance @ 20 cents/thousand

TYPE II – LONG TERM HOSPITALS

Maximum \$16,000

Minimum \$ 1,000

Rates Based on Total Expenses

First \$2,200 @ 97 cents/thousand

Second \$2,200 @ 58 cents/thousand

Third \$2,200 @ 38 cents/thousand

Balance @ 20 cents/thousand

TYPE II – STATE HOSPITALS

Total @ 19 cents/thousand

TYPE II – FEDERAL HOSPITALS

Total \$ 1,250.00

Type IV – OTHER HEALTH CARE ORGANIZATIONS

Extended Care Facilities

Under 50 Beds \$ 140.00

50-99 Beds \$ 220.00

100-149 Beds \$ 300.00

150 Beds or Over \$ 400.00

Other (home care, hospices, PPO's, HMO's etc.) \$150.00

TYPE V – SAME AS IV EXCEPT NOT CONTROLLED BY ANOTHER ORGANIZATIONAL MEMBER

Extended Care Facilities

Under 50 Beds \$ 200.00

50-99 Beds \$ 300.00

100-149 Beds \$ 400.00

150 Beds Or Over \$ 500.00

Other (home care, hospices, PPO's, HMO's etc.) \$ 400.00

ASSOCIATES

Non-Profit Only \$ 100.