

HCP-64

OUTPATIENT FACILITY SURCHARGE

State of Rhode Island and Providence Plantations Department of Revenue - Division of Taxation OUTPATIENT HEALTH CARE FACILITY SURCHARGE RETURN

Due on or before the 25th day of the following month

NAME		
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER		
FEDERAL EMPLOYER IDENTIFICATION NUMBER		
RETURN FOR THE PERIOD OF:		
	MONTH	YEAR

Calculation of Amount Due:

1. Net patient services revenue received	1.	
2. Outpatient health care facility surcharge - line 1 time 2% (0.02)	2.	
3. Interest - (1.5% per month) see instructions	3.	
4. Penalty - (10%) see instructions	4.	
5. Total interest and penalty amount	5.	
6. TOTAL AMOUNT DUE (Add lines 2 and 5)	6.	

INSTRUCTIONS

Line 1: **Net Patient Services Revenue Received** - Enter the amount of all monies and other consideration received for patient care services for the month being reported on this return.

Line 2: **Outpatient Health Care Facility Surcharge** - Multiply Line 1 times 2.0% (0.02)

Line 3: **Interest** - If remitting after the due date, multiply Line 2 times 1.5% (0.015) times the number of months late. Interest is calculated from the due date of the return to the date of remittance at a rate of 18% per annum.

Line 4: **Penalty** - If remitting after the due date, multiply Line 2 time 10% (0.10). Penalty is calculated at 10% of the surcharge due.

Line 5: **Total Interest and Penalty Amount** - Add lines 3 and 4.

Line 6: **Total Amount Due** - Add line 2 and 5.

EFFECTIVE OCTOBER 31, 2007, PAYMENTS MUST BE MADE BY ELECTRONIC FUNDS TRANSFER (EFT). QUESTIONS REGARDING EFT MAY BE DIRECTED TO (401)574-8484.

Under penalties of perjury, I hereby certify that I have personal knowledge of the statements and other information constituting this return, that the same are true, correct and complete to the best of my knowledge and belief.

Date Signature of authorized officer Title

Date Signature of preparer Address of preparer

MAY THE DIVISION CONTACT YOUR PREPARER ABOUT THIS RETURN? YES NO _____
Phone number

MAILING ADDRESS: RHODE ISLAND DIVISION OF TAXATION, ONE CAPITOL HILL, PROVIDENCE, RI 02908-5814

Key #76

revised 9/28/2011