

National  
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Hospitals  
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Systems

## AMERICA'S PUBLIC HOSPITALS AND HEALTH SYSTEMS, 2008

Results of the Annual NAPH Hospital Characteristics Survey







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*and* Health  
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NPHHI

National Public Health  
*and* Hospital Institute

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Results of the Annual NAPH Hospital Characteristics Survey

Obaid S. Zaman, MPP  
Linda C. Cummings, Ph.D.  
Sari Siegel Spieler, Ph.D.

This report was developed for the National Association of Public Hospitals and Health Systems by the National Public Health and Hospital Institute.

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## About the National Public Health and Hospital Institute

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The National Public Health and Hospital Institute (NPHHI) is the research affiliate of the National Association of Public Hospitals and Health Systems (NAPH). NPHHI is a private, nonprofit organization established in 1988 to address the major issues facing public hospitals, safety net organizations, underserved communities, and related health policy issues of national priority. Its membership includes over 100 health care organizations that comprise the National Association of Public Hospitals and Health Systems. The NPHHI board includes public and nonprofit sector leaders in health policy and service delivery.

## About the National Association of Public Hospitals and Health Systems

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The National Association of Public Hospitals and Health Systems represents America's safety net hospitals and health systems. These facilities provide high-quality health services for all patients, including the uninsured and underinsured, regardless of ability to pay. They provide many essential community-wide services—such as primary care, trauma care, and neonatal intensive care—and educate a substantial proportion of America's doctors and nurses. NAPH member hospitals and health systems are also major providers of ambulatory care services, providing more than 43 million ambulatory care visits annually. NAPH advocates on behalf of its members on issues of importance to safety net health systems across the country.

## Acknowledgments

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The authors express their thanks to all NAPH member hospitals and health systems that participated in the annual survey. Additional thanks are owed to Christine Capito Burch, Larry S. Gage, Barbara Eyman, Charles Luband, Lynne Fagnani, Kim Ross, Erica Lister, Molly Singer, Xiaoyi Huang, and Brigette Settles Scott for their assistance in the preparation of this report.

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## Foreword

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NAPH's annual member hospital characteristics survey for 2008 highlights the situation of America's premier safety net hospitals and health systems at the beginning of the current economic crisis. For nearly 25 years, NAPH's member survey has been an extremely important measure of the essential role played by our membership in the nation's health system.

That role has been highlighted by the readiness in the current crisis of NAPH members to provide services to the rapidly growing numbers of uninsured and underinsured. The valuable information in this report also underscores the importance of taking the viability of safety net hospitals into account in the current debate over health care reform.

While 2008 information does not reflect the full impact of the current recession on the nation's health system, it indicates that NAPH members continued to provide safety net services far in excess of the proportion of hospitals they represent across the country. The 2008 survey indicates that our members provided, on average, half a million outpatient visits and more than 20,000 inpatient discharges that year, with 30 percent of outpatient and 18 percent of inpatient services provided to uninsured patients. These statistics represent a clear increase in patient volume over the last several years.

Governmental payment sources—and especially Medicaid payments—accounted for two-thirds of patient care

revenue for NAPH members in 2008. Medicaid alone accounted for a third of patient care revenues—a significant statistic when you take into account the fact that Medicaid hospital payment rates in most states are seriously inadequate, paying well below the cost of serving Medicaid patients. Were it not for supplemental Medicaid and Medicare payments, such as disproportionate share hospital (DSH) and graduate medical education (GME) payments, most NAPH members would have been bankrupt years ago.

This 2008 survey indicates that Medicare and Medicaid DSH and GME payments (and other supplemental payments) support nearly 45 percent of all unreimbursed costs in NAPH member hospitals. It is essential for policymakers to understand the importance of these supplemental payments in the current health reform debate. While some Medicaid DSH payments are clearly intended to cover the costs of serving uninsured patients who may ultimately be covered under health reform, the payments are also essential to support Medicaid payment shortfalls and community-wide safety net services like trauma care. The fact that both the House and Senate health reform bills would (at this time) cover some populations among the uninsured by significantly expanding Medicaid payments, without addressing hospital payment inadequacies in that program, means that Congress must tread lightly in reducing DSH payments to pay for health reform.

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Another 34 percent of member unreimbursed costs were covered by direct state and local subsidies in 2008. This statistic masks wide variation in state and local support around the country (some NAPH members get little or nothing from state or local governments), and it also indicates how fragile the funding sources are for America's health safety net. If anything, state and local governments have been hit even harder than the federal government by

the economic downturn, resulting in severe pressure on NAPH members at every level.

As the national health reform debate continues into 2010—and all indications are that the economic recovery will be slow and painful, especially for the unemployed and uninsured—this 2008 survey data should be welcomed by policymakers and the public alike.

**Larry S. Gage** President

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## Executive Summary

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Members of the National Association of Public Hospitals and Health Systems (NAPH) continue to fulfill their safety net mission to provide care to all, regardless of the patients' ability to pay. However, maintaining that mission is an ongoing challenge due to the reimbursement and budgetary realities they face as well as the current economic downturn. This report examines the operations and activities of NAPH members in 2008; it presents their financial challenges, describes the clinical and community services they provided, and profiles the patients they served. Information on the 89 hospitals included in this report was taken from the annual NAPH member survey, which has provided insight into public hospitals and their patients for 25 years.

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Key findings include the following:

### Safety Net Financing

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- In 2008, 16 percent of NAPH members' costs were uncompensated, compared to 5.8 percent of costs for hospitals nationally. NAPH members represent only 2 percent of the nation's acute care hospitals, but delivered 19 percent of the uncompensated care provided by U.S. hospitals in 2008.
- Medicaid remained the most important source of financing for public hospitals, with 33 percent of total net revenues for NAPH members coming from Medicaid in 2008.

- NAPH members rely on a combination of federal, state, and local funding sources for financial viability. Medicaid disproportionate share hospital (DSH) funding financed 19 percent of the unreimbursed care provided in 2008, while state and local payments financed 35 percent.

