



Community Impact & Benefit Activities of CAHs, Other Rural, and Urban Hospitals

Zach Croll; Lauren Zoll; John Gale, MS; Andrew Coburn, PhD
University of Southern Maine

KEY FINDINGS:

- In general, CAHs were less likely than other rural and urban hospitals to provide certain community benefit and essential services (e.g., health screenings, community outreach, enrollment assistance, substance abuse, psychiatric, obstetrical, dental, palliative, and hospice services) reflected in the core service and financial community benefit indicators we examined.
- CAHs were more likely than other rural and urban hospitals to offer long term care, ambulance, and adult day care services.
- CAHs reported lower rates of charity care and greater rates of non-Medicare and non-reimbursable Medicare bad debt than other rural and urban hospitals.

INTRODUCTION

Non-profit and publicly-owned hospitals, including Critical Access Hospitals (CAHs), have obligations to address the health needs of their communities. Non-profit hospitals are required to report their community benefit activities to the Internal Revenue Service using Form 990, Schedule H. Community benefit activities are programs and services that provide treatment and/or promote health in response to identified community needs. Publicly-owned hospitals are held accountable to the needs of their communities through the oversight of their governing boards and local governments. In order to monitor the community impact and benefit activities of CAHs and understand whether and how their community impact and benefit profiles differ from those of other hospitals, we compared CAHs to other rural and urban hospitals using a set of indicators developed by the Flex Monitoring Team (FMT). We have prepared a series of tables to allow State Flex Program and CAH administrators to compare the community impact and benefit profiles of CAHs nationally (Tables 1 and 2) to the performance of CAHs in

their state (see links to state-specific tables on page 5). Table 1 provides data for select measures of community impact and benefit activity as well as the provision of essential health care services that are typically difficult to access in many rural communities. Table 2 provides data on hospital charity care, bad debt, and uncompensated care activities.

APPROACH

This report uses data from the American Hospital Association (AHA) Annual Survey Database and Worksheet S-10 cost report data from the Center for Medicare and Medicaid Services (Form CMS-2552-10) for fiscal year 2014 to examine the community benefit profiles of CAHs with those of other hospitals. We linked the AHA Survey data with the Flex Monitoring Team's list of CAHs (as of April 6, 2016) to identify CAHs in the dataset and with the 2013 Rural Urban Continuum Codes (RUCCs) to classify the remaining hospitals as either rural (RUCCs 4 through 9) or urban (RUCCs 1 through 3). This resulting dataset was then linked to Worksheet S-10 cost report data retrieved



from the Center for Medicare and Medicaid Services website. The 2014 AHA database contains self-reported data on 1,324 CAHs, 852 other rural general medical and surgical hospitals, and 2,309 urban general medical and surgical hospitals. Cost report data were not available for all AHA survey respondents. Hospitals located in Puerto Rico, the Marshall Islands, Guam, American Samoa, the Virgin Islands, and the Northern Mariana Islands were excluded from the analysis.

The FMT developed “core” and “financial” indicators of community benefit activity. The core indicators show the provision of community benefit and essential health services directly by hospitals or through participation in a health system or joint venture. The financial indicators compare the levels of charity care, bad debt, total uncompensated care, and unreimbursed costs of serving patients covered by means-tested government programs (i.e., Medicaid, State Children’s Health Insurance Programs (SCHIP), and other state and local indigent care programs) across all hospital types (i.e. CAH, other rural, and urban). The calculation of charity care and bad debt performance as a percentage of adjusted revenue allows for comparison across hospitals regardless of differences in volume, service mix, and charge rates.

RESULTS

Services Offered by Hospitals

We compared CAH involvement in the provision of community impact and benefit services, including essential community services, to the performance of other rural and urban hospitals (Table 1, page 4). CAHs were less likely than other rural and urban hospitals to offer traditional community benefit services and programs such as health screenings, enrollment assistance, health fairs, community health education, health screenings, and research. They were also less likely to offer certain essential services such as substance use treatment, dental care, hemodialysis, hospice care, obstetrical care, psychiatric services, and palliative care or be designated as a certified trauma center.

CAHs, on the other hand, were more likely than other rural and urban hospitals to offer essential services such as adult day care, ambulance services, and a range of long-term care services including skilled nurs-

ing, intermediate, and other long-term care (e.g., residential or elderly care) services.

CAHs were more likely than other rural hospitals, but less likely than urban hospitals, to operate indigent care and immunization programs. CAHs and urban hospitals were less likely than other rural hospitals to offer home health services.

Services Offered by Hospital Systems and Joint Ventures

Given that hospital involvement in health systems or joint ventures can expand the availability of services within communities, we examined the extent to which participation in a health system or a joint venture contributed to improvements in the level of community benefits and/or essential services by hospitals (Table 1, page 4). Generally speaking, involvement in a health system or joint venture expanded the overall level of services available in urban communities more than in rural communities but, with a few exceptions, did alter the overall patterns of community benefit and/or essential service provided by Critical Access, other rural, and urban hospitals. Health system or joint venture participation had the greatest impact on the availability of ambulance services, home health, hospice care, any psychiatric services, and dental services across all three hospital types.

Charity Care and Bad Debt Spending Patterns

The four financial indicators developed using the S-10 cost report data are expressed as a percentage of adjusted revenue and used to estimate the relative differences in uncompensated care (i.e., charity care and bad debt) spending patterns between CAHs and other hospitals (Table 2, page 5). When viewed as a percentage of adjusted revenues, urban hospitals provided greater rates of charity care than other rural hospitals and CAHs. In contrast, CAHs had higher rates of non-Medicare and non-reimbursable Medicare bad debt compared to other rural and urban hospitals respectively. Overall, CAHs provided slightly lower rates of uncompensated care than other rural hospitals, but higher rates than urban hospitals. Finally, the total unreimbursed costs for Medicaid, SCHIP and state and local indigent care programs (the difference between the cost of providing these services and the amount hospitals are



reimbursed by the programs) was relatively similar for all hospital types.

CONCLUSIONS

In general, CAHs were less likely than other rural and urban hospitals to provide certain community benefit and essential services (e.g., health screenings, community outreach, enrollment assistance, substance abuse, psychiatric, obstetrical, dental, palliative, and hospice services) reflected in the core service and financial community benefit indicators we examined. This may be attributable to their smaller size and more vulnerable financial status. However, CAHs were more likely than other rural and urban hospitals to offer long term care, ambulance, and adult day care services. Indicators on which CAHs outperform other hospitals may indicate areas where CAHs fill critical gaps in the local safety net. Participation in systems or joint ventures provides opportunities to develop and offer services that hospitals could not otherwise offer on their own. With regard to the financial community benefit indicators, CAHs reported lower rates of charity care and greater rates of non-Medicare and non-reimbursable Medicare bad debt than other rural and urban hospitals. Further research is needed to understand the factors driving variations in community benefit activity by CAHs and the resources and incentives needed to help CAHs refine and target their community benefit activity.

(Tables 1-2 begin on next page)



Table 1. National Comparison of Service Indicators

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	65.1	74.0	86.1	69.7	77.0	90.9
Enrollment assistance services	48.8	57.8	77.1	56.1	67.2	88.3
Health fair	79.4	85.8	85.9	85.7	88.8	92.5
Community health education	79.2	85.2	89.5	84.2	87.6	94.0
Health screenings	83.1	88.2	89.8	86.3	90.5	94.3
Health research	1.9	9.3	45.0	9.6	15.5	60.6
Immunization program	46.0	39.4	50.8	54.4	44.6	64.2
Indigent care clinic	10.4	9.9	25.2	18.8	20.8	48.5
Adult day care	5.2	3.4	4.1	8.3	6.6	16.2
Any substance use services	5.6	11.8	26.0	15.0	19.6	47.3
Substance use inpatient care	3.0	6.7	13.2	7.7	11.9	30.6
Substance use outpatient care	3.4	9.0	22.3	11.5	16.1	43.8
Ambulance services	21.9	20.3	14.7	48.0	41.5	53.9
Certified trauma center ³	42.0	44.0	46.6	45.7	46.7	58.9
Dental services	5.9	20.5	30.3	25.9	29.9	46.4
Hemodialysis	3.1	21.2	54.4	16.0	45.4	87.7
Home health services	26.9	41.3	26.9	51.7	63.1	68.1
Hospice program	18.3	23.9	27.0	60.0	58.5	74.2
Obstetrics care	36.1	79.6	78.4	42.8	81.3	86.7
Any psychiatric services	24.9	45.7	61.7	45.3	55.5	79.0
Psychiatric inpatient care	7.1	32.7	45.7	15.0	37.8	65.0
Psychiatric outpatient care	21.2	37.5	56.8	42.0	47.6	75.1
Palliative care program	17.3	28.1	59.5	31.3	39.0	73.5
Inpatient palliative care unit	4.3	7.6	17.2	11.3	12.1	28.1
Any long-term care	47.4	29.1	23.6	51.6	36.3	44.4
Skilled nursing care	42.1	26.0	19.1	46.6	32.7	39.2
Intermediate nursing care	15.4	7.2	7.1	19.4	11.5	20.7
Other long-term care	9.9	6.1	5.6	13.6	9.9	16.3

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture's 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either "other rural" (RUCCs 4 through 9) or "urban" (RUCCs 1 through 3).

²N=1,324 CAHs, 852 other rural hospitals, and 2,309 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



Table 2. National Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	5.8	6.0	4.3
Charity care costs	1.6	1.9	2.1
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	4.3	4.2	2.2
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.9	3.7	3.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in the 45 states where CAHs operate. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).
- Six hospitals (one CAH, one other rural, and four urban) that reported one or more cost report indicator spending total that exceeded their adjusted revenue figure were removed from the cost report analyses.

Links to State-Specific Tables

Alabama	Idaho	Michigan	New York	Tennessee
Alaska	Illinois	Minnesota	North Carolina	Texas
Arizona	Indiana	Mississippi	North Dakota	Utah
Arkansas	Iowa	Missouri	Ohio	Vermont
California	Kansas	Montana	Oklahoma	Virginia
Colorado	Kentucky	Nebraska	Oregon	Washington
Florida	Louisiana	Nevada	Pennsylvania	West Virginia
Georgia	Maine	New Hampshire	South Carolina	Wisconsin
Hawaii	Massachusetts	New Mexico	South Dakota	Wyoming



State Comparison of Service Indicators: Alabama

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	75.0	47.2	69.8	75.0	50.0	69.8
Enrollment assistance services	0.0	36.1	76.7	25.0	41.7	81.4
Health fair	75.0	72.2	88.4	100.0	72.2	88.4
Community health education	75.0	55.6	74.4	100.0	55.6	74.4
Health screenings	75.0	58.3	86.1	75.0	61.1	88.4
Health research	0.0	5.6	27.9	25.0	5.6	32.6
Immunization program	50.0	8.3	30.2	50.0	8.3	32.6
Indigent care clinic	0.0	2.8	14.0	25.0	2.8	18.6
Adult day care	0.0	2.8	0.0	0.0	2.8	0.0
Any substance use services	0.0	5.6	20.9	0.0	5.6	27.9
Substance use inpatient care	0.0	5.6	11.6	0.0	5.6	14.0
Substance use outpatient care	0.0	0.0	16.3	0.0	0.0	20.9
Ambulance services	0.0	11.1	9.3	0.0	25.0	25.6
Certified trauma center ²	25.0	25.0	53.5	25.0	25.0	55.8
Dental services	25.0	0.0	9.3	50.0	5.6	9.3
Hemodialysis	0.0	13.9	58.1	25.0	19.4	74.4
Home health services	0.0	44.4	20.9	50.0	61.1	48.8
Hospice program	0.0	8.3	14.0	50.0	19.4	39.5
Obstetrics care	0.0	47.2	69.8	25.0	50.0	76.7
Any psychiatric services	25.0	38.9	58.1	50.0	44.4	67.4
Psychiatric inpatient care	0.0	36.1	51.2	0.0	36.1	62.8
Psychiatric outpatient care	25.0	13.9	46.5	50.0	19.4	55.8
Palliative care program	0.0	2.8	37.2	25.0	2.8	46.5
Inpatient palliative care unit	0.0	2.8	14.0	0.0	2.8	14.0
Any long-term care	75.0	13.9	11.6	75.0	16.7	25.6
Skilled nursing care	75.0	11.1	7.0	75.0	13.9	14.0
Intermediate nursing care	0.0	5.6	9.3	0.0	5.6	14.0
Other long-term care	0.0	0.0	0.0	0.0	2.8	9.3

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=4 CAHs, 38 other rural hospitals, and 49 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Alabama

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	7.3	8.2	6.0
Charity care costs	2.7	1.6	1.8
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	5.4	6.7	4.3
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	16.0	3.0	1.9

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Alabama. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Alaska

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	50.0	66.7	100.0	75.0	66.7	100.0
Enrollment assistance services	75.0	33.3	100.0	75.0	33.3	100.0
Health fair	75.0	100.0	100.0	100.0	100.0	100.0
Community health education	75.0	100.0	100.0	75.0	100.0	100.0
Health screenings	75.0	100.0	66.7	100.0	100.0	66.7
Health research	0.0	0.0	66.7	0.0	0.0	66.7
Immunization program	50.0	66.7	66.7	75.0	66.7	66.7
Indigent care clinic	0.0	0.0	0.0	0.0	0.0	0.0
Adult day care	0.0	0.0	0.0	0.0	0.0	0.0
Any substance use services	0.0	100.0	0.0	25.0	100.0	0.0
Substance use inpatient care	0.0	66.7	0.0	0.0	66.7	0.0
Substance use outpatient care	0.0	100.0	0.0	25.0	100.0	0.0
Ambulance services	0.0	0.0	0.0	25.0	0.0	0.0
Certified trauma center ²	25.0	66.7	66.7	25.0	66.7	66.7
Dental services	0.0	33.3	66.7	50.0	33.3	66.7
Hemodialysis	0.0	0.0	66.7	0.0	0.0	66.7
Home health services	75.0	0.0	66.7	75.0	0.0	100.0
Hospice program	25.0	0.0	66.7	50.0	0.0	100.0
Obstetrics care	50.0	100.0	100.0	50.0	100.0	100.0
Any psychiatric services	25.0	100.0	100.0	75.0	100.0	100.0
Psychiatric inpatient care	0.0	33.3	66.7	0.0	33.3	66.7
Psychiatric outpatient care	25.0	100.0	66.7	75.0	100.0	66.7
Palliative care program	50.0	33.3	33.3	75.0	33.3	33.3
Inpatient palliative care unit	0.0	0.0	33.3	25.0	0.0	33.3
Any long-term care	100.0	33.3	100.0	100.0	33.3	100.0
Skilled nursing care	75.0	33.3	66.7	75.0	33.3	66.7
Intermediate nursing care	50.0	0.0	66.7	50.0	0.0	66.7
Other long-term care	0.0	33.3	0.0	0.0	33.3	0.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=13 CAHs, 4 other rural hospitals, and 7 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Alaska

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	6.3	5.6	4.6
Charity care costs	2.2	1.7	2.0
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	4.2	3.9	2.6
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.6	.	0.2

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Alaska. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Arizona

