

\_\_\_\_ Hospital / Medical Center  
Submission Checklist  
Annual Reporting

**Please complete the boxes outlined in bold with a √ and submit with your filing.**

	<b>Hard Copy</b> (Not required)		<b>PDF</b> (Filed through HRS secure internet portal)	
<b>Cover Letter &amp; Submission Checklist</b>	N/A		PDF*	<input type="checkbox"/>
<b>Affidavit</b> - Notarized Annual Reporting Filing	N/A		PDF*	<input type="checkbox"/>
<b>Affidavit (2)</b> - Notarized No Audited Financial Statement Affidavits for the Hospital (if required) and Parent Corp.	N/A		PDF*	<input type="checkbox"/>
<b>Audited Financial Statements</b> - appropriately named, i.e. "XYZ Hospital_201x" or "XYZ Parent_201x. <u>A PDF is required for the hospital, parent &amp; every affiliate.</u>	N/A		PDF	<input type="checkbox"/>
<b>Medicare Cost Reports</b> – As Filed report(s) appropriately named, i.e. "201x_XXXXX_initial"	N/A		PDF	<input type="checkbox"/>
<b>Medicare Cost Reports</b> – Any Amended reports from past years appropriately named, i.e. "201x_XXXXX_rev"	N/A		PDF	<input type="checkbox"/>
<b>Legal Chart</b> of Corporate Structure for the most recent fiscal year ending 9/30/xx	N/A		PDF	<input type="checkbox"/>
<b>Officers and Directors</b> - as of February 28, 201x - <u>OHCA requests that the hospital put all affiliates in ONE PDF file.</u>	N/A		PDF	<input type="checkbox"/>
<b>Uncompensated Care Policies and Procedures</b> – <u>OHCA requests that the hospital include all attachments in ONE PDF file.</u>	N/A		PDF	<input type="checkbox"/>
<b>Variance Explanations with the original submission</b> - Thorough explanation of <i>input</i> amounts with a variance of 25% or larger on Report 23.	N/A		Not Required for FY 2017	<input type="checkbox"/>
<b>HRS files</b> have been electronically submitted and no hard copies of the HRS reports are being submitted.	N/A		HRS files submitted	<input type="checkbox"/>

*\*Hospitals may submit the cover letter, submission checklist and affidavits in one PDF file. All other items should be submitted in separate PDF files. When naming PDF files, please use a filename that easily identifies the hospital and item being submitted.*