### Serving Patients and Communities

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- NAPH members provided an extraordinary amount of ambulatory care, averaging more than 508,000 visits in 2008, which represents a steady increase since 1996. On average, they delivered higher volumes of emergency and non-emergency out-

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patient care compared to other acute care hospitals across the country and in their markets.

- NAPH members provided high volumes of inpatient services compared to other acute care hospitals both nationally and within their markets, averaging more than 20,000 discharges per member in 2008.
- A substantial portion of the care that NAPH members provide is for patients who are uninsured and underserved. In 2008, 30 percent of outpatient visits and 18 percent of inpatient services were provided to uninsured patients, who generally cannot afford to pay for much, if any, of their care.
- In 2008, NAPH members provided almost \$100 billion in total inpatient and outpatient services, nearly half of which was for low-income patients—27 percent of these services were provided for Medicaid patients and 19 percent for uninsured patients.
- Many public hospitals serve as training sites for physicians, nurses, and other health care professionals. In 2008, NAPH members trained more than 8,000 full-time equivalent (FTE) medical and dental residents, and more than 1,800 FTE allied health professionals. These future

providers represent 21 percent of the doctors (and more than 36 percent of allied health professionals) who received their training at acute care facilities nationwide.

- Public hospitals continue to serve as first receivers in times of crisis and disaster, both natural and man-made. NAPH members are the only Level I trauma care centers, or the only trauma centers of any level, in 29 communities across the country.

For the member hospitals and health systems of NAPH, maintaining their commitment to provide quality care to their communities—especially to vulnerable populations—has been a challenge over the years. The situation is becoming increasingly difficult with rising medical costs and the growing number of uninsured threatening the viability of the health care safety net. With federal, state and local governments facing large deficits, options are being considered to redirect funds away from Medicaid and other programs that are critical to financing the care of the underserved. These potential changes threaten the ability of public hospitals to meet community needs while also making appropriate investments in health information technology and infrastructure.

# The Role of Public Hospitals: Serving Patients and Communities

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The recent economic downturn intensified federal and state lawmakers' efforts to find ways to control health care costs and restructure service delivery. Public hospitals play an important role in ensuring that the most vulnerable have access to the medical care they need. Although NAPH members represent only 2 percent of acute care hospitals in the nation and 13 percent of acute care hospitals in their respective markets, they have always been major providers of inpatient care, outpatient care, and specialized services for millions of underserved patients who have few other options for their health care needs.

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## Caring for Low-Income and Uninsured Patients

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According to the U.S. Census Bureau, more than 46 million people were uninsured in 2008, which represents 15 percent of the U.S. population.<sup>1</sup> Millions of others are losing employer-sponsored insurance coverage as national unemployment numbers climb. These vulnerable populations often turn to public hospitals when they lack the resources to pay for their care. As a result, many NAPH members have high rates of uncompensated care as a percentage of total costs. Sixteen percent of their costs are uncompensated, compared to uncompensated care costs of 5.8 percent for hospitals nationally.<sup>2</sup> In 2008, NAPH members—representing only 2 percent of the acute care hospitals in the

country—administered 19 percent of the uncompensated care provided at hospitals across the nation.<sup>3</sup>

## Major Providers of Ambulatory Care

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Public hospitals—along with community health centers—serve a critical role in their communities, ensuring access to ambulatory care for the uninsured, Medicaid patients, and Medicare patients. In 2008, NAPH members provided more than 36 million non-emergency outpatient visits, which represented more than one-third of all ambulatory care visits to safety net providers (see Figure 1). Of the non-emergency visits at NAPH member facilities, approximately 55 percent were for specialty care services and 45 percent for primary care services. In addition, NAPH member facilities provided more

## PUBLIC HOSPITALS

Throughout this report, the term “public hospitals” is used to refer to NAPH member hospitals and health systems, which include health care providers owned and operated by cities, counties, states, universities, non-profit organizations, or other entities. NAPH member hospitals share a common “safety net mission” of providing health care to all, regardless of ability to pay.

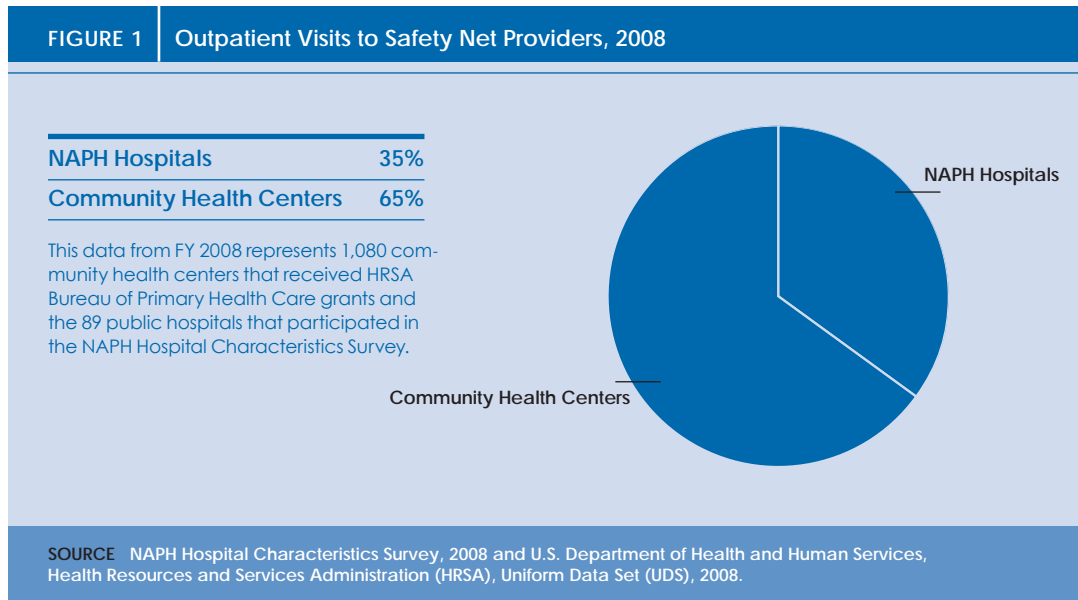
than 6 million emergency department visits. (See Table 2 in Appendix C for data on individual NAPH members.)

