

From: [Theresa Simms](#)
To: [User, OHCA](#)
Cc: [David Houle](#); [Gary Jones](#)
Subject: Facility Fee
Date: Wednesday, May 31, 2017 10:56:00 AM

Dear OHCA,

Please be advised that Hebrew Health Care, Inc and affiliates, including the Hospital at Hebrew Health Care, NPI 1669453916 and NPI 1740261213, did not charge facility fees during calendar year 2016..

If there are any questions, please contact me at 860.523.3950.

Thank you.

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Business Manager, Financial Services



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Thank you.