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	60.0	100.0	73.7	60.0	100.0	89.5
Enrollment assistance services	50.0	50.0	81.6	60.0	50.0	86.8
Health fair	70.0	75.0	76.3	80.0	75.0	86.8
Community health education	90.0	75.0	94.7	90.0	75.0	94.7
Health screenings	80.0	75.0	86.8	80.0	75.0	92.1
Health research	0.0	0.0	52.6	0.0	25.0	68.4
Immunization program	60.0	75.0	26.3	70.0	75.0	57.9
Indigent care clinic	10.0	50.0	21.1	10.0	50.0	50.0
Adult day care	0.0	0.0	0.0	0.0	0.0	31.6
Any substance use services	20.0	0.0	15.8	20.0	25.0	42.1
Substance use inpatient care	10.0	0.0	2.6	10.0	25.0	7.9
Substance use outpatient care	10.0	0.0	15.8	10.0	25.0	39.5
Ambulance services	10.0	0.0	2.6	10.0	25.0	44.7
Certified trauma center ²	40.0	50.0	34.2	40.0	50.0	57.9
Dental services	30.0	25.0	21.1	30.0	25.0	44.7
Hemodialysis	0.0	0.0	68.4	10.0	25.0	92.1
Home health services	20.0	25.0	13.2	60.0	50.0	57.9
Hospice program	10.0	25.0	15.8	60.0	50.0	60.5
Obstetrics care	40.0	100.0	73.7	40.0	100.0	76.3
Any psychiatric services	20.0	25.0	63.2	40.0	25.0	76.3
Psychiatric inpatient care	10.0	0.0	26.3	10.0	25.0	36.8
Psychiatric outpatient care	20.0	25.0	60.5	40.0	25.0	73.7
Palliative care program	0.0	25.0	55.3	30.0	25.0	68.4
Inpatient palliative care unit	0.0	0.0	21.1	10.0	0.0	31.6
Any long-term care	20.0	0.0	7.9	40.0	25.0	13.2
Skilled nursing care	20.0	0.0	2.6	40.0	25.0	7.9
Intermediate nursing care	10.0	0.0	2.6	10.0	25.0	7.9
Other long-term care	20.0	0.0	2.6	20.0	0.0	5.3

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=14 CAHs, 7 other rural hospitals, and 51 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Arizona

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	5.4	3.7	4.4
Charity care costs	0.9	0.8	1.9
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	4.5	3.0	2.6
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	9.1	5.5	6.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Arizona. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Arkansas

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	76.9	57.9	73.7	76.9	57.9	84.2
Enrollment assistance services	42.3	47.4	79.0	57.7	63.2	89.5
Health fair	96.2	94.7	73.7	96.2	94.7	89.5
Community health education	69.2	84.2	68.4	80.8	84.2	84.2
Health screenings	92.3	100.0	84.2	92.3	100.0	94.7
Health research	0.0	0.0	36.8	15.4	5.3	52.6
Immunization program	23.1	10.5	31.6	26.9	10.5	42.1
Indigent care clinic	0.0	0.0	5.3	15.4	5.3	42.1
Adult day care	3.9	5.3	0.0	3.9	5.3	10.5
Any substance use services	0.0	5.3	10.5	0.0	5.3	15.8
Substance use inpatient care	0.0	5.3	5.3	0.0	5.3	10.5
Substance use outpatient care	0.0	5.3	10.5	0.0	5.3	15.8
Ambulance services	15.4	31.6	5.3	38.5	36.8	21.1
Certified trauma center ²	57.7	84.2	84.2	57.7	84.2	84.2
Dental services	0.0	26.3	15.8	7.7	26.3	42.1
Hemodialysis	0.0	5.3	63.2	19.2	31.6	89.5
Home health services	42.3	63.2	47.4	73.1	79.0	79.0
Hospice program	3.9	15.8	15.8	42.3	31.6	52.6
Obstetrics care	15.4	79.0	79.0	30.8	79.0	84.2
Any psychiatric services	15.4	52.6	63.2	30.8	52.6	84.2
Psychiatric inpatient care	7.7	52.6	47.4	7.7	52.6	57.9
Psychiatric outpatient care	15.4	36.8	47.4	30.8	36.8	68.4
Palliative care program	3.9	5.3	42.1	23.1	15.8	52.6
Inpatient palliative care unit	0.0	0.0	15.8	19.2	0.0	21.1
Any long-term care	26.9	21.1	21.1	26.9	21.1	26.3
Skilled nursing care	26.9	21.1	10.5	26.9	21.1	15.8
Intermediate nursing care	0.0	0.0	15.8	0.0	0.0	21.1
Other long-term care	0.0	0.0	0.0	0.0	0.0	10.5

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=29 CAHs, 20 other rural hospitals, and 23 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Arkansas

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	6.3	4.8	3.2
Charity care costs	1.5	1.1	1.3
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	5.1	3.7	2.1
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.4	3.8	4.0

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Arkansas. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: California

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	55.6	87.5	87.8	61.1	87.5	95.2
Enrollment assistance services	61.1	37.5	75.1	72.2	50.0	85.2
Health fair	94.4	62.5	76.7	100.0	87.5	90.5
Community health education	72.2	75.0	83.6	77.8	87.5	94.7
Health screenings	66.7	75.0	84.7	72.2	87.5	92.6
Health research	0.0	0.0	44.4	11.1	25.0	59.3
Immunization program	44.4	50.0	57.1	50.0	62.5	69.8
Indigent care clinic	27.8	12.5	27.5	33.3	50.0	47.1
Adult day care	0.0	12.5	6.4	5.6	37.5	22.2
Any substance use services	5.6	0.0	16.4	11.1	25.0	48.2
Substance use inpatient care	5.6	0.0	6.9	11.1	25.0	31.8
Substance use outpatient care	0.0	0.0	14.3	5.6	25.0	46.0
Ambulance services	11.1	12.5	6.9	27.8	37.5	55.6
Certified trauma center ²	16.7	37.5	29.1	16.7	50.0	49.2
Dental services	22.2	25.0	21.7	44.4	50.0	45.0
Hemodialysis	0.0	12.5	55.0	11.1	50.0	91.0
Home health services	22.2	75.0	27.0	50.0	87.5	70.9
Hospice program	22.2	37.5	25.9	50.0	75.0	68.3
Obstetrics care	50.0	87.5	84.1	50.0	87.5	92.1
Any psychiatric services	22.2	12.5	49.7	33.3	37.5	73.5
Psychiatric inpatient care	5.6	0.0	29.6	11.1	25.0	59.3
Psychiatric outpatient care	22.2	12.5	48.2	33.3	37.5	72.0
Palliative care program	22.2	75.0	68.8	33.3	100.0	77.3
Inpatient palliative care unit	5.6	0.0	19.6	11.1	0.0	24.3
Any long-term care	44.4	12.5	27.0	50.0	37.5	54.5
Skilled nursing care	44.4	12.5	25.4	50.0	37.5	52.4
Intermediate nursing care	5.6	0.0	2.7	11.1	25.0	17.5
Other long-term care	5.6	0.0	2.1	11.1	0.0	7.4

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=33 CAHs, 9 other rural hospitals, and 285 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: California

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.8	2.5	2.3
Charity care costs	1.0	0.7	0.9
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.9	1.8	1.4
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	9.4	8.4	8.0

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in California. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Colorado

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	66.7	75.0	93.9	71.4	75.0	93.9
Enrollment assistance services	66.7	50.0	72.7	71.4	58.3	90.9
Health fair	76.2	83.3	75.8	100.0	91.7	90.9
Community health education	90.5	83.3	90.9	95.2	91.7	90.9
Health screenings	76.2	75.0	87.9	81.0	75.0	93.9
Health research	0.0	8.3	54.6	0.0	16.7	75.8
Immunization program	47.6	16.7	42.4	52.4	25.0	60.6
Indigent care clinic	19.1	25.0	15.2	28.6	33.3	48.5
Adult day care	0.0	0.0	9.1	0.0	0.0	27.3
Any substance use services	4.8	8.3	21.2	14.3	8.3	51.5
Substance use inpatient care	0.0	8.3	12.1	4.8	8.3	30.3
Substance use outpatient care	4.8	0.0	21.2	14.3	0.0	48.5
Ambulance services	33.3	8.3	24.2	47.6	33.3	72.7
Certified trauma center ²	66.7	100.0	84.9	66.7	100.0	87.9
Dental services	14.3	0.0	24.2	28.6	0.0	33.3
Hemodialysis	0.0	8.3	57.6	4.8	25.0	93.9
Home health services	19.1	16.7	24.2	28.6	41.7	66.7
Hospice program	9.5	0.0	24.2	61.9	58.3	69.7
Obstetrics care	38.1	91.7	90.9	42.9	91.7	93.9
Any psychiatric services	19.1	16.7	60.6	47.6	41.7	87.9
Psychiatric inpatient care	0.0	8.3	27.3	4.8	8.3	63.6
Psychiatric outpatient care	19.1	16.7	54.6	42.9	41.7	84.9
Palliative care program	14.3	33.3	78.8	28.6	50.0	87.9
Inpatient palliative care unit	0.0	0.0	15.2	4.8	16.7	39.4
Any long-term care	33.3	25.0	18.2	38.1	33.3	54.6
Skilled nursing care	28.6	25.0	12.1	33.3	33.3	48.5
Intermediate nursing care	4.8	8.3	9.1	4.8	8.3	36.4
Other long-term care	14.3	0.0	0.0	14.3	16.7	12.1

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=29 CAHs, 13 other rural hospitals, and 34 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Colorado

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	5.3	3.0	2.1
Charity care costs	0.9	0.7	1.1
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	4.5	2.3	1.0
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	5.0	2.5	4.6

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Colorado. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Florida

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	70.0	100.0	79.8	70.0	100.0	89.1
Enrollment assistance services	70.0	100.0	66.4	70.0	100.0	83.2
Health fair	80.0	100.0	86.6	80.0	100.0	92.4
Community health education	80.0	100.0	88.2	80.0	100.0	94.1
Health screenings	90.0	100.0	87.4	90.0	100.0	92.4
Health research	0.0	0.0	45.4	10.0	0.0	58.8
Immunization program	20.0	0.0	39.5	20.0	0.0	55.5
Indigent care clinic	0.0	0.0	21.9	20.0	0.0	50.4
Adult day care	0.0	0.0	2.5	0.0	0.0	12.6
Any substance use services	0.0	0.0	17.7	10.0	0.0	37.0
Substance use inpatient care	0.0	0.0	10.1	0.0	0.0	22.7
Substance use outpatient care	0.0	0.0	11.8	10.0	0.0	31.9
Ambulance services	10.0	33.3	5.9	40.0	33.3	36.1
Certified trauma center ²	0.0	0.0	20.2	0.0	0.0	34.5
Dental services	0.0	0.0	18.5	10.0	0.0	33.6
Hemodialysis	0.0	33.3	68.1	10.0	33.3	92.4
Home health services	10.0	33.3	23.5	40.0	33.3	62.2
Hospice program	10.0	0.0	16.8	60.0	33.3	65.6
Obstetrics care	0.0	66.7	62.2	10.0	66.7	78.2
Any psychiatric services	30.0	0.0	47.9	30.0	0.0	64.7
Psychiatric inpatient care	0.0	0.0	37.8	0.0	0.0	52.1
Psychiatric outpatient care	30.0	0.0	45.4	30.0	0.0	62.2
Palliative care program	20.0	0.0	54.6	20.0	0.0	71.4
Inpatient palliative care unit	10.0	0.0	16.0	10.0	0.0	28.6
Any long-term care	30.0	0.0	21.9	30.0	0.0	40.3
Skilled nursing care	30.0	0.0	14.3	30.0	0.0	31.1
Intermediate nursing care	10.0	0.0	10.9	10.0	0.0	25.2
Other long-term care	10.0	0.0	5.9	10.0	0.0	15.1

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=13 CAHs, 9 other rural hospitals, and 167 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Florida

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	10.4	11.7	5.5
Charity care costs	4.2	3.6	3.1
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	6.2	8.1	2.5
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	4.5	4.9	3.8

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Florida. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Georgia

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	66.7	76.2	86.1	66.7	81.0	95.4
Enrollment assistance services	66.7	57.1	86.1	66.7	61.9	95.4
Health fair	86.7	95.2	83.7	93.3	95.2	95.4
Community health education	86.7	85.7	88.4	93.3	85.7	97.7
Health screenings	100.0	95.2	97.7	100.0	95.2	97.7
Health research	0.0	9.5	51.2	0.0	9.5	58.1
Immunization program	40.0	23.8	20.9	46.7	23.8	32.6
Indigent care clinic	6.7	4.8	18.6	20.0	4.8	37.2
Adult day care	0.0	4.8	4.7	0.0	4.8	7.0
Any substance use services	0.0	4.8	16.3	0.0	4.8	25.6
Substance use inpatient care	0.0	0.0	9.3	0.0	0.0	16.3
Substance use outpatient care	0.0	4.8	14.0	0.0	4.8	25.6
Ambulance services	6.7	19.1	23.3	46.7	38.1	53.5
Certified trauma center ²	6.7	14.3	20.9	6.7	14.3	27.9
Dental services	6.7	4.8	27.9	20.0	4.8	44.2
Hemodialysis	0.0	42.9	65.1	20.0	57.1	90.7
Home health services	0.0	23.8	20.9	26.7	42.9	44.2
Hospice program	0.0	19.1	27.9	60.0	57.1	62.8
Obstetrics care	0.0	71.4	81.4	0.0	71.4	95.4
Any psychiatric services	6.7	33.3	41.9	26.7	47.6	55.8
Psychiatric inpatient care	0.0	28.6	30.2	0.0	28.6	48.8
Psychiatric outpatient care	6.7	14.3	41.9	26.7	28.6	55.8
Palliative care program	0.0	23.8	58.1	6.7	38.1	67.4
Inpatient palliative care unit	0.0	0.0	18.6	0.0	9.5	20.9
Any long-term care	40.0	47.6	16.3	40.0	52.4	41.9
Skilled nursing care	40.0	33.3	14.0	40.0	38.1	37.2
Intermediate nursing care	0.0	9.5	2.3	0.0	14.3	16.3
Other long-term care	0.0	9.5	2.3	0.0	14.3	7.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=30 CAHs, 40 other rural hospitals, and 66 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Georgia

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	10.1	9.2	8.3
Charity care costs	3.3	2.9	4.1
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	6.9	6.3	4.1
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.1	1.1	0.8

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Georgia. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Hawaii