According to 2008 data from the American Hospital Association, the average NAPH member provided more than four times the volume of non-emergency outpatient visits as other acute care hospitals in the country and more than three times the volume seen at other acute care hospitals in their markets (see Figure 2). NAPH members also saw almost three times the volume of emergency department visits as the average hospital nationally (see Figure 3). In 2008, 8.1 million primary and specialty care visits and 2.3 million emergency department visits at NAPH member hospitals were for uninsured patients, reflecting public hospitals' commitment to provide ambulatory care to low-income individuals and the chronically ill.

As illustrated in Figure 4, the average number of outpatient visits for an NAPH member hospital was more than 508,000 in 2008. In fact, ambulatory care visits at NAPH members have climbed steadily since 1996 and have grown by 37 percent over this period of time.

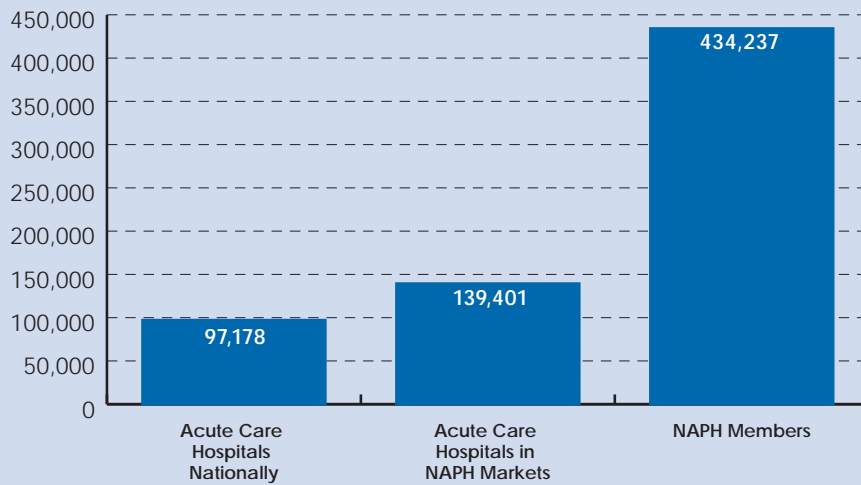
Public hospitals are leading providers of primary care in outpatient settings, caring for patients in thousands of communities across the country. In addition to their on-campus hospital clinics, many public hospital systems operate extensive networks of community clinics. These often take the form of free-standing health clinics that serve as medical homes to residents in their communities. In addition, public hospitals utilize mobile units to deliver ambulatory care services to schools and housing developments.

NAPH members are major providers of outpatient specialty care—an area





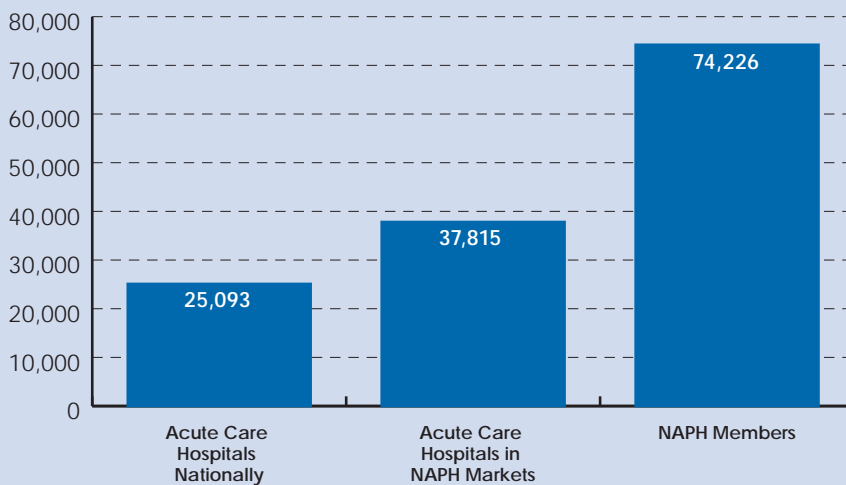
**FIGURE 2** Average Outpatient Visit Volume (Not Including ED Visits), 2008



SOURCE AHA Annual Survey of Hospitals, 2008 and NAPH Hospital Characteristics Survey, 2008.

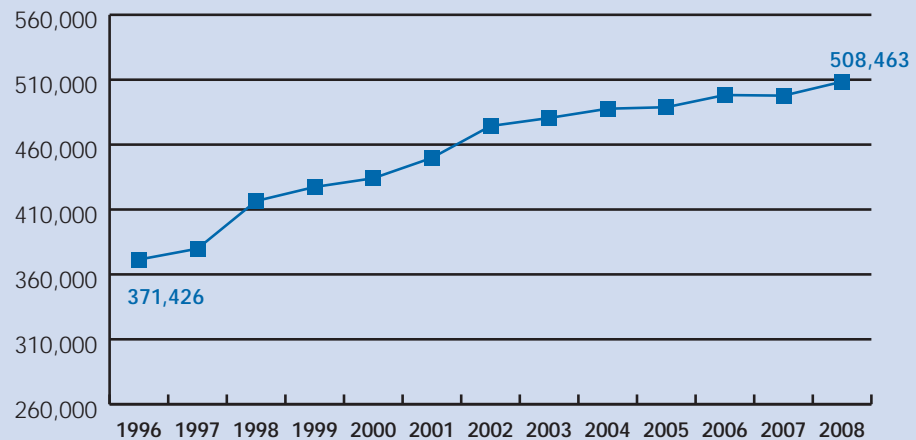
Of the non-emergency visits at NAPH member facilities, approximately 55 percent were for specialty care services and 45 percent for primary care services.

