

Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510
---	--

RECEIVED  
 SECRETARY OF THE SENATE  
 02 JUL 29 AM 10:19

# LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

1. Registrant Name <u>BAKER Healthcare Consulting, Inc.</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>One American Square, Suite 2000, Box 82058</u>			
3. Principal Place of Business (if different from line 2) City: <u>Indianapolis</u> State/Zip (or Country) <u>IN 46282</u>			
4. Contact Name <u>DALE E. BAKER</u>	Telephone <u>317-631-3613</u>	E-mail (optional) <u>Bakerhealthcare@yahoo.com</u>	5. Senate ID # <u>516</u>
7. Client Name <input type="checkbox"/> Self <u>Tift General Hospital</u>			6. House ID # <u>3357</u>

TYPE OF REPORT 8. Year 2001 Midyear (January 1-June 30)  OR Year End (July 1-Dec)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report  ⇒ Termination Date \_\_\_\_\_

11. No Lobbying

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)</p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603: Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162: Internal Revenue Code</p>

Signature Dale E. Baker

Printed Name and Title DALE E. BAKER, President

LD-2 (REV. 6/98)

PA

*BAKER Healthcare*

Registrant Name *Consulting, Inc.*

Client Name *Tift General Hos*

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which tl engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each c information as requested. Attach additional page(s) as needed.

15. General issue area code *MMH* (one per page)

16. Specific lobbying issues

*See attached*

17. House(s) of Congress and Federal agencies contacted

Check if None

*Senate  
House of Representatives*

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
<i>John C. Rowder</i>	
<i>Dale E. Baker</i>	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature *Dale E. Baker* Date *2-12-01*

Printed Name and Title *Dale E. Baker President*



*Baker Healthcare Consulting, Inc.*

00020211257

Registrant Name

Client Name

*Tift General Hospital*

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

21. Client new principal place of business (if different from line 20)

City

State/Zip (or Country)

22. New general description of client's business or activities

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

**ISSUE UPDATE**

24. General lobbying issues previously reported that no longer pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or co

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant affiliated organization

Signature

*Walter E. Bah*

Date

*2/20/11*

Printed Name and Title DALE E. BAKER, President

Form LD-2 (Rev. 6/98)

Page

HALL,  
 RENDER, KILLIAN,  
 HEATH & LYMAN

Attorneys at Law

Professional Service Corps

Suite 2000, Box 82064

One American Square, Indianapolis, IN 46282

(317) 633-4884 Fax: (317) 633-4878

February 22

Health Care Financing Administration  
 Office of the Attorney Advisor  
 Room C3-01-20  
 7500 Security Boulevard  
 Baltimore, MD 21244-1850

Re: Tift General Hospital  
 Provider No. 11-0095  
 Federal Fiscal Year Beginning 10/01/00  
 Case No. 99C0554

Dear Ladies and Gentlemen:

We represent Tift General Hospital ("Tift"), which is a subsection (d) provider Hospital under section 1886 of the Social Security Act. Tift submitted, in a timely manner, an application to the Medicare Geographic Classification Review Board ("the Board" or "MGCRB") for geographic redesignation in accordance with 42 C.F.R. 412.230 for the federal fiscal year beginning October 1, 2000 through September 30, 2001.

On February 8, 2000 the Board denied the Tift's request for redesignation for the purpose of using the wage index of the Albany, Georgia MSA. The decision of the Board is attached Appendix I. We respectfully request that the Administrator overturn the denial of the wage index request and grant Tift geographic redesignation for discharges occurring from October 2000 through September 30, 2001 using the Albany, Georgia MSA wage index.

#### FACTS

The Board found that Tift's average hourly wage was only 72.5962% of the average hourly wage of the Albany, Georgia MSA. Since this was lower than the required 84% threshold, the Board denied the Hospital's request for a wage index reclassification.