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	40.0	100.0	75.0	40.0	100.0	87.5
Enrollment assistance services	20.0	100.0	62.5	20.0	100.0	87.5
Health fair	20.0	66.7	87.5	20.0	66.7	87.5
Community health education	40.0	100.0	87.5	40.0	100.0	87.5
Health screenings	60.0	66.7	87.5	60.0	100.0	87.5
Health research	0.0	33.3	62.5	0.0	66.7	75.0
Immunization program	20.0	0.0	37.5	20.0	0.0	37.5
Indigent care clinic	20.0	0.0	12.5	20.0	0.0	12.5
Adult day care	0.0	0.0	0.0	0.0	0.0	12.5
Any substance use services	0.0	0.0	37.5	0.0	0.0	37.5
Substance use inpatient care	0.0	0.0	25.0	0.0	0.0	25.0
Substance use outpatient care	0.0	0.0	12.5	0.0	0.0	12.5
Ambulance services	0.0	0.0	12.5	20.0	0.0	37.5
Certified trauma center ²	0.0	100.0	25.0	0.0	100.0	50.0
Dental services	0.0	0.0	25.0	20.0	0.0	25.0
Hemodialysis	0.0	33.3	50.0	40.0	66.7	100.0
Home health services	0.0	33.3	37.5	20.0	33.3	75.0
Hospice program	20.0	0.0	12.5	40.0	33.3	62.5
Obstetrics care	40.0	100.0	62.5	40.0	100.0	87.5
Any psychiatric services	0.0	66.7	75.0	0.0	66.7	87.5
Psychiatric inpatient care	0.0	33.3	50.0	0.0	33.3	75.0
Psychiatric outpatient care	0.0	33.3	62.5	0.0	33.3	62.5
Palliative care program	20.0	100.0	62.5	20.0	100.0	62.5
Inpatient palliative care unit	0.0	0.0	25.0	0.0	0.0	25.0
Any long-term care	60.0	33.3	62.5	80.0	33.3	75.0
Skilled nursing care	60.0	33.3	37.5	80.0	33.3	50.0
Intermediate nursing care	20.0	0.0	37.5	40.0	0.0	62.5
Other long-term care	20.0	0.0	12.5	20.0	0.0	25.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=9 CAHs, 4 other rural hospitals, and 9 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Hawaii

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	2.6	2.4	1.8
Charity care costs	0.2	0.4	0.3
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.5	2.1	1.5
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.3	9.0	3.9

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Hawaii. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Idaho

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	66.7	100.0	100.0	77.8	100.0	100.0
Enrollment assistance services	44.4	0.0	85.7	55.6	0.0	85.7
Health fair	83.3	100.0	100.0	88.9	100.0	100.0
Community health education	77.8	50.0	100.0	83.3	50.0	100.0
Health screenings	83.3	50.0	100.0	88.9	50.0	100.0
Health research	0.0	0.0	71.4	0.0	0.0	71.4
Immunization program	33.3	50.0	57.1	44.4	50.0	57.1
Indigent care clinic	5.6	50.0	14.3	16.7	50.0	42.9
Adult day care	11.1	0.0	28.6	16.7	0.0	28.6
Any substance use services	11.1	50.0	42.9	16.7	50.0	57.1
Substance use inpatient care	0.0	50.0	28.6	5.6	50.0	28.6
Substance use outpatient care	11.1	50.0	42.9	11.1	50.0	57.1
Ambulance services	33.3	50.0	42.9	50.0	50.0	71.4
Certified trauma center ²	5.6	0.0	71.4	5.6	0.0	85.7
Dental services	16.7	50.0	57.1	38.9	50.0	71.4
Hemodialysis	5.6	50.0	57.1	11.1	100.0	100.0
Home health services	27.8	50.0	28.6	50.0	50.0	57.1
Hospice program	22.2	50.0	42.9	66.7	50.0	71.4
Obstetrics care	66.7	100.0	100.0	72.2	100.0	100.0
Any psychiatric services	33.3	50.0	71.4	50.0	50.0	85.7
Psychiatric inpatient care	0.0	50.0	71.4	5.6	50.0	85.7
Psychiatric outpatient care	33.3	50.0	71.4	44.4	50.0	71.4
Palliative care program	27.8	50.0	57.1	38.9	50.0	85.7
Inpatient palliative care unit	5.6	0.0	42.9	5.6	0.0	57.1
Any long-term care	38.9	0.0	42.9	38.9	0.0	42.9
Skilled nursing care	38.9	0.0	28.6	38.9	0.0	28.6
Intermediate nursing care	5.6	0.0	28.6	11.1	0.0	28.6
Other long-term care	0.0	0.0	14.3	5.6	0.0	14.3

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=27 CAHs, 3 other rural hospitals, and 11 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Idaho

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	5.2	3.5	2.3
Charity care costs	1.1	0.6	1.0
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	4.2	2.8	1.4
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	1.8	0.0	0.9

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Idaho. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Illinois

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	71.1	80.0	94.3	71.1	85.0	96.6
Enrollment assistance services	47.4	75.0	81.8	52.6	75.0	93.2
Health fair	81.6	100.0	95.5	86.8	100.0	97.7
Community health education	86.8	95.0	95.5	89.5	95.0	97.7
Health screenings	86.8	100.0	97.7	86.8	100.0	98.9
Health research	5.3	10.0	55.7	5.3	15.0	65.9
Immunization program	39.5	25.0	53.4	42.1	35.0	62.5
Indigent care clinic	7.9	20.0	26.1	7.9	35.0	52.3
Adult day care	0.0	10.0	11.4	2.6	15.0	17.1
Any substance use services	2.6	20.0	42.1	7.9	30.0	61.4
Substance use inpatient care	0.0	5.0	14.8	5.3	20.0	30.7
Substance use outpatient care	2.6	15.0	37.5	7.9	25.0	58.0
Ambulance services	10.5	15.0	13.6	36.8	35.0	53.4
Certified trauma center ²	7.9	20.0	61.4	7.9	25.0	65.9
Dental services	2.6	10.0	45.5	18.4	20.0	52.3
Hemodialysis	0.0	10.0	50.0	10.5	55.0	93.2
Home health services	18.4	60.0	33.0	50.0	90.0	84.1
Hospice program	7.9	50.0	36.4	73.7	80.0	87.5
Obstetrics care	18.4	85.0	89.8	21.1	85.0	90.9
Any psychiatric services	18.4	50.0	73.9	42.1	65.0	86.4
Psychiatric inpatient care	0.0	35.0	56.8	5.3	45.0	73.9
Psychiatric outpatient care	18.4	50.0	69.3	42.1	65.0	86.4
Palliative care program	2.6	60.0	61.4	15.8	65.0	83.0
Inpatient palliative care unit	0.0	0.0	15.9	0.0	5.0	20.5
Any long-term care	36.8	25.0	25.0	39.5	35.0	40.9
Skilled nursing care	29.0	25.0	22.7	31.6	35.0	38.6
Intermediate nursing care	7.9	5.0	3.4	13.2	10.0	10.2
Other long-term care	10.5	5.0	5.7	18.4	10.0	11.4

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=51 CAHs, 23 other rural hospitals, and 105 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Illinois

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.4	3.2	3.6
Charity care costs	1.2	2.0	1.9
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.3	1.2	1.8
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	5.8	7.6	4.4

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Illinois. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Indiana

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	86.7	93.3	96.1	90.0	93.3	96.1
Enrollment assistance services	80.0	73.3	84.3	86.7	86.7	92.2
Health fair	96.7	93.3	92.2	96.7	100.0	98.0
Community health education	90.0	100.0	92.2	93.3	100.0	96.1
Health screenings	100.0	93.3	92.2	100.0	100.0	96.1
Health research	6.7	20.0	37.3	23.3	26.7	52.9
Immunization program	53.3	40.0	49.0	60.0	40.0	62.8
Indigent care clinic	10.0	26.7	21.6	30.0	33.3	49.0
Adult day care	0.0	0.0	0.0	0.0	0.0	0.0
Any substance use services	10.0	13.3	31.4	26.7	20.0	52.9
Substance use inpatient care	3.3	0.0	9.8	10.0	6.7	27.5
Substance use outpatient care	6.7	13.3	29.4	16.7	20.0	51.0
Ambulance services	23.3	40.0	23.5	56.7	40.0	66.7
Certified trauma center ²	6.7	13.3	25.5	13.3	13.3	37.3
Dental services	13.3	13.3	29.4	56.7	40.0	39.2
Hemodialysis	0.0	13.3	47.1	16.7	40.0	80.4
Home health services	30.0	33.3	39.2	66.7	73.3	88.2
Hospice program	23.3	40.0	29.4	63.3	73.3	78.4
Obstetrics care	50.0	86.7	90.2	60.0	93.3	92.2
Any psychiatric services	23.3	33.3	56.9	56.7	46.7	82.4
Psychiatric inpatient care	10.0	26.7	52.9	16.7	33.3	66.7
Psychiatric outpatient care	16.7	26.7	45.1	53.3	33.3	76.5
Palliative care program	13.3	53.3	45.1	36.7	60.0	70.6
Inpatient palliative care unit	6.7	6.7	15.7	16.7	13.3	25.5
Any long-term care	26.7	13.3	23.5	30.0	26.7	35.3
Skilled nursing care	26.7	6.7	13.7	30.0	20.0	25.5
Intermediate nursing care	13.3	6.7	11.8	16.7	13.3	17.7
Other long-term care	3.3	0.0	2.0	10.0	6.7	7.8

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=35 CAHs, 17 other rural hospitals, and 62 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Indiana

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	6.5	4.3	4.5
Charity care costs	2.9	1.6	2.7
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	3.8	2.7	2.0
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	5.8	2.1	2.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Indiana. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Iowa

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	73.2	85.7	95.7	76.8	92.9	100.0
Enrollment assistance services	61.0	85.7	95.7	67.1	92.9	95.7
Health fair	87.8	85.7	95.7	87.8	85.7	100.0
Community health education	95.1	92.9	91.3	95.1	92.9	95.7
Health screenings	97.6	100.0	100.0	97.6	100.0	100.0
Health research	0.0	7.1	56.5	3.7	7.1	78.3
Immunization program	54.9	50.0	65.2	63.4	57.1	78.3
Indigent care clinic	8.5	7.1	26.1	13.4	28.6	52.2
Adult day care	2.4	0.0	4.4	6.1	7.1	13.0
Any substance use services	11.0	14.3	56.5	18.3	28.6	82.6
Substance use inpatient care	8.5	7.1	17.4	12.2	7.1	43.5
Substance use outpatient care	3.7	14.3	56.5	9.8	28.6	82.6
Ambulance services	48.8	42.9	34.8	68.3	50.0	73.9
Certified trauma center ²	73.2	92.9	91.3	74.4	92.9	95.7
Dental services	2.4	28.6	60.9	30.5	50.0	69.6
Hemodialysis	3.7	42.9	43.5	19.5	71.4	87.0
Home health services	39.0	85.7	52.2	52.4	100.0	100.0
Hospice program	40.2	57.1	39.1	85.4	92.9	87.0
Obstetrics care	54.9	92.9	87.0	59.8	92.9	91.3
Any psychiatric services	32.9	78.6	91.3	52.4	78.6	100.0
Psychiatric inpatient care	8.5	42.9	87.0	18.3	42.9	100.0
Psychiatric outpatient care	26.8	64.3	82.6	46.3	64.3	95.7
Palliative care program	19.5	42.9	65.2	34.2	42.9	78.3
Inpatient palliative care unit	3.7	7.1	13.0	9.8	7.1	21.7
Any long-term care	69.5	50.0	21.7	70.7	50.0	65.2
Skilled nursing care	57.3	42.9	21.7	63.4	42.9	65.2
Intermediate nursing care	37.8	21.4	8.7	40.2	21.4	21.7
Other long-term care	15.9	0.0	0.0	20.7	0.0	30.4

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=82 CAHs, 14 other rural hospitals, and 23 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Iowa

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	2.6	2.6	2.4
Charity care costs	0.5	0.9	1.1
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.1	1.7	1.2
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.0	2.2	0.9

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Iowa. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Kansas

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	38.1	57.1	65.2	42.9	57.1	69.6
Enrollment assistance services	32.1	57.1	43.5	34.5	76.2	60.9
Health fair	60.7	81.0	60.9	69.1	81.0	65.2
Community health education	52.4	85.7	69.6	56.0	85.7	69.6
Health screenings	60.7	85.7	78.3	63.1	85.7	82.6
Health research	0.0	4.8	39.1	2.4	4.8	47.8
Immunization program	31.0	42.9	39.1	40.5	42.9	47.8
Indigent care clinic	4.8	4.8	0.0	8.3	14.3	21.7
Adult day care	10.7	0.0	0.0	16.7	0.0	13.0
Any substance use services	3.6	19.1	8.7	6.0	28.6	30.4
Substance use inpatient care	2.4	14.3	4.4	3.6	19.1	8.7
Substance use outpatient care	1.2	4.8	8.7	3.6	9.5	30.4
Ambulance services	14.3	28.6	13.0	40.5	42.9	34.8
Certified trauma center ²	17.9	23.8	30.4	19.1	23.8	43.5
Dental services	4.8	9.5	26.1	17.9	9.5	34.8
Hemodialysis	1.2	19.1	52.2	6.0	23.8	82.6
Home health services	29.8	42.9	21.7	47.6	47.6	47.8
Hospice program	11.9	33.3	8.7	64.3	76.2	39.1
Obstetrics care	34.5	95.2	73.9	39.3	95.2	78.3
Any psychiatric services	22.6	52.4	65.2	42.9	61.9	82.6
Psychiatric inpatient care	8.3	33.3	30.4	9.5	33.3	52.2
Psychiatric outpatient care	15.5	38.1	52.2	36.9	47.6	69.6
Palliative care program	14.3	28.6	47.8	23.8	28.6	60.9
Inpatient palliative care unit	2.4	14.3	17.4	6.0	14.3	21.7
Any long-term care	81.0	42.9	17.4	83.3	52.4	43.5
Skilled nursing care	64.3	38.1	8.7	65.5	42.9	34.8
Intermediate nursing care	45.2	28.6	8.7	47.6	38.1	26.1
Other long-term care	13.5	19.1	0.0	13.1	28.6	21.7

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=84 CAHs, 22 other rural hospitals, and 25 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Kansas

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.9	4.7	4.0
Charity care costs	0.8	1.3	2.3
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	3.3	3.6	1.8
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.8	2.7	2.3

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Kansas. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Kentucky

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	54.6	81.5	92.3	59.1	81.5	96.2
Enrollment assistance services	31.8	63.0	88.5	50.0	85.2	100.0
Health fair	77.3	96.3	92.3	90.9	100.0	100.0
Community health education	81.8	96.3	96.2	95.5	96.3	100.0
Health screenings	77.3	96.3	96.2	86.4	96.3	100.0
Health research	0.0	11.1	46.2	13.6	22.2	76.9
Immunization program	9.1	18.5	30.8	22.7	37.0	61.5
Indigent care clinic	0.0	11.1	26.9	18.2	25.9	46.2
Adult day care	4.6	7.4	0.0	4.6	7.4	3.9
Any substance use services	0.0	14.8	26.9	18.2	29.6	69.2
Substance use inpatient care	0.0	11.1	7.7	13.6	25.9	42.3
Substance use outpatient care	0.0	7.4	26.9	18.2	22.2	69.2
Ambulance services	13.6	11.1	11.5	36.4	37.0	34.6
Certified trauma center ²	18.2	29.6	23.1	27.3	40.7	42.3
Dental services	0.0	22.2	34.6	18.2	29.6	57.7
Hemodialysis	0.0	29.6	50.0	27.3	63.0	88.5
Home health services	27.3	48.2	19.2	45.5	74.1	57.7
Hospice program	4.6	18.5	7.7	27.3	48.2	69.2
Obstetrics care	4.6	85.2	57.7	27.3	85.2	88.5
Any psychiatric services	22.7	40.7	50.0	54.6	74.1	88.5
Psychiatric inpatient care	4.6	37.0	42.3	27.3	55.6	80.8
Psychiatric outpatient care	18.2	33.3	50.0	54.6	63.0	88.5
Palliative care program	4.6	33.3	50.0	22.7	40.7	73.1
Inpatient palliative care unit	0.0	7.4	11.5	13.6	11.1	30.8
Any long-term care	31.8	33.3	30.8	50.0	40.7	57.7
Skilled nursing care	31.8	33.3	26.9	50.0	40.7	53.9
Intermediate nursing care	4.6	7.4	3.9	4.6	7.4	7.7
Other long-term care	4.6	3.7	0.0	4.6	3.7	0.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=28 CAHs, 39 other rural hospitals, and 32 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Kentucky