**FIGURE 3** Average Emergency Department Visit Volume, 2008



SOURCE AHA Annual Survey of Hospitals, 2008 and NAPH Hospital Characteristics Survey, 2008.

**FIGURE 4** Average Outpatient Visit Volumes for NAPH Members, 1996–2008



**SOURCE** AHA Annual Survey of Hospitals, 2008 and NAPH Hospital Characteristics Survey, 2008.

*Numbers reflect average volumes for all ambulatory care, including primary care, specialty care, and emergency services.*

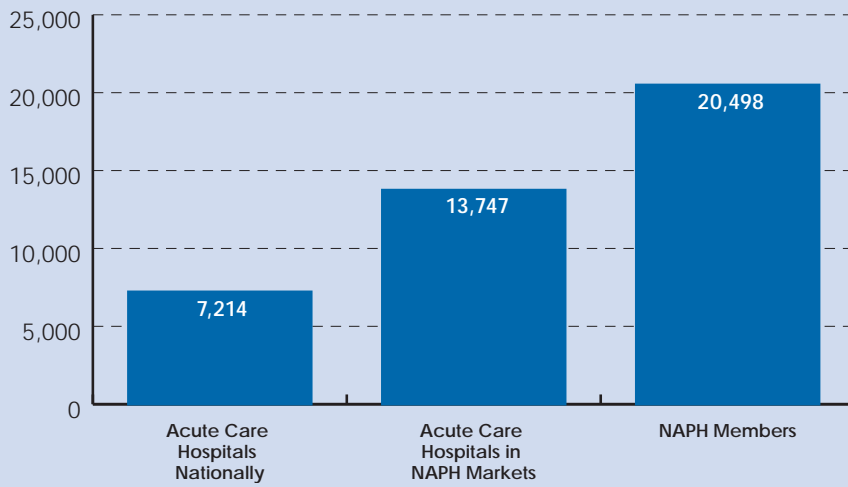
markedly under-resourced in the nation's health care safety net. Often, NAPH members are the only source of specialty care in their service areas. Studies have described the consequences of a national shortage of specialty care available to uninsured and low-income individuals—long waits for specialty visits, or an inability to access care at all, have been shown to result in poorer health outcomes and greater use of emergency department and inpatient services.<sup>4</sup>

### Inpatient Care Volumes

The rising demand for ambulatory care has not eclipsed the importance of inpatient services at public hospitals. In 2008, NAPH members continued to provide extraordinary amounts of

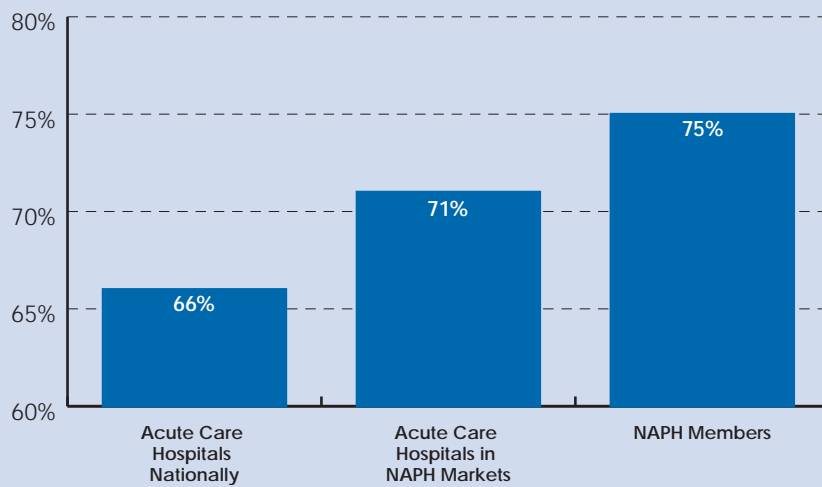
inpatient care, reporting almost three times the volume of admissions seen in other acute care hospitals in the country (see Figure 5).<sup>5</sup> NAPH members also dominated their markets, exceeding average admissions at other hospitals in their markets by 49 percent. NAPH members have higher occupancy rates, on average, than other acute hospitals, both in their markets and across the nation (see Figure 6). As Figure 7 illustrates, the average inpatient volume for NAPH members steadily increased—from fewer than 17,000 discharges in 1996 to more than 20,000 in 2008. NAPH members overall accounted for more than 1.8 million discharges in 2008. (See Table 1 in Appendix C for data on individual NAPH members.)

**FIGURE 5** Average Admissions, 2008



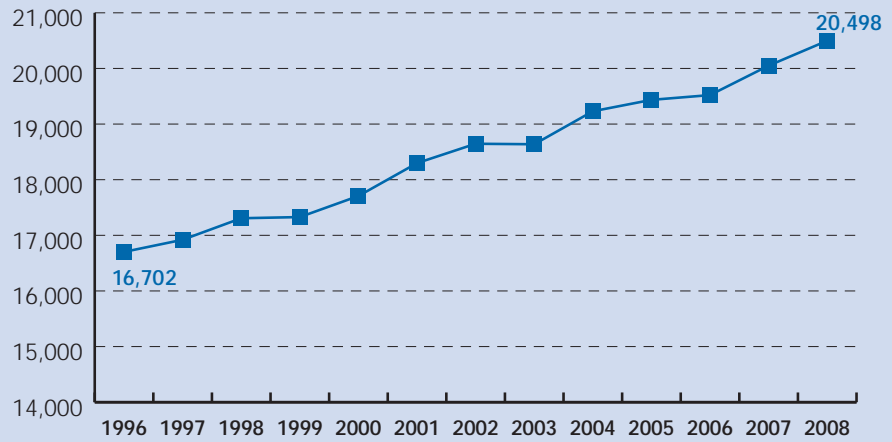
SOURCE AHA Annual Survey of Hospitals, 2008

