



STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

100 NORTH UNION STREET, SUITE 870  
MONTGOMERY, ALABAMA 36104

September 30, 2025

Dear Administrator or Representative:

Links to the **2025 Annual Report for Ambulatory Surgery Centers** (Form ASC-1) for the 12-month period ending September 30, 2025, as well as needed instructions, are being provided in this e-mail. Pursuant to ALA. ADMIN. CODE r 410-1-3-.11, this report is deemed a "Mandatory Report", and is due on December 15, 2025. ALA. ADMIN. CODE r 410-1-3-.09 requires that this report be filed electronically to [data.submit@shpda.alabama.gov](mailto:data.submit@shpda.alabama.gov). Both rules may be accessed on the Agency's website at [www.shpda.alabama.gov](http://www.shpda.alabama.gov).

**Any health care provider found to be non-compliant with the data reporting requirements specified in ALA. ADMIN. CODE r 410-1-3-.11 may be assessed a financial penalty and may not participate in the Certificate of Need review process as either an applicant for, or in opposition to, a Certificate of Need application until such time as the provider is deemed to have achieved compliance through the submission of an annual report deemed materially complete and correct by the Agency.**

Two specific changes were made to the filing requirements beginning with previous reporting periods. Please ensure all preparers are provided a copy of the instructions for the report. First, the due date of the annual report was changed from November 30 to December 15. Also, Page 5, Section VI (Patient Origin by Zip Code) may no longer be submitted manually, but must instead be submitted as either a Microsoft Excel (v. 2003 or later) or CSV formatted file. This file should be submitted at the same time as the remainder of the report. The report will not be deemed officially received by the Agency unless and until both the utilization portion and the Excel or CSV file are received. An example of the required formatting and column headers for the Excel or CSV file can be found on page 5 of the Annual Report.

The interactive form should be saved to your computer prior to completing, and includes the ability to save while in the process of completion with Adobe Reader v. 6 or higher; a "Print" button on the form as a reminder to print a copy for your records and a "Submit Report" button on the form for direct transmittal with use of Outlook or other desktop e-mail applications. Should your e-mail provider be internet-based (Gmail, Yahoo. etc.) the report can be e-mailed as an attachment without the need for scanning. Electronic signatures are preferred. If the facility does not have the

capability of electronic signatures, the report may be printed, manually signed, scanned, and filed as an e-mail attachment.

Should you have any issues accessing the information via the links, all information is located on our website, [www.shpda.alabama.gov](http://www.shpda.alabama.gov). From the navigation box on the left, choose *Health Care Data*, then *Report Forms*. Scroll down to Ambulatory Surgery Center (Form ASC-1) and choose 2025-I. It is requested that the interactive form be completed. This form performs automatic calculations which will reduce the number of errors experienced on reports not completed via the interactive version. Should you be unfamiliar with use of an interactive form, you may contact the Data Division for assistance as outlined below.

**Please read all instructions before completing the report.** Signatures are required from two separate individuals, the signature of the person preparing the report and a signature from another member of administration/corporate verifying the accuracy of the information provided in the report. ***This report will not be deemed substantially complete and meeting requirements without signatures from two separate individuals.***

If you have any questions or if we may provide any assistance do not hesitate to contact me at [bradford.williams@shpda.alabama.gov](mailto:bradford.williams@shpda.alabama.gov), (334) 242-4103, or my assistants, Jacquelin Barnes at [jacquelin.barnes@shpda.alabama.gov](mailto:jacquelin.barnes@shpda.alabama.gov), (334) 242-4108, and Lee Ann Taylor at [leeann.woodham@shpda.alabama.gov](mailto:leeann.woodham@shpda.alabama.gov), (334) 242-4512.

Sincerely,

A handwritten signature in black ink, appearing to be "Bradford L. Williams", written in a cursive style.

Bradford L. Williams  
Health Planning Administrator

BLW