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	4.5	2.4	2.5
Charity care costs	1.0	0.7	0.5
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	3.6	1.8	2.0
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	4.1	3.7	2.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Kentucky. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Louisiana

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	75.0	27.3	75.6	75.0	36.4	78.1
Enrollment assistance services	37.5	54.6	75.6	43.8	63.6	87.8
Health fair	87.5	81.8	85.4	87.5	81.8	92.7
Community health education	75.0	81.8	92.7	75.0	81.8	95.1
Health screenings	87.5	45.5	85.4	87.5	45.5	92.7
Health research	12.5	0.0	43.9	18.8	9.1	56.1
Immunization program	43.8	54.6	58.5	43.8	54.6	65.9
Indigent care clinic	12.5	9.1	26.8	12.5	18.2	41.5
Adult day care	0.0	0.0	0.0	0.0	0.0	2.4
Any substance use services	6.3	0.0	19.5	6.3	9.1	26.8
Substance use inpatient care	6.3	0.0	19.5	6.3	9.1	22.0
Substance use outpatient care	6.3	0.0	7.3	6.3	9.1	24.4
Ambulance services	12.5	18.2	9.8	25.0	45.5	53.7
Certified trauma center ²	0.0	0.0	26.8	6.3	0.0	34.2
Dental services	18.8	27.3	22.0	18.8	27.3	39.0
Hemodialysis	12.5	27.3	41.5	25.0	45.5	82.9
Home health services	12.5	18.2	22.0	25.0	36.4	53.7
Hospice program	12.5	0.0	14.6	25.0	0.0	58.5
Obstetrics care	12.5	72.7	75.6	12.5	72.7	80.5
Any psychiatric services	37.5	54.6	70.7	43.8	54.6	73.2
Psychiatric inpatient care	12.5	36.4	56.1	18.8	45.5	61.0
Psychiatric outpatient care	37.5	54.6	56.1	43.8	54.6	63.4
Palliative care program	6.3	0.0	51.2	12.5	9.1	61.0
Inpatient palliative care unit	6.3	0.0	2.4	6.3	18.2	7.3
Any long-term care	37.5	0.0	31.7	43.8	18.2	43.9
Skilled nursing care	37.5	0.0	24.4	43.8	9.1	39.0
Intermediate nursing care	6.3	0.0	7.3	12.5	9.1	22.0
Other long-term care	0.0	0.0	7.3	6.3	0.0	19.5

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=27 CAHs, 26 other rural hospitals, and 55 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Louisiana

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	13.3	10.7	7.9
Charity care costs	4.0	3.4	4.7
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	10.4	7.6	3.7
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.0	2.7	3.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Louisiana. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Maine

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	92.3	83.3	87.5	92.3	83.3	87.5
Enrollment assistance services	76.9	50.0	87.5	76.9	83.3	100.0
Health fair	92.3	66.7	75.0	92.3	83.3	75.0
Community health education	100.0	100.0	100.0	100.0	100.0	100.0
Health screenings	100.0	100.0	100.0	100.0	100.0	100.0
Health research	0.0	33.3	75.0	15.4	33.3	75.0
Immunization program	100.0	66.7	62.5	100.0	66.7	75.0
Indigent care clinic	7.7	16.7	75.0	7.7	16.7	75.0
Adult day care	0.0	0.0	12.5	7.7	16.7	25.0
Any substance use services	23.1	50.0	62.5	23.1	50.0	75.0
Substance use inpatient care	7.7	33.3	25.0	7.7	33.3	37.5
Substance use outpatient care	15.4	50.0	62.5	15.4	50.0	75.0
Ambulance services	30.8	33.3	12.5	46.2	83.3	62.5
Certified trauma center ²	53.9	50.0	37.5	53.9	50.0	37.5
Dental services	15.4	16.7	25.0	38.5	33.3	37.5
Hemodialysis	0.0	16.7	12.5	30.8	33.3	62.5
Home health services	15.4	16.7	0.0	53.9	100.0	75.0
Hospice program	7.7	16.7	0.0	100.0	83.3	50.0
Obstetrics care	84.6	100.0	87.5	84.6	100.0	87.5
Any psychiatric services	30.8	83.3	87.5	84.6	83.3	87.5
Psychiatric inpatient care	7.7	50.0	50.0	7.7	50.0	62.5
Psychiatric outpatient care	23.1	66.7	87.5	84.6	83.3	87.5
Palliative care program	23.1	50.0	87.5	53.9	83.3	87.5
Inpatient palliative care unit	23.1	33.3	0.0	38.5	33.3	0.0
Any long-term care	61.5	66.7	25.0	61.5	83.3	62.5
Skilled nursing care	61.5	50.0	12.5	61.5	66.7	50.0
Intermediate nursing care	30.8	66.7	25.0	30.8	83.3	62.5
Other long-term care	30.8	16.7	12.5	30.8	33.3	37.5

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=16 CAHs, 9 other rural hospitals, and 10 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Maine

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	5.4	4.1	3.9
Charity care costs	2.2	1.8	1.6
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	3.2	2.4	2.4
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.4	2.9	3.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Maine. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Massachusetts

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	66.7	100.0	90.7	66.7	100.0	93.0
Enrollment assistance services	100.0	100.0	97.7	100.0	100.0	100.0
Health fair	100.0	100.0	90.7	100.0	100.0	97.7
Community health education	66.7	50.0	95.4	66.7	50.0	95.4
Health screenings	66.7	100.0	93.0	66.7	100.0	95.4
Health research	0.0	0.0	53.5	33.3	0.0	60.5
Immunization program	66.7	0.0	74.4	66.7	0.0	79.1
Indigent care clinic	0.0	0.0	20.9	0.0	0.0	37.2
Adult day care	0.0	0.0	2.3	0.0	0.0	16.3
Any substance use services	0.0	0.0	41.9	33.3	0.0	51.2
Substance use inpatient care	0.0	0.0	9.3	33.3	0.0	23.3
Substance use outpatient care	0.0	0.0	37.2	0.0	0.0	46.5
Ambulance services	0.0	0.0	9.3	33.3	0.0	46.5
Certified trauma center ²	0.0	0.0	37.2	33.3	0.0	39.5
Dental services	33.3	0.0	20.9	66.7	0.0	32.6
Hemodialysis	33.3	50.0	48.8	66.7	100.0	86.1
Home health services	0.0	0.0	25.6	33.3	0.0	69.8
Hospice program	0.0	0.0	25.6	66.7	50.0	79.1
Obstetrics care	66.7	100.0	81.4	66.7	100.0	86.1
Any psychiatric services	0.0	100.0	81.4	33.3	100.0	93.0
Psychiatric inpatient care	0.0	50.0	69.8	33.3	50.0	79.1
Psychiatric outpatient care	0.0	100.0	79.1	33.3	100.0	93.0
Palliative care program	33.3	50.0	58.1	66.7	100.0	72.1
Inpatient palliative care unit	0.0	0.0	14.0	33.3	0.0	20.9
Any long-term care	0.0	0.0	7.0	0.0	0.0	27.9
Skilled nursing care	0.0	0.0	7.0	0.0	0.0	27.9
Intermediate nursing care	0.0	0.0	2.3	0.0	0.0	16.3
Other long-term care	0.0	0.0	4.7	0.0	0.0	18.6

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=3 CAHs, 2 other rural hospitals, and 56 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Massachusetts

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.5	3.7	2.4
Charity care costs	1.7	1.8	1.4
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	1.7	1.9	1.0
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.1	4.9	2.5

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Massachusetts. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Michigan

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	75.0	95.8	93.7	82.1	95.8	93.7
Enrollment assistance services	64.3	83.3	92.1	75.0	87.5	93.7
Health fair	89.3	79.2	92.1	100.0	83.3	92.1
Community health education	92.9	100.0	90.5	100.0	100.0	92.1
Health screenings	96.4	100.0	93.7	100.0	100.0	95.2
Health research	0.0	20.8	66.7	17.9	29.2	74.6
Immunization program	60.7	54.2	77.8	78.6	70.8	84.1
Indigent care clinic	21.4	12.5	46.0	39.3	45.8	69.8
Adult day care	3.6	0.0	1.6	10.7	12.5	19.1
Any substance use services	3.6	8.3	38.1	28.6	16.7	57.1
Substance use inpatient care	0.0	8.3	17.5	14.3	12.5	39.7
Substance use outpatient care	3.6	8.3	33.3	28.6	16.7	54.0
Ambulance services	17.9	8.3	14.3	60.7	25.0	79.4
Certified trauma center ²	10.7	29.2	55.6	25.0	37.5	66.7
Dental services	0.0	8.3	41.3	21.4	20.8	52.4
Hemodialysis	14.3	20.8	49.2	39.3	62.5	82.5
Home health services	28.6	54.2	38.1	67.9	95.8	90.5
Hospice program	21.4	33.3	42.9	75.0	83.3	88.9
Obstetrics care	17.9	91.7	74.6	39.3	95.8	81.0
Any psychiatric services	17.9	50.0	73.0	42.9	58.3	81.0
Psychiatric inpatient care	7.1	37.5	52.4	17.9	45.8	71.4
Psychiatric outpatient care	17.9	50.0	69.8	42.9	58.3	79.4
Palliative care program	21.4	16.7	76.2	42.9	41.7	82.5
Inpatient palliative care unit	7.1	0.0	23.8	17.9	16.7	39.7
Any long-term care	35.7	25.0	22.2	42.9	41.7	47.6
Skilled nursing care	28.6	16.7	22.2	35.7	33.3	44.4
Intermediate nursing care	0.0	4.2	4.8	7.1	16.7	17.5
Other long-term care	10.7	8.3	1.6	14.3	12.5	20.6

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=34 CAHs, 27 other rural hospitals, and 69 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Michigan

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.6	2.4	2.6
Charity care costs	1.5	0.6	0.9
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.2	1.9	1.8
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	5.5	3.2	3.4

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Michigan. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Minnesota

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	67.9	76.9	93.8	73.2	84.6	96.9
Enrollment assistance services	42.9	61.5	71.9	50.0	69.2	90.6
Health fair	66.1	84.6	81.3	71.4	92.3	90.6
Community health education	87.5	76.9	96.9	87.5	92.3	100.0
Health screenings	87.5	84.6	90.6	91.1	84.6	100.0
Health research	0.0	23.1	43.8	10.7	30.8	71.9
Immunization program	55.4	69.2	65.6	55.4	76.9	71.9
Indigent care clinic	0.0	0.0	18.8	8.9	15.4	37.5
Adult day care	14.3	0.0	6.3	16.1	0.0	15.6
Any substance use services	8.9	15.4	34.4	16.1	30.8	56.3
Substance use inpatient care	5.4	7.7	21.9	5.4	7.7	37.5
Substance use outpatient care	8.9	15.4	34.4	16.1	30.8	50.0
Ambulance services	44.6	30.8	12.5	73.2	61.5	75.0
Certified trauma center ²	60.7	92.3	90.6	62.5	92.3	93.8
Dental services	8.9	7.7	28.1	37.5	30.8	37.5
Hemodialysis	1.8	30.8	43.8	19.6	46.2	78.1
Home health services	51.8	38.5	21.9	71.4	61.5	81.3
Hospice program	32.1	23.1	53.1	82.1	76.9	90.6
Obstetrics care	58.9	100.0	93.8	69.6	100.0	100.0
Any psychiatric services	30.4	69.2	78.1	50.0	76.9	90.6
Psychiatric inpatient care	8.9	46.2	59.4	14.3	53.9	71.9
Psychiatric outpatient care	28.6	69.2	75.0	50.0	76.9	87.5
Palliative care program	28.6	23.1	65.6	44.6	53.9	96.9
Inpatient palliative care unit	1.8	0.0	28.1	7.1	15.4	37.5
Any long-term care	62.5	38.5	21.9	73.2	46.2	37.5
Skilled nursing care	58.9	38.5	15.6	69.6	46.2	28.1
Intermediate nursing care	1.8	0.0	6.3	12.5	7.7	21.9
Other long-term care	5.4	0.0	0.0	14.3	15.4	12.5

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=79 CAHs, 18 other rural hospitals, and 34 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Minnesota

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	2.0	2.3	1.6
Charity care costs	0.5	0.7	0.5
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	1.5	1.8	1.1
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.1	2.9	2.2

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Minnesota. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Mississippi

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	43.8	73.2	89.5	46.9	73.2	94.7
Enrollment assistance services	21.9	24.4	36.8	28.1	36.6	52.6
Health fair	53.1	65.9	68.4	65.6	75.6	84.2
Community health education	46.9	61.0	57.9	62.5	70.7	73.7
Health screenings	34.4	68.3	52.6	40.6	73.2	68.4
Health research	3.1	2.4	21.1	6.3	4.9	26.3
Immunization program	37.5	48.8	36.8	43.8	51.2	42.1
Indigent care clinic	18.8	9.8	10.5	21.9	19.5	26.3
Adult day care	0.0	4.9	0.0	0.0	4.9	5.3
Any substance use services	0.0	17.1	26.3	0.0	17.1	31.6
Substance use inpatient care	0.0	17.1	26.3	0.0	17.1	31.6
Substance use outpatient care	0.0	7.3	10.5	0.0	9.8	10.5
Ambulance services	9.4	34.2	5.3	34.4	65.9	36.8
Certified trauma center ²	90.6	78.1	84.2	90.6	78.1	89.5
Dental services	12.5	34.2	42.1	18.8	39.0	47.4
Hemodialysis	0.0	14.6	42.1	0.0	41.5	84.2
Home health services	6.3	17.1	10.5	21.9	34.2	31.6
Hospice program	9.4	12.2	15.8	28.1	34.2	57.9
Obstetrics care	0.0	63.4	84.2	3.1	63.4	84.2
Any psychiatric services	28.1	34.2	63.2	31.3	36.6	79.0
Psychiatric inpatient care	28.1	31.7	63.2	31.3	34.2	79.0
Psychiatric outpatient care	0.0	19.5	42.1	0.0	19.5	42.1
Palliative care program	6.3	19.5	26.3	15.6	24.4	36.8
Inpatient palliative care unit	3.1	4.9	5.3	12.5	9.8	10.5
Any long-term care	40.6	31.7	5.3	40.6	34.2	15.8
Skilled nursing care	34.4	26.8	5.3	34.4	26.8	10.5
Intermediate nursing care	0.0	0.0	0.0	0.0	0.0	0.0
Other long-term care	25.0	17.1	0.0	25.0	22.0	10.5

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture's 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either "other rural" (RUCCs 4 through 9) or "urban" (RUCCs 1 through 3).