**FIGURE 6** Average Occupancy Rate, 2008



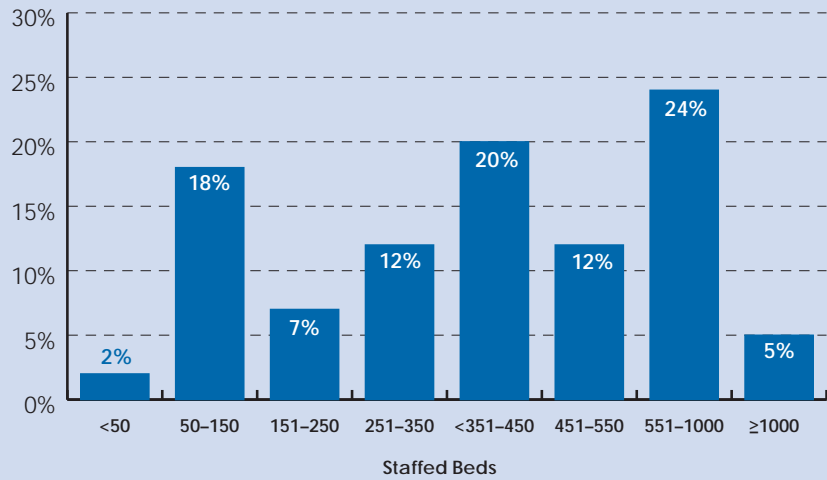
SOURCE AHA Annual Survey of Hospitals, 2008

**FIGURE 7** Average Admissions for NAPH Members, 1996–2008



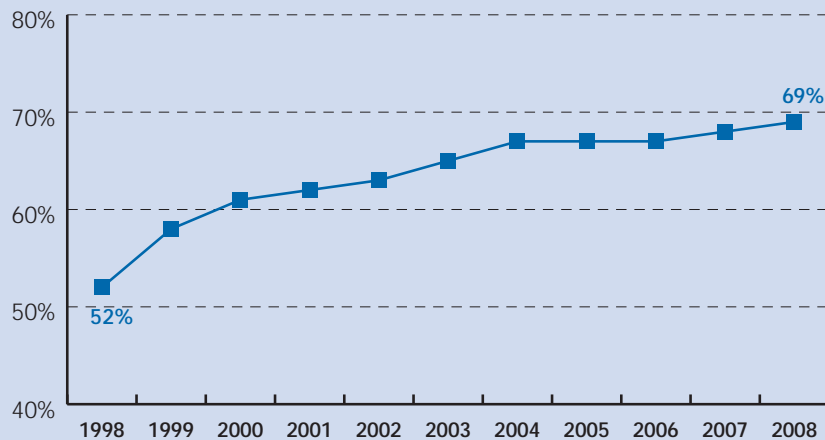
SOURCE AHA Annual Survey of Hospitals, 2008

**FIGURE 8** NAPH Members by Bed Size, 2008



SOURCE NAPH Hospital Characteristics Survey, 2008

**FIGURE 9** Medicaid Births as Percentage of Births at NAPH Member Hospitals, 1998–2008



SOURCE NAPH Hospital Characteristics Surveys, 1998–2008

There is a great deal of variation in bed size within the NAPH membership, as indicated in Figure 8. Twenty-seven percent of NAPH members have 250 beds or fewer; 32 percent have between 251 and 450 beds; 36 percent have between 451 and 1,000 beds; and 4 hospitals have more than 1,000 beds. NAPH members tend to be larger than other acute care hospitals nationally and in their markets. The average NAPH facility has 432 beds—more than double the size of the average acute care hospital nationally. (See Table 1 in Appendix C for data on individual NAPH members.)

### Medicaid Births at NAPH Member Hospitals

Medicaid has provided increased coverage for births over the years. This increase may be due to several factors, including an increase in overall Medicaid enrollment

during this period. From 1998 (the first year NAPH members reported Medicaid births) to 2008, the percentage of total births at NAPH member hospitals that were paid by Medicaid increased from 52 to 69 percent (see Figure 9).

In 2008, NAPH members delivered more than 228,000 babies, representing approximately 17 percent of all births in their markets. These births are disproportionately represented by members of racial and ethnic minorities, reflecting the patient populations NAPH members serve.

### Community Health Services

Most NAPH members maintain close ties with their local health departments, and a significant number are responsible for public health services in their communities. In several major cities across the country, including Cambridge,

**COMMUNITIES WHERE MEMBERS REPRESENT THE ONLY LEVEL I TRAUMA CENTER OR THE ONLY TRAUMA CENTER OF ANY LEVEL**

- Albuquerque, NM
- Atlanta, GA
- Cambridge, MA
- Charlotte, NC
- Chattanooga, TN
- Daytona Beach, FL
- Flint, MI
- Fort Lauderdale, FL
- Fort Myers, FL
- Gainesville, FL
- Independence, LA
- Jacksonville, FL
- Kansas City, KS
- Las Vegas, NV
- Lexington, KY
- Memphis, TN
- Mobile, AL
- New Orleans, LA
- Newark, NJ
- Orlando, FL
- Richmond, VA
- Sacramento, CA
- San Antonio, TX
- San Francisco, CA
- Stony Brook, NY
- Syracuse, NY
- Tampa, FL
- Ventura, CA
- Worcester, MA

SOURCE AHA Annual Survey of Hospitals, 2008

Denver, Los Angeles, and San Francisco, as well as in counties like Cook County in Illinois and Contra Costa County in California, the public hospital is integrated with the local public health department.