On November 5, 1999 we filed additional information with the Board in support of Tift's application. Our filing stated that one of the two hospitals in Albany, Georgia (Phoebe Putney Hospital, Provider No. 11-0007) likely had seriously flawed data included in its wage index computation. We noted that the average hourly wage of this hospital had increased 45.78% from

Indianapolis North Office: 8402 Harcourt Road, Suite 820, Indianapolis, IN 46260 (317) 871-6222 Fax: (317) 338-3946  
Louisville Office: AEGON Center, Suite 1530, 400 West Market Street, Louisville, KY 40202 (502) 568-1890 Fax: (502) 568-4878

Health Care Financing Administration  
 February 22, 2000  
 Page 2

the prior year. Also, Tift had notified the Health Care Financing Administration ("HCFA" June 4, 1999 of the probable error. The response from HCFA on July 22, 1999 indicated they had been in contact with the fiscal intermediary to try to fix the error.

Subsequently, when Tift learned that the apparent error was still uncorrected, Tift notified HCFA on September 29, 1999, of that fact. On October 29, 1999, Tift received a response from HCFA indicating that if Tift had specific information, then HCFA would be "willing to review that information". These letters are attached hereto as Appendix II.

Our computations suggest that the Phoebe Putney Hospital would have had to have the equivalent of 790 fulltime teaching physicians based on the teaching data included in the wage index for Albany, Georgia MSA. Tift does not have complete access to all of the records of Phoebe Putney Hospital and cannot therefore definitively redefine all aspects of the wage index for Phoebe Putney Hospital. However, the review of the data on page seven of Appendix II clearly indicates that each year from 1995 to 1999 Tift has exceeded the 84% target of the average hourly wage of the Albany, Georgia MSA. Only in 2000, when the Albany average hourly wage implausibly exceeded the Atlanta, Georgia MSA wage index (because of the wage index error) did Tift fail to achieve the 84% threshold.

## ARGUMENT

42 USC section 1395ww(b)(10)(D)(i) provides in pertinent part:

"The Secretary shall publish guidelines to be used by the Board in rendering decisions on applications submitted under this paragraph, and shall include in such guidelines the following... II. Guidelines for determining whether the county in which the hospital is located should be treated as being a part of a particular Metropolitan Statistical Area".

Instead of specifying that the Secretary establish exclusive regulatory criteria, Congress clearly gave the MGCRB and HCFA flexibility in choosing appropriate "guidelines" to allow hospitals to be reclassified.

On June 4, 1991, the Department of Health and Human Services published the final rule regarding MGCRB procedures and criteria. In the preamble to the rule in 56 Federal Register 25470, under the caption "B. Criterion Conditions for Geographic Reclassification" DHS further states:

*Methodology.* Although we have described a methodology that should be followed by hospitals in determining if the various criteria are met, the MGCRB has the discretion to accept an alternative methodology that establishes that the specified criteria are met if the MGCRB determines it is also appropriate. For example, we have established a methodology to determine if the hospital meets the cost criteria for



Health Care Financing Administration

February 22, 2000

Page 3

reclassification for purposes of the standardized amount. If the hospital uses a different methodology to make the cost comparison based on acceptable data the MGCRB may nevertheless determine that the hospital has demonstrated that it qualifies for reclassification."

From the above, it is clear that the MGCRB and HCFA have discretion to accept alternative criteria based on acceptable data and determine that a hospital demonstrates that it qualifies for reclassification. Thus, we submit that both the Board and HCFA have the authority to approve the Tift reclassification request based on substantial evidence of an error in the federal fiscal year 2000 Albany, Georgia MSA wage index that prevents Tift from being reclassified. This denial is particularly inequitable since Tift, without the intervention of HCFA or its fiscal intermediary, is powerless to correct the inherent error in the Albany, Georgia MSA wage index. Additionally, based on trending of data from previous years to 2000, Tift would surely meet the 84% threshold if reasonably accurate wage data was included in the Albany wage index.

In the alternative the Board or HCFA could extend the prior year's wage index reclassification of Tift to the year 2000. There is ample precedent for this treatment since the Board has granted two-year reclassifications for federal fiscal year 1993.

We suggest that HCFA has the authority and responsibility to ensure equitable payment to Tift in these circumstances. We submit that there are two methodologies available to HCFA to fix this obvious error and reclassify Tift to the Albany, Georgia, MSA. We therefore ask the Administrator to reverse the denial of the MGCRB and reclassify Tift to the Albany, Georgia, MSA for federal fiscal year 2001.

Should you have any further questions, please do not hesitate to advise us.

Sincerely,

HALL, RENDER, KILLIAN, HEATH & LYMAN, P.S.



John C. Render

JCR/kks

Enclosures

0755DEB

1