²N=32 CAHs, 42 other rural hospitals, and 22 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Mississippi

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	7.7	5.9	5.8
Charity care costs	1.9	1.5	1.9
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	6.3	4.6	4.5
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.9	1.5	3.3

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Mississippi. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Missouri

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	71.4	62.1	90.0	71.4	65.5	94.0
Enrollment assistance services	54.3	51.7	82.0	57.1	51.7	88.0
Health fair	85.7	93.1	94.0	85.7	93.1	94.0
Community health education	88.6	89.7	96.0	88.6	89.7	96.0
Health screenings	94.3	100.0	98.0	97.1	100.0	98.0
Health research	0.0	0.0	54.0	11.4	3.5	76.0
Immunization program	57.1	58.6	50.0	62.9	58.6	66.0
Indigent care clinic	11.4	6.9	30.0	20.0	13.8	56.0
Adult day care	2.9	3.5	0.0	2.9	3.5	2.0
Any substance use services	2.9	13.8	38.0	17.1	17.2	66.0
Substance use inpatient care	2.9	6.9	32.0	8.6	10.3	48.0
Substance use outpatient care	0.0	10.3	28.0	14.3	13.8	60.0
Ambulance services	20.0	20.7	22.0	42.9	24.1	44.0
Certified trauma center ²	5.7	10.3	48.0	17.1	13.8	70.0
Dental services	14.3	37.9	36.0	22.9	44.8	66.0
Hemodialysis	2.9	37.9	64.0	22.9	44.8	86.0
Home health services	37.1	58.6	34.0	62.9	69.0	76.0
Hospice program	11.4	24.1	28.0	45.7	51.7	76.0
Obstetrics care	25.7	75.9	74.0	34.3	75.9	86.0
Any psychiatric services	45.7	58.6	70.0	60.0	58.6	86.0
Psychiatric inpatient care	17.1	48.3	54.0	37.1	48.3	80.0
Psychiatric outpatient care	42.9	44.8	68.0	57.1	48.3	84.0
Palliative care program	20.0	31.0	70.0	37.1	34.5	82.0
Inpatient palliative care unit	5.7	10.3	12.0	8.6	13.8	22.0
Any long-term care	48.6	34.5	24.0	54.3	37.9	68.0
Skilled nursing care	45.7	34.5	22.0	51.4	37.9	64.0
Intermediate nursing care	22.9	6.9	14.0	28.6	10.3	44.0
Other long-term care	14.3	3.5	10.0	22.9	6.9	36.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=35 CAHs, 29 other rural hospitals, and 52 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Missouri

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	7.1	6.3	6.0
Charity care costs	1.7	1.6	3.2
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	5.4	4.7	2.8
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	4.0	3.2	1.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Missouri. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Montana

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	57.9	83.3	100.0	68.4	100.0	100.0
Enrollment assistance services	55.3	83.3	80.0	60.5	100.0	80.0
Health fair	94.7	66.7	100.0	97.4	83.3	100.0
Community health education	79.0	50.0	100.0	84.2	83.3	100.0
Health screenings	92.1	83.3	100.0	94.7	100.0	100.0
Health research	5.3	16.7	60.0	5.3	33.3	80.0
Immunization program	52.6	50.0	80.0	68.4	83.3	100.0
Indigent care clinic	15.8	16.7	20.0	18.4	50.0	60.0
Adult day care	31.6	0.0	20.0	34.2	16.7	40.0
Any substance use services	0.0	33.3	40.0	5.3	66.7	40.0
Substance use inpatient care	0.0	33.3	20.0	5.3	50.0	20.0
Substance use outpatient care	0.0	33.3	40.0	2.6	66.7	40.0
Ambulance services	31.6	33.3	20.0	52.6	50.0	60.0
Certified trauma center ²	60.5	33.3	100.0	60.5	50.0	100.0
Dental services	0.0	33.3	20.0	26.3	66.7	40.0
Hemodialysis	0.0	33.3	40.0	0.0	100.0	60.0
Home health services	31.6	33.3	40.0	42.1	83.3	80.0
Hospice program	42.1	66.7	40.0	52.6	100.0	100.0
Obstetrics care	47.4	66.7	80.0	47.4	83.3	80.0
Any psychiatric services	31.6	66.7	80.0	52.6	100.0	80.0
Psychiatric inpatient care	2.6	50.0	60.0	5.3	66.7	60.0
Psychiatric outpatient care	31.6	66.7	80.0	52.6	100.0	80.0
Palliative care program	29.0	66.7	100.0	31.6	66.7	100.0
Inpatient palliative care unit	5.3	16.7	40.0	5.3	16.7	40.0
Any long-term care	79.0	33.3	40.0	84.2	66.7	40.0
Skilled nursing care	71.1	16.7	40.0	76.3	50.0	40.0
Intermediate nursing care	23.7	0.0	0.0	29.0	16.7	20.0
Other long-term care	7.9	16.7	20.0	10.5	33.3	20.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=48 CAHs, 8 other rural hospitals, and 5 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Montana

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	5.7	4.8	3.9
Charity care costs	2.0	2.7	2.4
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	3.8	2.1	1.7
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.8	1.6	1.5

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Montana. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Nebraska

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	67.7	100.0	100.0	77.4	100.0	100.0
Enrollment assistance services	38.7	60.0	90.0	41.9	80.0	100.0
Health fair	71.0	100.0	70.0	77.4	100.0	80.0
Community health education	74.2	100.0	100.0	83.9	100.0	100.0
Health screenings	80.7	100.0	100.0	87.1	100.0	100.0
Health research	0.0	40.0	70.0	3.2	60.0	90.0
Immunization program	45.2	40.0	70.0	61.3	40.0	80.0
Indigent care clinic	9.7	0.0	10.0	12.9	0.0	30.0
Adult day care	3.2	0.0	0.0	9.7	0.0	30.0
Any substance use services	12.9	0.0	40.0	16.1	0.0	90.0
Substance use inpatient care	9.7	0.0	30.0	9.7	0.0	70.0
Substance use outpatient care	3.2	0.0	40.0	6.5	0.0	90.0
Ambulance services	19.4	20.0	0.0	38.7	40.0	50.0
Certified trauma center ²	58.1	80.0	60.0	61.3	80.0	70.0
Dental services	0.0	20.0	30.0	35.5	20.0	70.0
Hemodialysis	9.7	60.0	60.0	16.1	100.0	100.0
Home health services	51.6	80.0	50.0	71.0	80.0	90.0
Hospice program	22.6	80.0	70.0	71.0	80.0	90.0
Obstetrics care	48.4	100.0	90.0	48.4	100.0	100.0
Any psychiatric services	22.6	80.0	80.0	58.1	80.0	100.0
Psychiatric inpatient care	12.9	60.0	50.0	22.6	60.0	80.0
Psychiatric outpatient care	12.9	80.0	70.0	48.4	80.0	100.0
Palliative care program	22.6	80.0	90.0	35.5	100.0	100.0
Inpatient palliative care unit	3.2	20.0	50.0	3.2	20.0	50.0
Any long-term care	71.0	80.0	30.0	74.2	80.0	60.0
Skilled nursing care	71.0	80.0	30.0	74.2	80.0	60.0
Intermediate nursing care	29.0	20.0	0.0	32.3	20.0	40.0
Other long-term care	16.1	0.0	10.0	19.4	0.0	40.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=64 CAHs, 9 other rural hospitals, and 13 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Nebraska

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.4	3.4	5.0
Charity care costs	0.9	1.4	2.7
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.6	2.1	2.3
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	1.8	2.3	3.1

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Nebraska. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Nevada

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	75.0	66.7	100.0	75.0	66.7	100.0
Enrollment assistance services	50.0	100.0	77.8	75.0	100.0	100.0
Health fair	100.0	100.0	66.7	100.0	100.0	77.8
Community health education	75.0	100.0	88.9	75.0	100.0	100.0
Health screenings	100.0	100.0	77.8	100.0	100.0	88.9
Health research	0.0	0.0	33.3	0.0	0.0	44.4
Immunization program	75.0	66.7	55.6	75.0	66.7	88.9
Indigent care clinic	25.0	0.0	22.2	25.0	0.0	33.3
Adult day care	0.0	0.0	0.0	0.0	0.0	11.1
Any substance use services	0.0	0.0	33.3	0.0	0.0	44.4
Substance use inpatient care	0.0	0.0	11.1	0.0	0.0	22.2
Substance use outpatient care	0.0	0.0	33.3	0.0	0.0	44.4
Ambulance services	0.0	33.3	11.1	25.0	33.3	33.3
Certified trauma center ²	0.0	0.0	55.6	0.0	0.0	66.7
Dental services	0.0	0.0	33.3	0.0	0.0	33.3
Hemodialysis	0.0	66.7	22.2	50.0	66.7	100.0
Home health services	0.0	0.0	55.6	25.0	0.0	66.7
Hospice program	0.0	0.0	44.4	25.0	0.0	55.6
Obstetrics care	50.0	66.7	55.6	50.0	66.7	100.0
Any psychiatric services	50.0	33.3	66.7	50.0	33.3	88.9
Psychiatric inpatient care	0.0	0.0	22.2	0.0	0.0	33.3
Psychiatric outpatient care	50.0	33.3	66.7	50.0	33.3	77.8
Palliative care program	0.0	0.0	77.8	0.0	0.0	77.8
Inpatient palliative care unit	0.0	0.0	22.2	0.0	0.0	44.4
Any long-term care	0.0	0.0	0.0	0.0	0.0	22.2
Skilled nursing care	0.0	0.0	0.0	0.0	0.0	22.2
Intermediate nursing care	0.0	0.0	0.0	0.0	0.0	22.2
Other long-term care	0.0	0.0	0.0	0.0	0.0	0.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=11 CAHs, 3 other rural hospitals, and 21 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Nevada

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	8.1	6.3	2.9
Charity care costs	1.0	1.5	0.8
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	7.4	4.8	2.2
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	8.5	7.5	5.9

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Nevada. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: New Hampshire

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	83.3	100.0	100.0	83.3	100.0	100.0
Enrollment assistance services	83.3	100.0	100.0	83.3	100.0	100.0
Health fair	91.7	100.0	100.0	91.7	100.0	100.0
Community health education	100.0	100.0	100.0	100.0	100.0	100.0
Health screenings	100.0	100.0	100.0	100.0	100.0	100.0
Health research	8.3	100.0	50.0	16.7	100.0	66.7
Immunization program	50.0	100.0	66.7	50.0	100.0	100.0
Indigent care clinic	25.0	100.0	16.7	33.3	100.0	66.7
Adult day care	8.3	0.0	0.0	8.3	0.0	0.0
Any substance use services	0.0	33.3	16.7	8.3	100.0	16.7
Substance use inpatient care	0.0	0.0	16.7	0.0	33.3	16.7
Substance use outpatient care	0.0	33.3	0.0	8.3	100.0	0.0
Ambulance services	8.3	33.3	16.7	25.0	66.7	50.0
Certified trauma center ²	50.0	100.0	66.7	50.0	100.0	66.7
Dental services	25.0	100.0	50.0	58.3	100.0	66.7
Hemodialysis	0.0	66.7	16.7	8.3	100.0	100.0
Home health services	16.7	0.0	33.3	75.0	66.7	100.0
Hospice program	25.0	33.3	50.0	83.3	100.0	100.0
Obstetrics care	58.3	100.0	100.0	58.3	100.0	100.0
Any psychiatric services	75.0	100.0	83.3	91.7	100.0	100.0
Psychiatric inpatient care	8.3	100.0	50.0	8.3	100.0	50.0
Psychiatric outpatient care	75.0	100.0	83.3	91.7	100.0	100.0
Palliative care program	66.7	100.0	83.3	66.7	100.0	83.3
Inpatient palliative care unit	16.7	66.7	50.0	16.7	66.7	50.0
Any long-term care	66.7	0.0	0.0	66.7	33.3	0.0
Skilled nursing care	66.7	0.0	0.0	66.7	33.3	0.0
Intermediate nursing care	58.3	0.0	0.0	58.3	33.3	0.0
Other long-term care	0.0	0.0	0.0	0.0	33.3	0.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=13 CAHs, 4 other rural hospitals, and 9 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: New Hampshire

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	6.6	3.5	3.6
Charity care costs	2.8	2.0	1.2
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	3.8	1.5	2.4
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.0	5.0	2.6

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in New Hampshire. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: New Mexico

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	62.5	72.7	80.0	62.5	72.7	80.0
Enrollment assistance services	50.0	90.9	60.0	50.0	90.9	70.0
Health fair	87.5	72.7	80.0	100.0	72.7	80.0
Community health education	50.0	81.8	60.0	62.5	81.8	70.0
Health screenings	87.5	90.9	70.0	87.5	90.9	70.0
Health research	0.0	18.2	10.0	0.0	18.2	20.0
Immunization program	62.5	54.6	50.0	75.0	54.6	60.0
Indigent care clinic	25.0	9.1	10.0	25.0	18.2	10.0
Adult day care	0.0	0.0	0.0	12.5	0.0	10.0
Any substance use services	0.0	9.1	10.0	0.0	9.1	40.0
Substance use inpatient care	0.0	0.0	10.0	0.0	0.0	40.0
Substance use outpatient care	0.0	9.1	10.0	0.0	9.1	30.0
Ambulance services	25.0	18.2	30.0	37.5	36.4	40.0
Certified trauma center ²	12.5	27.3	50.0	12.5	36.4	50.0
Dental services	25.0	18.2	50.0	37.5	18.2	60.0
Hemodialysis	0.0	9.1	50.0	0.0	36.4	60.0
Home health services	37.5	36.4	20.0	50.0	54.6	30.0
Hospice program	25.0	27.3	20.0	37.5	54.6	50.0
Obstetrics care	50.0	81.8	70.0	50.0	81.8	80.0
Any psychiatric services	50.0	36.4	60.0	62.5	54.6	90.0
Psychiatric inpatient care	0.0	27.3	60.0	0.0	27.3	90.0
Psychiatric outpatient care	50.0	36.4	40.0	62.5	54.6	70.0
Palliative care program	0.0	27.3	40.0	0.0	27.3	40.0
Inpatient palliative care unit	12.5	9.1	30.0	12.5	9.1	50.0
Any long-term care	25.0	9.1	10.0	25.0	9.1	30.0
Skilled nursing care	25.0	9.1	0.0	25.0	9.1	20.0
Intermediate nursing care	12.5	0.0	10.0	12.5	0.0	20.0
Other long-term care	12.5	0.0	0.0	12.5	0.0	10.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=9 CAHs, 20 other rural hospitals, and 14 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: New Mexico

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	6.3	3.2	2.8
Charity care costs	1.3	0.7	1.3
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	5.1	2.5	1.5
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.4	4.6	1.6

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in New Mexico. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: New York

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	75.0	94.4	91.7	75.0	94.4	93.6
Enrollment assistance services	50.0	72.2	84.4	58.3	83.3	88.1
Health fair	100.0	94.4	94.5	100.0	100.0	97.3
Community health education	91.7	100.0	95.4	91.7	100.0	97.3
Health screenings	91.7	100.0	95.4	91.7	100.0	97.3
Health research	0.0	16.7	54.1	0.0	27.8	60.6
Immunization program	41.7	44.4	72.5	66.7	55.6	75.2
Indigent care clinic	16.7	5.6	56.0	16.7	16.7	60.6
Adult day care	25.0	22.2	12.8	25.0	27.8	38.5
Any substance use services	16.7	16.7	50.5	25.0	38.9	69.7
Substance use inpatient care	8.3	16.7	32.1	8.3	27.8	49.5
Substance use outpatient care	16.7	11.1	43.1	25.0	27.8	64.2
Ambulance services	8.3	5.6	22.0	25.0	38.9	56.0
Certified trauma center ²	0.0	27.8	46.8	8.3	27.8	53.2
Dental services	16.7	38.9	55.1	33.3	61.1	70.6
Hemodialysis	0.0	27.8	78.0	16.7	55.6	94.5
Home health services	8.3	11.1	33.0	33.3	50.0	70.6
Hospice program	16.7	0.0	37.6	50.0	77.8	74.3
Obstetrics care	16.7	94.4	78.9	16.7	94.4	88.1
Any psychiatric services	33.3	61.1	77.1	41.7	66.7	85.3
Psychiatric inpatient care	8.3	55.6	65.1	8.3	55.6	77.1
Psychiatric outpatient care	33.3	55.6	75.2	41.7	61.1	82.6
Palliative care program	25.0	44.4	83.5	41.7	66.7	88.1
Inpatient palliative care unit	0.0	16.7	36.7	8.3	33.3	55.1
Any long-term care	33.3	50.0	31.2	33.3	50.0	62.4
Skilled nursing care	25.0	50.0	28.4	25.0	50.0	57.8
Intermediate nursing care	0.0	0.0	5.5	0.0	5.6	15.6
Other long-term care	16.7	0.0	6.4	16.7	5.6	28.4

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture's 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either "other rural" (RUCCs 4 through 9) or "urban" (RUCCs 1 through 3).