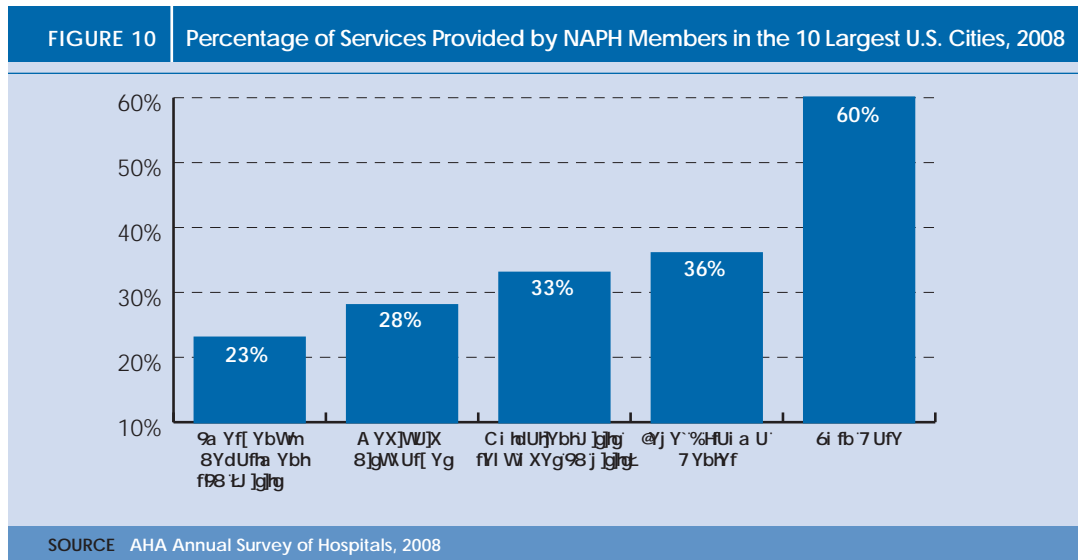
NAPH members play a leading role in various efforts to improve the health status of the communities they serve. They have established programs to provide immunizations, address teen pregnancy and low birthweight, prevent violence and injury, and provide mammography and other cancer screenings. Within their communities, NAPH members perform a significant amount of adult and teen outreach, crisis prevention, reproductive health services and education, and dental care.

In an analysis of the 10 largest U.S. cities, NAPH members represented only 12 percent of local acute care hospitals, but provided a disproportionate share of

critical services (see Figure 10).<sup>6</sup> Specifically, NAPH member hospitals provided 23 percent of the emergency department visits and 33 percent of non-emergency outpatient visits. As major providers of trauma care, public hospitals represented 36 percent of Level I trauma providers and 60 percent of the burn care beds available to treat the critically injured in these cities. Moreover, illustrating their importance in providing care to low-income patients, NAPH members were responsible for 28 percent of Medicaid discharges in these major metropolitan areas.

**Trauma Care and Emergency Preparedness**

Trauma care—highly specialized treatment provided through facilities equipped to administer emergency and specialized intensive care to critically ill



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and injured patients—is among the most important services offered by public hospitals. Level I trauma centers, which are the most highly specialized, are able to address every aspect of severe injury. Level I trauma centers also play a leading role in trauma research and education. In 29 communities—including Albuquerque, Las Vegas, Memphis, Richmond, and San Francisco—NAPH members are either the only Level I trauma center or the only trauma center of any level.

Because of their leading role as providers of emergency, trauma, and burn care services, NAPH members have long been first-receivers for catastrophes such as chemical spills, fires, disease outbreaks, and natural disasters.

Extensive trauma coverage, coupled with a direct relationship with local governments, means that public hospitals are uniquely poised to be leaders in emergency preparedness. Fully 97 percent of NAPH member hospitals serve on a community emergency preparedness coordinating committee, while more than half (62 percent) are involved with three or more such groups. Moreover, most NAPH members (82 percent) also participate in the Metropolitan Medical Response Service (MMRS), a federal system that assists highly populated jurisdictions with increasing their capacity to respond to a mass casualty event caused by a terrorist attack.<sup>7</sup>

Most NAPH members also have explicit provisions in their emergency

plans addressing the needs of vulnerable populations, including limited English proficiency patients (85 percent), non-ambulatory patients (88 percent), children (85 percent), nursing home/assisted living patients (55 percent), and the homeless (45 percent).<sup>8</sup>

### Patient Diversity

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NAPH member hospitals serve racially and ethnically diverse communities. As Figure 11 shows, the majority of the discharges in 2008 were for patients who are members of racial and ethnic minorities. More than a quarter of patients were Black. A quarter of patients were Hispanic. Asian/Pacific Islander and other races/ethnicities made up 7 percent of total discharges. Forty-two percent were White.

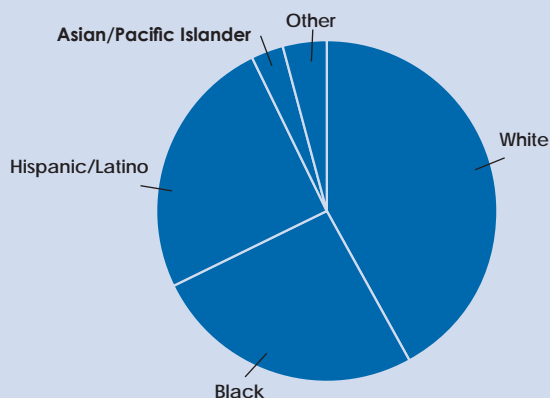
As comprehensive systems of care, public hospitals can address patient health care needs through every stage of life. As Figure 12 illustrates, public hospital patients represent all age groups. NAPH members reported 12 percent of discharges for patients 18 years of age or younger, 37 percent for patients aged 19 to 44, and 21 percent of discharges were for patients 65 or older.

In addition to diversity by race/ethnicity and age, NAPH members serve patients with varying forms of insurance coverage. In 2008, patients with commercial insurance accounted for only 22 percent of outpatient volume and 19 percent of inpatient volume at member hospitals. The

Because of their leading role as providers of emergency, trauma and burn care services, NAPH members have long been first-receivers for catastrophes such as chemical spills, fires, disease outbreaks, and natural disasters.

