

4650.0166 FEES; HOSPITALS.

Subpart 1. **Fee required.** A hospital whose reports are reviewed by the commissioner rather than the voluntary, nonprofit reporting organization shall submit a fee to the commissioner with the reports. The base for calculating the fee is the sum of the nonoperating revenue plus the operating revenue reported by the hospital under part 4650.0112 for the accounting period immediately preceding the reporting year for which the fee is due.

Subp. 2. **Fee determination.** The fee shall be determined as follows:

- A. for a hospital with a base less than or equal to \$12,000,000, the fee is \$1,200;
- B. for a hospital with a base greater than \$12,000,000 but less than or equal to \$40,000,000, the fee is equal to the base multiplied by 0.0001;
- C. for a hospital with a base greater than \$40,000,000 but less than or equal to \$80,000,000, the fee is equal to \$4,000 plus the amount of the base exceeding \$40,000,000 multiplied by 0.00009;
- D. for a hospital with a base greater than \$80,000,000, the fee is equal to \$7,600 plus the amount of the base exceeding \$80,000,000 multiplied by 0.00008. The maximum fee shall not exceed \$8,300;
- E. for a hospital that was not in operation and did not file a report for the accounting period immediately preceding the reporting year for which the fee is due, the fee is \$1,200; or
- F. for a hospital that was in operation, but failed to file the report required under this chapter for the accounting period immediately preceding the reporting year for which the fee is due, the commissioner shall determine the amount of the fee after considering some or all of the following factors:

- (1) data submitted by the hospital in a previous year;
- (2) data submitted by the hospital on its Medicare cost report;
- (3) data submitted by the hospital on its audited financial statement; or
- (4) fees paid by similar hospitals.

Statutory Authority: *MS s 62J.321; 62J.35; 144.56; 144.703*

History: *L 1984 c 534 s 11; 9 SR 834; 19 SR 1419; 21 SR 1106*

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