²N=16 CAHs, 28 other rural hospitals, and 131 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: New York

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	5.3	3.0	3.4
Charity care costs	2.0	1.0	1.9
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	3.3	2.0	1.5
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	7.8	4.9	3.5

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in New York. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: North Carolina

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	81.3	86.2	86.3	93.8	93.1	94.1
Enrollment assistance services	25.0	55.2	80.4	50.0	75.9	100.0
Health fair	68.8	89.7	94.1	87.5	96.6	100.0
Community health education	75.0	96.6	92.2	93.8	96.6	98.0
Health screenings	93.8	96.6	94.1	100.0	96.6	100.0
Health research	0.0	3.5	47.1	12.5	13.8	66.7
Immunization program	18.8	37.9	43.1	37.5	41.4	72.6
Indigent care clinic	0.0	13.8	27.5	25.0	34.5	70.6
Adult day care	6.3	3.5	0.0	12.5	3.5	9.8
Any substance use services	0.0	24.1	29.4	12.5	24.1	52.9
Substance use inpatient care	0.0	10.3	17.7	12.5	10.3	33.3
Substance use outpatient care	0.0	17.2	27.5	12.5	17.2	49.0
Ambulance services	0.0	17.2	31.4	25.0	31.0	64.7
Certified trauma center ²	6.3	13.8	27.5	12.5	20.7	45.1
Dental services	0.0	37.9	35.3	18.8	48.3	56.9
Hemodialysis	0.0	24.1	49.0	18.8	44.8	78.4
Home health services	18.8	34.5	29.4	56.3	55.2	80.4
Hospice program	12.5	20.7	19.6	75.0	65.5	76.5
Obstetrics care	37.5	86.2	86.3	43.8	89.7	92.2
Any psychiatric services	18.8	55.2	68.6	43.8	65.5	88.2
Psychiatric inpatient care	12.5	37.9	58.8	25.0	44.8	72.6
Psychiatric outpatient care	18.8	51.7	62.8	43.8	65.5	84.3
Palliative care program	12.5	17.2	58.8	43.8	44.8	76.5
Inpatient palliative care unit	6.3	3.5	15.7	12.5	20.7	27.5
Any long-term care	37.5	27.6	33.3	43.8	41.4	60.8
Skilled nursing care	31.3	27.6	23.5	43.8	41.4	58.8
Intermediate nursing care	12.5	17.2	15.7	12.5	24.1	33.3
Other long-term care	0.0	3.5	2.0	6.3	6.9	9.8

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=20 CAHs, 34 other rural hospitals, and 57 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: North Carolina

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	8.8	9.0	6.8
Charity care costs	2.4	3.7	3.4
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	6.8	5.3	3.4
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	4.9	2.4	1.4

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in North Carolina. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: North Dakota

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	55.0	50.0	100.0	65.0	50.0	100.0
Enrollment assistance services	45.0	100.0	80.0	55.0	100.0	80.0
Health fair	60.0	100.0	100.0	85.0	100.0	100.0
Community health education	80.0	100.0	100.0	85.0	100.0	100.0
Health screenings	80.0	100.0	100.0	90.0	100.0	100.0
Health research	0.0	50.0	100.0	15.0	50.0	100.0
Immunization program	40.0	100.0	80.0	55.0	100.0	80.0
Indigent care clinic	10.0	0.0	0.0	20.0	0.0	60.0
Adult day care	5.0	0.0	0.0	15.0	0.0	0.0
Any substance use services	15.0	50.0	20.0	30.0	100.0	80.0
Substance use inpatient care	15.0	50.0	0.0	15.0	100.0	0.0
Substance use outpatient care	0.0	50.0	20.0	15.0	100.0	80.0
Ambulance services	25.0	50.0	60.0	60.0	100.0	80.0
Certified trauma center ²	45.0	50.0	100.0	50.0	50.0	100.0
Dental services	0.0	50.0	20.0	55.0	50.0	40.0
Hemodialysis	5.0	50.0	100.0	20.0	100.0	100.0
Home health services	10.0	100.0	80.0	55.0	100.0	100.0
Hospice program	10.0	50.0	80.0	50.0	50.0	100.0
Obstetrics care	20.0	100.0	100.0	30.0	100.0	100.0
Any psychiatric services	30.0	100.0	80.0	50.0	100.0	80.0
Psychiatric inpatient care	15.0	50.0	80.0	25.0	50.0	80.0
Psychiatric outpatient care	20.0	100.0	80.0	40.0	100.0	80.0
Palliative care program	15.0	0.0	60.0	30.0	50.0	80.0
Inpatient palliative care unit	5.0	50.0	60.0	15.0	50.0	80.0
Any long-term care	65.0	50.0	40.0	70.0	100.0	60.0
Skilled nursing care	60.0	50.0	40.0	60.0	100.0	60.0
Intermediate nursing care	25.0	0.0	0.0	40.0	0.0	40.0
Other long-term care	20.0	0.0	0.0	35.0	50.0	40.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=36 CAHs, 2 other rural hospitals, and 7 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: North Dakota

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.9	1.9	2.2
Charity care costs	0.6	0.2	0.6
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	3.4	1.7	1.6
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	1.5	0.1	0.1

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in North Dakota. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Ohio

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	70.8	86.4	92.2	79.2	86.4	98.7
Enrollment assistance services	45.8	72.7	89.6	45.8	72.7	97.4
Health fair	87.5	95.5	92.2	95.8	100.0	100.0
Community health education	91.7	100.0	96.1	95.8	100.0	100.0
Health screenings	95.8	100.0	96.1	100.0	100.0	100.0
Health research	0.0	13.6	55.8	4.2	13.6	81.8
Immunization program	29.2	40.9	61.0	37.5	40.9	84.4
Indigent care clinic	8.3	18.2	45.5	25.0	27.3	76.6
Adult day care	0.0	0.0	2.6	4.2	4.6	11.7
Any substance use services	12.5	13.6	28.6	16.7	18.2	59.7
Substance use inpatient care	0.0	0.0	11.7	0.0	4.6	40.3
Substance use outpatient care	12.5	13.6	28.6	16.7	13.6	59.7
Ambulance services	20.8	22.7	18.2	37.5	45.5	79.2
Certified trauma center ²	4.2	22.7	48.1	8.3	22.7	77.9
Dental services	4.2	13.6	48.1	25.0	13.6	72.7
Hemodialysis	4.2	18.2	63.6	12.5	63.6	94.8
Home health services	16.7	54.6	31.2	54.2	77.3	87.0
Hospice program	8.3	31.8	37.7	54.2	86.4	90.9
Obstetrics care	33.3	95.5	77.9	37.5	100.0	94.8
Any psychiatric services	29.2	40.9	70.1	37.5	50.0	93.5
Psychiatric inpatient care	16.7	31.8	57.1	20.8	31.8	90.9
Psychiatric outpatient care	20.8	31.8	62.3	29.2	45.5	88.3
Palliative care program	12.5	50.0	61.0	29.2	77.3	92.2
Inpatient palliative care unit	4.2	31.8	24.7	8.3	31.8	52.0
Any long-term care	25.0	18.2	24.7	33.3	22.7	67.5
Skilled nursing care	20.8	18.2	18.2	29.2	22.7	58.4
Intermediate nursing care	4.2	0.0	6.5	8.3	0.0	29.9
Other long-term care	4.2	0.0	7.8	4.2	0.0	32.5

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=33 CAHs, 32 other rural hospitals, and 91 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Ohio

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	4.3	3.6	3.0
Charity care costs	1.8	1.3	1.6
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.7	2.3	1.4
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	6.2	4.7	3.8

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Ohio. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Oklahoma

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	33.3	68.4	58.8	37.0	68.4	58.8
Enrollment assistance services	29.6	34.2	64.7	40.7	42.1	67.7
Health fair	66.7	71.1	76.5	74.1	71.1	76.5
Community health education	63.0	86.8	76.5	66.7	89.5	82.4
Health screenings	51.9	92.1	73.5	51.9	92.1	79.4
Health research	0.0	10.5	29.4	3.7	13.2	35.3
Immunization program	25.9	50.0	41.2	33.3	52.6	55.9
Indigent care clinic	0.0	7.9	11.8	11.1	15.8	38.2
Adult day care	0.0	0.0	0.0	0.0	2.6	0.0
Any substance use services	3.7	5.3	2.9	3.7	5.3	14.7
Substance use inpatient care	0.0	0.0	2.9	0.0	0.0	8.8
Substance use outpatient care	3.7	5.3	2.9	3.7	5.3	14.7
Ambulance services	7.4	15.8	17.7	11.1	21.1	26.5
Certified trauma center ²	40.7	52.6	67.7	44.4	52.6	70.6
Dental services	0.0	21.1	23.5	14.8	29.0	35.3
Hemodialysis	0.0	18.4	44.1	7.4	29.0	70.6
Home health services	3.7	52.6	23.5	18.5	63.2	52.9
Hospice program	7.4	18.4	23.5	29.6	21.1	52.9
Obstetrics care	3.7	65.8	70.6	7.4	65.8	73.5
Any psychiatric services	11.1	50.0	50.0	25.9	55.3	61.8
Psychiatric inpatient care	0.0	34.2	41.2	3.7	34.2	50.0
Psychiatric outpatient care	11.1	36.8	35.3	25.9	42.1	50.0
Palliative care program	7.4	10.5	41.2	18.5	10.5	52.9
Inpatient palliative care unit	0.0	5.3	20.6	11.1	5.3	29.4
Any long-term care	48.2	26.3	17.7	51.9	26.3	26.5
Skilled nursing care	48.2	18.4	11.8	51.9	18.4	20.6
Intermediate nursing care	0.0	7.9	5.9	3.7	7.9	17.7
Other long-term care	3.7	2.6	2.9	7.4	2.6	5.9

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=34 CAHs, 44 other rural hospitals, and 40 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Oklahoma

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	9.0	6.9	4.7
Charity care costs	2.4	1.2	1.9
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	7.1	5.8	3.1
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	6.1	4.8	2.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Oklahoma. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Oregon

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	100.0	100.0	79.3	100.0	100.0	96.6
Enrollment assistance services	68.0	100.0	72.4	76.0	100.0	89.7
Health fair	80.0	100.0	82.8	92.0	100.0	93.1
Community health education	92.0	100.0	89.7	100.0	100.0	96.6
Health screenings	92.0	100.0	79.3	96.0	100.0	93.1
Health research	12.0	0.0	34.5	24.0	0.0	72.4
Immunization program	36.0	60.0	37.9	60.0	60.0	75.9
Indigent care clinic	16.0	40.0	13.8	24.0	40.0	51.7
Adult day care	12.0	0.0	0.0	12.0	0.0	13.8
Any substance use services	8.0	0.0	13.8	16.0	0.0	31.0
Substance use inpatient care	4.0	0.0	3.5	4.0	0.0	20.7
Substance use outpatient care	4.0	0.0	13.8	12.0	0.0	31.0
Ambulance services	24.0	0.0	6.9	44.0	0.0	27.6
Certified trauma center ²	72.0	100.0	58.6	76.0	100.0	75.9
Dental services	4.0	0.0	13.8	16.0	0.0	51.7
Hemodialysis	4.0	20.0	48.3	28.0	20.0	86.2
Home health services	52.0	100.0	27.6	80.0	100.0	62.1
Hospice program	44.0	20.0	34.5	76.0	80.0	96.6
Obstetrics care	72.0	100.0	93.1	76.0	100.0	100.0
Any psychiatric services	24.0	80.0	75.9	56.0	80.0	89.7
Psychiatric inpatient care	12.0	20.0	48.3	24.0	20.0	79.3
Psychiatric outpatient care	20.0	80.0	69.0	56.0	80.0	82.8
Palliative care program	20.0	80.0	65.5	44.0	80.0	82.8
Inpatient palliative care unit	8.0	40.0	17.2	20.0	40.0	31.0
Any long-term care	36.0	0.0	13.8	44.0	0.0	34.5
Skilled nursing care	32.0	0.0	3.5	36.0	0.0	17.2
Intermediate nursing care	24.0	0.0	10.3	32.0	0.0	20.7
Other long-term care	4.0	0.0	0.0	8.0	0.0	17.2

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture's 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either "other rural" (RUCCs 4 through 9) or "urban" (RUCCs 1 through 3).