**FIGURE 11** Discharges by Race/Ethnicity at NAPH Members, 2008

White	42%
Black	26%
Hispanic/Latino	25%
Asian/Pacific Islander	3%
Other	4%



SOURCE NAPH Hospital Characteristics Survey, 2008

**PROVIDING CARE TO UNINSURED PATIENTS**

In 2008, NAPH members provided:

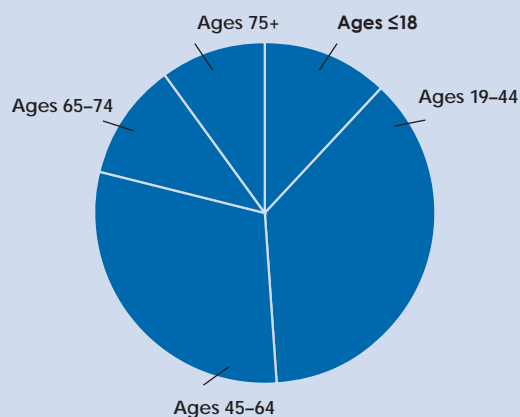
1. \$1.5 billion of ambulatory care visits for uninsured patients

1. 1.5 percent of inpatient services for uninsured patients

1. 1.5 percent of the uncompensated hospital care in the country

**FIGURE 12** Discharges by Age at NAPH Members, 2008

Ages ≤18	12%
Ages 19–44	37%
Ages 45–64	30%
Ages 65–74	11%
Ages 75+	10%



SOURCE NAPH Hospital Characteristics Survey, 2008

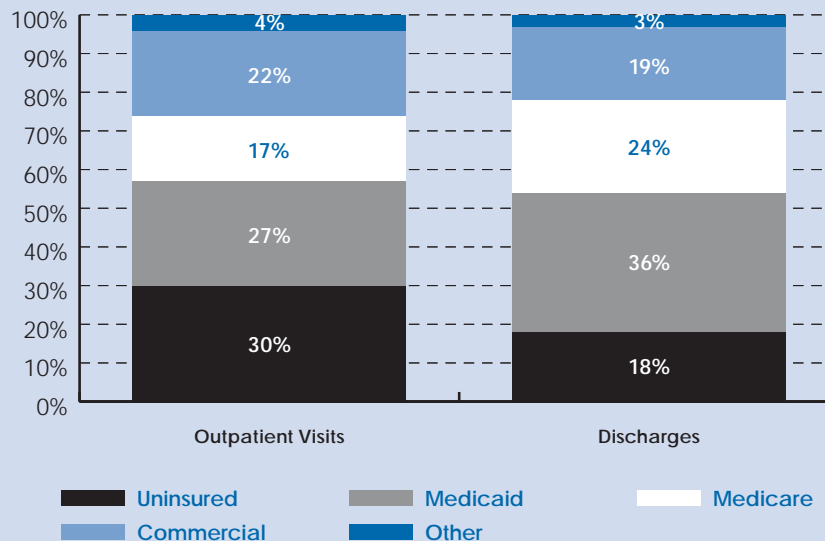
majority of patients were uninsured or low-income; more than half of all discharges and outpatient visits were either for uninsured or Medicaid patients (see Figure 13). Furthermore, 30 percent of ambulatory care services—compared to 18 percent of inpatient services—were provided to

uninsured patients. (See Tables 3 and 4 in Appendix C for data on individual NAPH members.)

The extraordinary amount of ambulatory care provided by NAPH members is poorly reimbursed, if it is reimbursed at all. This is due to reimbursement rates for outpatient services



**FIGURE 13** Outpatient Visits and Discharges at NAPH Member Hospitals and Health Systems, by Payer Source, 2008



SOURCE NAPH Hospital Characteristics Survey, 2008

generally being lower than reimbursement rates for inpatient services, as well as a substantial amount of this care being provided to the uninsured. These factors contribute to the financial challenges NAPH members face.

### Training Physicians and Other Health Care Professionals

In addition to promoting high-quality, community-centered health care today, NAPH members ensure that this care will be available to patients in the future through the education and training of new health care providers. More than three-quarters (82 percent) of NAPH members are teaching institutions, as

defined by the Accreditation Council for Graduate Medical Education (ACGME),<sup>9</sup> and 61 percent are academic medical centers, as defined by the Council of Teaching Hospitals of the Association of American Medical Colleges (COTH).<sup>10</sup> As such, public hospitals serve as the training ground for a large percentage of the country's physicians, nurses, and other health care professionals.

In 2008, NAPH members trained more than 18,000 full-time equivalent (FTE) medical and dental residents, and more than 1,800 FTE allied health professionals. These future providers represented 21 percent of the doctors and more than 36 percent of the allied health

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professionals trained at acute care facilities that year. In their markets, public hospitals played an even larger teaching

role, training 37 percent of the medical and dental residents and 66 percent of the allied health professionals in 2008.

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## Challenges Facing Public Hospitals

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Maintaining safety net financing is essential as the growing number of uninsured Americans increasingly turn to NAPH members for their health care. NAPH members reported a 10 percent increase in uncompensated care costs during the fourth quarter of 2008, compared to the same period in 2007.<sup>11</sup> Although NAPH member hospitals manage to operate with the funding they receive from a variety of sources—including Medicaid, Medicare, private insurance, as well as state and local governments—it remains a struggle to finance the care they provide to the millions of uninsured, low-income, or otherwise vulnerable individuals they serve each year. These pressures—combined with increasing costs for training, supplies, and equipment—require hospitals to make tough choices between meeting the demand for patient care services, investing in technology, and maintaining infrastructure. With fundamental changes to the health care delivery system a possibility in the near future, keeping safety net funding in place is even more important to ensure that the most vulnerable do not fall through the cracks during the transition.

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### Government Support

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Medicaid remains the single most important source of financing for NAPH members; in 2008, it accounted for 33 percent of total net revenues. A critical component of Medicaid revenues was Medicaid disproportionate share

hospital (DSH) payments and other supplemental Medicaid payments that are intended to reduce the shortfalls accrued by treating Medicaid patients and to partially subsidize care for the uninsured. Without DSH and supplemental payments, NAPH members would have lost \$3 billion on the care of

Without DSH and supplemental payments, NAPH members would have lost \$3 billion on the care of Medicaid patients in 2008.

