

**Effective 5/10/2016**

**26-36b-103 Definitions.**

As used in this chapter:

- (1) "Assessment" means the inpatient hospital assessment established by this chapter.
- (2) "CMS" means the same as that term is defined in Section 26-18-411.
- (3) "Discharges" means the number of total hospital discharges reported on:
  - (a) Worksheet S-3 Part I, column 15, lines 14, 16, and 17 of the 2552-10 Medicare cost report for the applicable assessment year; or
  - (b) a similar report adopted by the department by administrative rule, if the report under Subsection (3)(a) is no longer available.
- (4) "Division" means the Division of Health Care Financing within the department.
- (5) "Medicare cost report" means CMS-2552-10, the cost report for electronic filing of hospitals.
- (6) "Non-state government hospital":
  - (a) means a hospital owned by a non-state government entity; and
  - (b) does not include:
    - (i) the Utah State Hospital; or
    - (ii) a hospital owned by the federal government, including the Veterans Administration Hospital.
- (7) "Private hospital":
  - (a) means:
    - (i) a privately owned general acute hospital operating in the state as defined in Section 26-21-2; and
    - (ii) a privately owned specialty hospital operating in the state, which shall include a privately owned hospital whose inpatient admissions are predominantly:
      - (A) rehabilitation;
      - (B) psychiatric;
      - (C) chemical dependency; or
      - (D) long-term acute care services; and
  - (b) does not include a residential care or treatment facility as defined in Section 62A-2-101.
- (8) "State teaching hospital" means a state owned teaching hospital that is part of an institution of higher education.

Enacted by Chapter 279, 2016 General Session