²N=25 CAHs, 6 other rural hospitals, and 30 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Oregon

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.3	2.8	2.6
Charity care costs	1.7	1.6	1.8
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	1.6	1.2	0.9
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	4.0	4.3	5.5

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Oregon. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Pennsylvania

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	40.0	83.3	92.7	50.0	95.8	96.9
Enrollment assistance services	50.0	58.3	81.3	50.0	70.8	90.6
Health fair	90.0	95.8	95.8	90.0	100.0	96.9
Community health education	80.0	91.7	92.7	80.0	95.8	95.8
Health screenings	70.0	95.8	100.0	70.0	100.0	100.0
Health research	0.0	12.5	40.6	10.0	20.8	55.2
Immunization program	30.0	37.5	64.6	40.0	41.7	72.9
Indigent care clinic	10.0	0.0	35.4	10.0	4.2	56.3
Adult day care	0.0	0.0	6.3	0.0	4.2	24.0
Any substance use services	0.0	20.8	19.8	20.0	37.5	36.5
Substance use inpatient care	0.0	8.3	7.3	10.0	8.3	21.9
Substance use outpatient care	0.0	16.7	15.6	20.0	33.3	32.3
Ambulance services	10.0	4.2	25.0	30.0	45.8	62.5
Certified trauma center ²	0.0	8.3	29.2	0.0	8.3	43.8
Dental services	20.0	20.8	37.5	30.0	50.0	58.3
Hemodialysis	0.0	8.3	46.9	10.0	75.0	95.8
Home health services	30.0	50.0	32.3	50.0	75.0	85.4
Hospice program	10.0	45.8	32.3	50.0	87.5	89.6
Obstetrics care	10.0	83.3	66.7	30.0	91.7	80.2
Any psychiatric services	20.0	79.2	72.9	50.0	83.3	89.6
Psychiatric inpatient care	20.0	66.7	56.3	40.0	70.8	76.0
Psychiatric outpatient care	10.0	62.5	65.6	40.0	70.8	83.3
Palliative care program	0.0	33.3	63.5	10.0	50.0	83.3
Inpatient palliative care unit	0.0	16.7	9.4	10.0	20.8	25.0
Any long-term care	40.0	33.3	26.0	50.0	41.7	41.7
Skilled nursing care	40.0	33.3	22.9	50.0	41.7	38.5
Intermediate nursing care	0.0	0.0	5.2	10.0	4.2	12.5
Other long-term care	0.0	0.0	4.2	10.0	0.0	12.5

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=12 CAHs, 30 other rural hospitals, and 115 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Pennsylvania

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	2.8	2.3	2.1
Charity care costs	0.5	0.7	1.1
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.4	1.6	1.1
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.7	4.6	2.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Pennsylvania. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: South Carolina

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	100.0	83.3	92.3	100.0	91.7	94.9
Enrollment assistance services	50.0	41.7	69.2	50.0	41.7	82.1
Health fair	75.0	91.7	89.7	75.0	91.7	94.9
Community health education	75.0	91.7	94.9	75.0	91.7	94.4
Health screenings	100.0	100.0	92.3	100.0	100.0	94.9
Health research	0.0	8.3	30.8	0.0	16.7	59.0
Immunization program	50.0	41.7	25.6	50.0	41.7	43.6
Indigent care clinic	0.0	0.0	10.3	25.0	8.3	25.6
Adult day care	0.0	0.0	2.6	0.0	8.3	10.3
Any substance use services	0.0	0.0	18.0	0.0	25.0	33.3
Substance use inpatient care	0.0	0.0	15.4	0.0	16.7	33.3
Substance use outpatient care	0.0	0.0	15.4	0.0	16.7	28.2
Ambulance services	0.0	25.0	23.1	50.0	75.0	64.1
Certified trauma center ²	0.0	8.3	33.3	0.0	16.7	64.1
Dental services	0.0	41.7	25.6	0.0	58.3	48.7
Hemodialysis	0.0	33.3	48.7	0.0	58.3	76.9
Home health services	50.0	33.3	20.5	50.0	66.7	61.5
Hospice program	25.0	16.7	20.5	75.0	83.3	74.4
Obstetrics care	0.0	91.7	76.9	25.0	91.7	87.2
Any psychiatric services	25.0	50.0	43.6	25.0	66.7	66.7
Psychiatric inpatient care	0.0	25.0	28.2	25.0	33.3	43.6
Psychiatric outpatient care	25.0	50.0	43.6	25.0	66.7	66.7
Palliative care program	25.0	25.0	41.0	25.0	41.7	61.5
Inpatient palliative care unit	0.0	0.0	7.7	0.0	0.0	15.4
Any long-term care	100.0	100.0	100.0	100.0	100.0	100.0
Skilled nursing care	100.0	100.0	100.0	100.0	100.0	100.0
Intermediate nursing care	25.0	33.3	10.3	25.0	41.7	25.6
Other long-term care	100.0	91.7	97.4	100.0	91.7	100.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=5 CAHs, 13 other rural hospitals, and 46 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: South Carolina

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	13.7	8.3	6.8
Charity care costs	3.0	2.5	2.6
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	10.8	6.1	4.3
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	7.2	3.0	1.9

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in South Carolina. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: South Dakota

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	62.1	50.0	83.3	65.5	50.0	83.3
Enrollment assistance services	20.7	33.3	66.7	34.5	33.3	83.3
Health fair	79.3	83.3	83.3	86.2	83.3	83.3
Community health education	82.8	100.0	100.0	86.2	100.0	100.0
Health screenings	100.0	100.0	100.0	100.0	100.0	100.0
Health research	0.0	0.0	66.7	17.2	16.7	66.7
Immunization program	55.2	16.7	100.0	75.9	33.3	100.0
Indigent care clinic	3.5	0.0	50.0	20.7	16.7	66.7
Adult day care	6.9	50.0	0.0	6.9	66.7	33.3
Any substance use services	0.0	16.7	83.3	20.7	16.7	100.0
Substance use inpatient care	0.0	0.0	16.7	6.9	0.0	50.0
Substance use outpatient care	0.0	16.7	83.3	17.2	16.7	100.0
Ambulance services	20.7	33.3	33.3	51.7	33.3	66.7
Certified trauma center ²	55.2	100.0	50.0	58.6	100.0	50.0
Dental services	0.0	50.0	66.7	48.3	66.7	83.3
Hemodialysis	3.5	50.0	83.3	20.7	83.3	83.3
Home health services	34.5	50.0	50.0	79.3	83.3	83.3
Hospice program	10.3	50.0	83.3	75.9	83.3	83.3
Obstetrics care	27.6	100.0	50.0	37.9	100.0	50.0
Any psychiatric services	10.3	66.7	100.0	44.8	66.7	100.0
Psychiatric inpatient care	0.0	16.7	66.7	20.7	33.3	83.3
Psychiatric outpatient care	10.3	66.7	100.0	44.8	66.7	100.0
Palliative care program	3.5	83.3	83.3	34.5	83.3	83.3
Inpatient palliative care unit	3.5	16.7	33.3	24.1	16.7	33.3
Any long-term care	72.4	100.0	50.0	75.9	100.0	66.7
Skilled nursing care	58.6	100.0	16.7	69.0	100.0	50.0
Intermediate nursing care	20.7	0.0	16.7	34.5	0.0	50.0
Other long-term care	17.2	50.0	33.3	27.6	50.0	50.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=38 CAHs, 11 other rural hospitals, and 6 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: South Dakota

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.2	3.5	3.0
Charity care costs	1.1	1.3	1.1
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.2	2.2	1.9
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	1.8	2.0	1.2

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in South Dakota. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Tennessee

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	75.0	72.2	91.2	87.5	72.2	94.1
Enrollment assistance services	50.0	50.0	64.7	50.0	61.1	91.2
Health fair	100.0	88.9	88.2	100.0	88.9	100.0
Community health education	87.5	83.3	85.3	87.5	83.3	94.1
Health screenings	87.5	88.9	88.2	100.0	88.9	97.1
Health research	0.0	11.1	55.9	25.0	16.7	82.4
Immunization program	37.5	27.8	35.3	50.0	27.8	50.0
Indigent care clinic	12.5	0.0	8.8	25.0	0.0	20.6
Adult day care	0.0	5.6	2.9	12.5	16.7	35.3
Any substance use services	0.0	5.6	23.5	25.0	16.7	61.8
Substance use inpatient care	0.0	5.6	8.8	25.0	16.7	52.9
Substance use outpatient care	0.0	5.6	17.7	25.0	16.7	58.8
Ambulance services	0.0	33.3	26.5	37.5	61.1	64.7
Certified trauma center ²	0.0	11.1	35.3	25.0	11.1	47.1
Dental services	0.0	5.6	38.2	25.0	11.1	52.9
Hemodialysis	0.0	0.0	58.8	25.0	22.2	91.2
Home health services	25.0	33.3	35.3	50.0	55.6	79.4
Hospice program	12.5	22.2	35.3	50.0	61.1	94.1
Obstetrics care	0.0	61.1	70.6	25.0	61.1	94.1
Any psychiatric services	50.0	27.8	58.8	62.5	55.6	85.3
Psychiatric inpatient care	0.0	22.2	41.2	25.0	33.3	73.5
Psychiatric outpatient care	50.0	27.8	52.9	62.5	55.6	85.3
Palliative care program	12.5	5.6	52.9	37.5	27.8	79.4
Inpatient palliative care unit	0.0	0.0	23.5	12.5	0.0	26.5
Any long-term care	37.5	38.9	26.5	50.0	44.4	67.7
Skilled nursing care	37.5	38.9	11.8	50.0	44.4	52.9
Intermediate nursing care	25.0	16.7	11.8	37.5	22.2	55.9
Other long-term care	0.0	0.0	5.9	12.5	0.0	17.7

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=15 CAHs, 38 other rural hospitals, and 59 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Tennessee

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	6.2	4.3	5.5
Charity care costs	2.0	0.7	2.6
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	4.9	3.7	2.9
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	9.3	5.4	3.7

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Tennessee. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Texas

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	51.9	65.8	75.7	55.7	69.7	80.3
Enrollment assistance services	36.7	63.2	61.7	41.8	72.4	82.9
Health fair	78.5	92.1	82.4	83.5	92.1	87.1
Community health education	67.1	77.6	86.0	72.2	80.3	88.6
Health screenings	77.2	84.2	85.0	82.3	86.8	88.1
Health research	1.3	4.0	25.4	8.9	9.2	39.4
Immunization program	57.0	39.5	38.9	63.3	47.4	46.1
Indigent care clinic	16.5	14.5	14.5	22.8	23.7	34.7
Adult day care	0.0	1.3	0.5	1.3	4.0	3.6
Any substance use services	1.3	0.0	8.8	7.6	2.6	26.4
Substance use inpatient care	1.3	0.0	4.7	7.6	2.6	18.7
Substance use outpatient care	0.0	0.0	6.7	2.5	2.6	22.3
Ambulance services	32.9	29.0	7.3	58.2	55.3	45.6
Certified trauma center ²	76.0	85.5	57.5	77.2	85.5	62.7
Dental services	1.3	18.4	21.8	21.5	29.0	34.2
Hemodialysis	2.5	14.5	46.1	8.9	26.3	80.8
Home health services	24.1	36.8	9.3	40.5	56.6	28.0
Hospice program	10.1	22.4	10.9	50.6	59.2	65.3
Obstetrics care	16.5	72.4	75.7	25.3	75.0	77.2
Any psychiatric services	13.9	29.0	38.3	24.1	35.5	57.0
Psychiatric inpatient care	1.3	11.8	24.9	7.6	18.4	38.3
Psychiatric outpatient care	12.7	25.0	33.7	21.5	31.6	53.9
Palliative care program	10.1	15.8	36.3	19.0	22.4	47.7
Inpatient palliative care unit	2.5	4.0	4.7	8.9	6.6	13.0
Any long-term care	11.4	10.5	12.4	15.2	18.4	19.7
Skilled nursing care	11.4	7.9	9.3	15.2	15.8	16.6
Intermediate nursing care	1.3	1.3	5.7	2.5	4.0	13.0
Other long-term care	2.5	1.3	0.5	3.8	4.0	5.7

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=79 CAHs, 78 other rural hospitals, and 206 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Texas

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	18.6	14.4	7.7
Charity care costs	4.3	5.1	4.6
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	14.6	9.5	3.5
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	5.4	4.2	2.3

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Texas. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Utah

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	62.5	80.0	82.4	87.5	80.0	88.2
Enrollment assistance services	50.0	60.0	76.5	62.5	80.0	88.2
Health fair	75.0	80.0	88.2	87.5	80.0	100.0
Community health education	87.5	60.0	94.1	87.5	60.0	100.0
Health screenings	75.0	80.0	94.1	75.0	80.0	100.0
Health research	0.0	0.0	41.2	0.0	0.0	64.7
Immunization program	62.5	40.0	41.2	62.5	40.0	70.6
Indigent care clinic	25.0	0.0	17.7	25.0	20.0	41.2
Adult day care	0.0	20.0	0.0	12.5	20.0	5.9
Any substance use services	0.0	0.0	17.7	25.0	0.0	47.1
Substance use inpatient care	0.0	0.0	11.7	25.0	0.0	41.2
Substance use outpatient care	0.0	0.0	17.7	0.0	0.0	47.1
Ambulance services	12.5	20.0	23.5	75.0	40.0	47.1
Certified trauma center ²	50.0	40.0	70.6	50.0	40.0	88.2
Dental services	12.5	20.0	58.8	25.0	20.0	58.8
Hemodialysis	25.0	20.0	52.9	25.0	20.0	88.2
Home health services	37.5	20.0	17.7	75.0	40.0	64.7
Hospice program	62.5	20.0	23.5	87.5	60.0	88.2
Obstetrics care	100.0	100.0	88.2	100.0	100.0	88.2
Any psychiatric services	37.5	20.0	70.6	75.0	20.0	94.1
Psychiatric inpatient care	0.0	0.0	58.8	0.0	0.0	88.2
Psychiatric outpatient care	37.5	20.0	70.6	75.0	20.0	94.1
Palliative care program	0.0	20.0	52.9	0.0	60.0	76.5
Inpatient palliative care unit	0.0	0.0	23.5	0.0	20.0	29.4
Any long-term care	50.0	40.0	41.2	62.5	40.0	82.4
Skilled nursing care	50.0	40.0	23.5	62.5	40.0	58.8
Intermediate nursing care	12.5	20.0	23.5	25.0	20.0	35.3
Other long-term care	0.0	0.0	0.0	25.0	0.0	5.9

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=11 CAHs, 8 other rural hospitals, and 26 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Utah

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	6.3	5.3	3.1
Charity care costs	1.9	2.1	1.1
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	4.5	3.1	2.1
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	0.6	0.3	0.5

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Utah. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Vermont

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	60.0	75.0	100.0	60.0	100.0	100.0
Enrollment assistance services	60.0	75.0	100.0	60.0	75.0	100.0
Health fair	20.0	100.0	100.0	20.0	100.0	100.0
Community health education	80.0	100.0	100.0	80.0	100.0	100.0
Health screenings	80.0	100.0	100.0	80.0	100.0	100.0
Health research	20.0	50.0	100.0	20.0	50.0	100.0
Immunization program	40.0	75.0	50.0	40.0	75.0	100.0
Indigent care clinic	20.0	0.0	50.0	20.0	25.0	50.0
Adult day care	0.0	0.0	0.0	0.0	25.0	0.0
Any substance use services	20.0	25.0	50.0	20.0	50.0	50.0
Substance use inpatient care	33.3	33.3	33.3	20.0	25.0	50.0
Substance use outpatient care	0.0	25.0	50.0	0.0	50.0	50.0
Ambulance services	0.0	0.0	50.0	40.0	75.0	100.0
Certified trauma center ²	20.0	25.0	100.0	20.0	25.0	100.0
Dental services	20.0	50.0	50.0	40.0	75.0	50.0
Hemodialysis	0.0	25.0	50.0	20.0	50.0	100.0
Home health services	0.0	0.0	0.0	40.0	75.0	50.0
Hospice program	20.0	25.0	100.0	60.0	100.0	100.0
Obstetrics care	80.0	75.0	100.0	80.0	75.0	100.0
Any psychiatric services	40.0	75.0	50.0	40.0	75.0	50.0
Psychiatric inpatient care	20.0	75.0	50.0	20.0	75.0	50.0
Psychiatric outpatient care	20.0	75.0	50.0	20.0	75.0	50.0
Palliative care program	60.0	75.0	100.0	60.0	75.0	100.0
Inpatient palliative care unit	20.0	75.0	0.0	20.0	75.0	0.0
Any long-term care	20.0	50.0	50.0	20.0	75.0	50.0
Skilled nursing care	20.0	50.0	50.0	20.0	75.0	50.0
Intermediate nursing care	20.0	0.0	0.0	20.0	25.0	0.0
Other long-term care	20.0	0.0	0.0	20.0	25.0	0.0

