2022 SPARCS Data Submission Compliance Report -- Data Received Through March 2024 Submissions Not Meeting the Standard of 80% of 2021 Monthly Average (Feb and Dec Set at 75%)

Facility=EASTERN ORANGE AMBULATORY SURGERY CENTER, LLC (DTC) PFI: 008500

| File Type | Discharge Month | Prev Yr Avg | # Recds Expected (Target) | # Recds Loaded | Shortage | Pct of PrevYrAvg Submtd * | Exception On File w/SPARCS | Extension Granted | File Last Submtd |
|--------------------------------|--------------------|-------------------|---------------------------------|----------------------|----------|---------------------------------|----------------------------------|----------------------|------------------------|
| AS | January | 403 | 322 | 355 | | 88% | | | 2022 JUN |
| | February | | 302 | 353 | | 87% | | | 2022 JUN |
| | March | | 322 | 495 | | 122% | | | 2022 JUL |
| | April | | 322 | 415 | | 102% | | | 2022 SEP |
| | May | | 322 | 388 | | 96% | | | 2022 SEP |
| | June | | 322 | 451 | | 111% | | | 2022 SEP |
| | July | | 322 | 347 | | 86% | | | 2022 OCT |
| | August | | 322 | 397 | | 98% | | | 2022 NOV |
| | September | | 322 | 387 | | 96% | | | 2023 JAN |
| | October | | 322 | 347 | | 86% | | | 2023 JAN |
| | November | | 322 | 388 | | 96% | | | 2023 FEB |
| | December | | 302 | 378 | | 93% | | | 2023 MAY |
| Total Records Submitted: 4,701 | | | | | | | | | |