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=8 CAHs, 5 other rural hospitals, and 2 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Vermont

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.6	2.0	2.1
Charity care costs	1.8	0.6	0.5
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	1.8	1.5	1.6
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.4	2.1	5.2

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Vermont. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Virginia

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	83.3	84.6	88.4	100.0	84.6	100.0
Enrollment assistance services	66.7	69.2	97.7	83.3	84.6	100.0
Health fair	66.7	76.9	95.4	83.3	84.6	97.7
Community health education	66.7	84.6	97.7	100.0	92.3	100.0
Health screenings	83.3	76.9	97.7	100.0	92.3	100.0
Health research	0.0	0.0	53.5	16.7	30.8	69.8
Immunization program	50.0	15.4	53.5	50.0	38.5	69.8
Indigent care clinic	16.7	0.0	37.2	33.3	7.7	72.1
Adult day care	0.0	7.7	4.7	0.0	7.7	39.5
Any substance use services	0.0	0.0	41.9	16.7	23.1	72.1
Substance use inpatient care	0.0	0.0	14.0	16.7	23.1	51.2
Substance use outpatient care	0.0	0.0	39.5	16.7	23.1	65.1
Ambulance services	33.3	0.0	23.3	100.0	30.8	72.1
Certified trauma center ²	16.7	0.0	27.9	33.3	23.1	58.1
Dental services	0.0	30.8	41.9	50.0	61.5	51.2
Hemodialysis	16.7	7.7	65.1	33.3	53.9	97.7
Home health services	0.0	76.9	32.6	83.3	84.6	88.4
Hospice program	0.0	38.5	60.5	83.3	69.2	90.7
Obstetrics care	0.0	46.2	83.7	16.7	61.5	90.7
Any psychiatric services	16.7	23.1	83.7	50.0	53.9	95.4
Psychiatric inpatient care	0.0	15.4	55.8	16.7	30.8	83.7
Psychiatric outpatient care	16.7	15.4	81.4	50.0	46.2	95.4
Palliative care program	0.0	23.1	90.7	16.7	46.2	90.7
Inpatient palliative care unit	0.0	0.0	20.9	0.0	0.0	44.2
Any long-term care	33.3	46.2	20.9	50.0	69.2	51.2
Skilled nursing care	33.3	38.5	18.6	50.0	61.5	48.8
Intermediate nursing care	0.0	15.4	11.6	16.7	30.8	46.5
Other long-term care	0.0	7.7	4.7	0.0	15.4	25.6

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=7 CAHs, 21 other rural hospitals, and 59 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Virginia

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	10.1	6.9	5.3
Charity care costs	4.2	2.1	2.9
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	5.9	4.7	2.4
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.7	3.4	1.4

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Virginia. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Washington

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	66.7	75.0	87.5	71.4	75.0	90.0
Enrollment assistance services	57.1	50.0	80.0	61.9	100.0	92.5
Health fair	81.0	75.0	80.0	81.0	75.0	90.0
Community health education	81.0	100.0	90.0	90.5	100.0	95.0
Health screenings	66.7	100.0	87.5	71.4	100.0	97.5
Health research	0.0	25.0	52.5	4.8	25.0	80.0
Immunization program	47.6	50.0	60.0	61.9	50.0	72.5
Indigent care clinic	4.8	0.0	15.0	14.3	0.0	42.5
Adult day care	0.0	0.0	7.5	4.8	0.0	22.5
Any substance use services	4.8	0.0	17.5	19.1	25.0	35.0
Substance use inpatient care	4.8	0.0	7.5	4.8	0.0	25.0
Substance use outpatient care	4.8	0.0	15.0	19.1	25.0	30.0
Ambulance services	14.3	0.0	2.5	38.1	25.0	52.5
Certified trauma center ²	52.4	75.0	75.0	57.1	75.0	87.5
Dental services	0.0	0.0	10.0	14.3	25.0	50.0
Hemodialysis	0.0	0.0	55.0	4.8	0.0	90.0
Home health services	14.3	25.0	25.0	23.8	50.0	82.5
Hospice program	14.3	0.0	30.0	33.3	50.0	77.5
Obstetrics care	42.9	75.0	82.5	42.9	75.0	92.5
Any psychiatric services	19.1	0.0	60.0	42.9	0.0	85.0
Psychiatric inpatient care	4.8	0.0	37.5	9.5	0.0	65.0
Psychiatric outpatient care	19.1	0.0	57.5	42.9	0.0	82.5
Palliative care program	33.3	25.0	60.0	38.1	25.0	77.5
Inpatient palliative care unit	9.5	25.0	12.5	9.5	25.0	35.0
Any long-term care	38.1	25.0	7.5	42.9	25.0	30.0
Skilled nursing care	33.3	25.0	5.0	33.3	25.0	27.5
Intermediate nursing care	4.8	25.0	2.5	9.5	25.0	20.0
Other long-term care	4.8	25.0	0.0	4.8	25.0	12.5

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture's 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either "other rural" (RUCCs 4 through 9) or "urban" (RUCCs 1 through 3).

²N=39 CAHs, 5 other rural hospitals, and 51 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Washington

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	3.7	2.9	1.8
Charity care costs	1.3	1.3	1.0
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.6	1.7	0.9
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	5.1	6.2	5.0

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Washington. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: West Virginia

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	95.0	63.6	83.3	100.0	63.6	83.3
Enrollment assistance services	65.0	54.6	77.8	75.0	63.6	88.9
Health fair	95.0	100.0	94.4	100.0	100.0	94.4
Community health education	90.0	90.9	83.3	95.0	90.9	94.4
Health screenings	100.0	100.0	100.0	100.0	100.0	100.0
Health research	0.0	9.1	44.4	0.0	18.2	50.0
Immunization program	60.0	45.5	61.1	60.0	45.5	72.2
Indigent care clinic	5.0	0.0	27.8	10.0	9.1	61.1
Adult day care	0.0	0.0	0.0	5.0	0.0	11.1
Any substance use services	0.0	9.1	27.8	5.0	18.2	55.6
Substance use inpatient care	0.0	0.0	11.1	0.0	9.1	27.8
Substance use outpatient care	0.0	9.1	27.8	5.0	18.2	55.6
Ambulance services	20.0	0.0	16.7	25.0	9.1	50.0
Certified trauma center ²	50.0	63.6	77.8	50.0	63.6	83.3
Dental services	10.0	36.4	44.4	25.0	36.4	55.6
Hemodialysis	0.0	36.4	66.7	10.0	54.6	83.3
Home health services	10.0	36.4	50.0	45.0	54.6	83.3
Hospice program	10.0	18.2	11.1	45.0	36.4	72.2
Obstetrics care	20.0	90.9	72.2	25.0	90.9	83.3
Any psychiatric services	10.0	27.3	61.1	30.0	36.4	83.3
Psychiatric inpatient care	0.0	27.3	50.0	10.0	27.3	66.7
Psychiatric outpatient care	10.0	27.3	61.1	30.0	36.4	83.3
Palliative care program	25.0	36.4	66.7	25.0	36.4	66.7
Inpatient palliative care unit	10.0	9.1	11.1	10.0	9.1	22.2
Any long-term care	50.0	27.3	38.9	50.0	45.5	50.0
Skilled nursing care	40.0	27.3	38.9	40.0	45.5	50.0
Intermediate nursing care	25.0	9.1	11.1	25.0	18.2	22.2
Other long-term care	10.0	0.0	11.1	15.0	9.1	22.2

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=20 CAHs, 14 other rural hospitals, and 19 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: West Virginia

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	5.9	2.6	3.0
Charity care costs	1.9	0.4	1.0
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	4.1	2.2	2.0
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	1.7	6.5	5.2

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in West Virginia. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Wisconsin

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	75.9	66.7	89.6	82.8	80.0	93.8
Enrollment assistance services	62.1	73.3	81.3	79.3	80.0	89.6
Health fair	82.8	86.7	62.5	91.4	86.7	87.5
Community health education	93.1	93.3	91.7	100.0	100.0	100.0
Health screenings	84.5	80.0	75.0	93.1	93.3	91.7
Health research	8.6	13.3	33.3	29.3	33.3	68.8
Immunization program	56.9	46.7	47.9	60.3	60.0	81.3
Indigent care clinic	20.7	13.3	12.5	32.8	60.0	70.8
Adult day care	8.6	0.0	12.5	15.5	6.7	37.5
Any substance use services	12.1	33.3	54.2	48.3	66.7	81.3
Substance use inpatient care	1.7	20.0	41.7	22.4	46.7	68.8
Substance use outpatient care	10.3	26.7	41.7	44.8	53.3	79.2
Ambulance services	8.6	20.0	6.3	79.3	66.7	68.8
Certified trauma center ²	75.9	66.7	83.3	91.4	80.0	91.7
Dental services	0.0	0.0	0.0	0.0	0.0	0.0
Hemodialysis	10.3	20.0	31.3	34.5	80.0	93.8
Home health services	19.0	26.7	20.8	60.3	80.0	89.6
Hospice program	20.7	20.0	14.6	62.1	86.7	89.6
Obstetrics care	65.5	100.0	87.5	75.9	100.0	100.0
Any psychiatric services	25.9	33.3	60.4	55.2	73.3	87.5
Psychiatric inpatient care	6.9	20.0	43.8	27.6	40.0	72.9
Psychiatric outpatient care	24.1	26.7	56.3	55.2	66.7	87.5
Palliative care program	37.9	46.7	64.6	60.3	60.0	83.3
Inpatient palliative care unit	10.3	13.3	16.7	32.8	13.3	27.1
Any long-term care	24.1	13.3	8.3	24.1	13.3	8.3
Skilled nursing care	22.4	13.3	6.3	22.4	13.3	6.3
Intermediate nursing care	1.7	0.0	2.1	1.7	0.0	2.1
Other long-term care	10.3	0.0	2.1	10.3	0.0	2.1

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=58 CAHs, 17 other rural hospitals, and 52 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Wisconsin

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	2.9	1.9	1.5
Charity care costs	1.0	1.0	0.8
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	2.0	0.9	0.9
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	2.7	2.9	3.2

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Wisconsin. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).



State Comparison of Service Indicators: Wyoming

Indicator	Hospital Provides Service ¹			System and/or Joint Venture Provides Service		
	% CAHs ²	% Other Rural ²	% Urban ²	% CAHs ²	% Other Rural ²	% Urban ²
Community outreach	53.3	83.3	100.0	53.3	83.3	100.0
Enrollment assistance services	46.7	50.0	66.7	53.3	50.0	66.7
Health fair	93.3	66.7	66.7	93.3	83.3	66.7
Community health education	66.7	100.0	100.0	73.3	100.0	100.0
Health screenings	86.7	83.3	100.0	86.7	100.0	100.0
Health research	0.0	0.0	0.0	0.0	0.0	0.0
Immunization program	46.7	33.3	66.7	53.3	33.3	66.7
Indigent care clinic	6.7	16.7	33.3	20.0	33.3	33.3
Adult day care	6.7	0.0	0.0	6.7	0.0	33.3
Any substance use services	6.7	33.3	66.7	6.7	33.3	100.0
Substance use inpatient care	6.7	0.0	0.0	6.7	0.0	0.0
Substance use outpatient care	6.7	33.3	66.7	6.7	33.3	100.0
Ambulance services	53.3	16.7	33.3	60.0	50.0	66.7
Certified trauma center ²	46.7	83.3	66.7	46.7	83.3	66.7
Dental services	0.0	16.7	33.3	26.7	16.7	33.3
Hemodialysis	0.0	66.7	66.7	6.7	66.7	66.7
Home health services	33.3	33.3	66.7	40.0	33.3	66.7
Hospice program	20.0	33.3	66.7	33.3	66.7	66.7
Obstetrics care	60.0	100.0	66.7	60.0	100.0	66.7
Any psychiatric services	13.3	66.7	100.0	26.7	66.7	100.0
Psychiatric inpatient care	0.0	50.0	33.3	0.0	50.0	33.3
Psychiatric outpatient care	13.3	50.0	100.0	26.7	50.0	100.0
Palliative care program	13.3	33.3	66.7	20.0	50.0	66.7
Inpatient palliative care unit	0.0	0.0	33.3	6.7	0.0	33.3
Any long-term care	80.0	66.7	66.7	80.0	66.7	66.7
Skilled nursing care	53.3	33.3	66.7	53.3	33.3	66.7
Intermediate nursing care	26.7	16.7	0.0	33.3	16.7	0.0
Other long-term care	26.7	16.7	33.3	33.3	16.7	33.3

Source: 2014 American Hospital Association Annual Survey

¹The United States Department of Agriculture’s 2013 Rural Urban Continuum Codes (RUCCs) were used to classify non-Critical Access Hospitals as either “other rural” (RUCCs 4 through 9) or “urban” (RUCCs 1 through 3).

²N=16 CAHs, 7 other rural hospitals, and 3 urban hospitals.

³Because of the nature and wording of the AHA survey, hospital responses may not align with state and/or American College of Surgeons (ACS) lists of certified trauma centers.



State Comparison of Uncompensated Care and Unreimbursed Cost of Means-Tested Government Programs: Wyoming

Indicator (expressed as a percentage of adjusted revenue)	% CAHs	% Other Rural	% Urban
Uncompensated care costs (total charity care and bad debt)	7.9	4.0	6.5
Charity care costs	2.1	1.2	2.3
Bad debt costs (Non-Medicare and non-reimbursable Medicare)	5.7	2.8	4.2
Unreimbursed cost of means-tested government programs (Medicaid, SCHIP, and state/local indigent care)	3.7	1.7	1.8

Source: 2014 Medicare Hospital Cost Reports, Form CMS-2552-10

Notes:

- Comparison hospitals include all general medical and surgical hospitals operating in Wyoming. Due to refinements in the comparison group construction methodology and data cleaning process, data for other rural and urban hospitals in this report are not comparable to data for other rural and urban hospitals in earlier reports. CAH data is comparable across years.
- Cost report data were not available for all American Hospital Association survey respondents. Additionally, sample sizes vary across the four cost report indicators due to inconsistent reporting practices by the hospitals and are not reported.
- Cost report data include Worksheet S-10 line 19 (total unreimbursed cost for Medicaid, SCHIP and state and local indigent care programs); line 23, column 3 (cost of charity care), line 29 (cost of non-Medicare and non-reimbursable Medicare bad debt expense); and line 30 (cost of uncompensated care). Hospital revenue data is from Worksheet G-3 line 3 (net patient revenues).