Medicaid patients in 2008; their Medicaid payment-to-cost ratio would have been 0.73. For 42 percent of NAPH members, these additional Medicaid payments did not even cover the full cost of providing care to Medicaid patients, leaving no DSH funding to help cover the care of the uninsured.

Medicare revenues are supplemented by Medicare DSH payments (which also target hospitals that serve low-income and uninsured patients), and indirect medical education (IME) payments (which subsidize the higher costs incurred by teaching hospitals). In addition, public hospitals rely heavily on payments from state and local governments.

### Financial Characteristics

NAPH members provided almost \$100 billion in total inpatient and outpatient services, averaging more than \$1 billion in gross charges per hospital or health system in 2008. Twenty-seven percent of these services were provided to Medicaid patients and 19 percent to uninsured patients who were considered self-pay, charity care, or were covered by state or local indigent care programs (see Figure 14). Twenty-five percent of services were provided to Medicare patients and another 25 percent to the commercially insured. Services for “other” groups of patients, including Workers’ Compensation and military veterans, account for the remaining 4 percent of care provided to patients. (See Table 5

in Appendix C for data on individual NAPH members.)

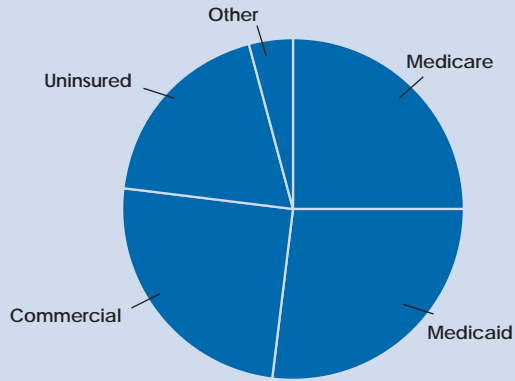
Net revenues for NAPH members amounted to \$40 billion in 2008, an average of \$454 million each. These providers continued to rely primarily on a combination of federal, state and local funding sources to sustain their operations. In 2008, about two-thirds of revenues for public hospitals came from federal, state and local payment sources: 33 percent from Medicaid, 21 percent from Medicare, and 13 percent from state and local payments (see Figure 15). An additional 26 percent of revenues came from commercially insured patients, while payments from uninsured patients accounted for 4 percent of net revenues. Payments for “other” patient groups accounted for 3 percent of net revenues. (See Table 6 in Appendix C for data on individual NAPH members.)

### Financing Unreimbursed Care

“Unreimbursed care” refers to losses on care provided to all patients, excluding “mission-related” supplemental funding such as DSH and IME payments and state or local government payments. In addition to the number of uninsured patients they care for, a large percentage of care provided by NAPH members is unreimbursed, meaning that base payments received for services provided do not cover the full costs of providing these services. As a result, unreimbursed care costs represent a significant burden for public hospitals.

**FIGURE 14** Gross Charges by Payer Source at NAPH Members, 2008

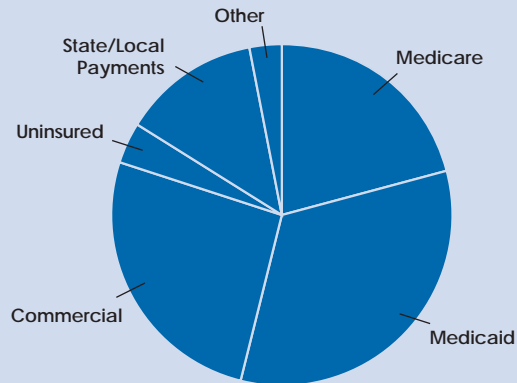
Medicare	25%
Medicaid	27%
Commercial	25%
Uninsured	19%
Other	4%



SOURCE NAPH Hospital Characteristics Survey, 2008

**FIGURE 15** Net Revenues by Payer Source at NAPH Members, 2008

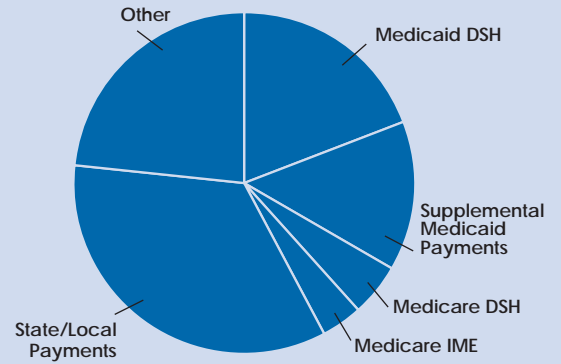
Medicare	21%
Medicaid	33%
Commercial	26%
Uninsured	4%
State/Local Payments	13%
Other	3%



SOURCE NAPH Hospital Characteristics Survey, 2008

**FIGURE 16** Sources of Financing for Unreimbursed Care, 2008

Medicaid DSH	19%
Supplemental Medicaid Payments	14%
Medicare DSH	5%
Medicare IME	4%
State/Local Payments	35%
Other	23%



SOURCE NAPH Hospital Characteristics Survey, 2008

As Figure 16 indicates, state and local payments financed 35 percent of the unreimbursed care provided by NAPH members in 2008. Medicaid DSH was also a critical funding source, financing 19 percent of the unreimbursed care provided. Fourteen percent of funding came from other supplemental Medicaid payments. Medicare DSH and IME

payments helped pay for 9 percent of unreimbursed care, covering 5 percent and 4 percent respectively. Revenues unrelated to patient care—including interest and investment income, cafeteria and parking revenues, medical record fees, sales tax, tobacco settlement monies, and rental income—covered 23 percent of unreimbursed care costs.

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## Each year, the National Association of Public Hospitals and Health Systems (NAPH) reports on the financial and utilization characteristics of its membership.

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NAPH is comprised of approximately 140 public hospitals across the country, and approximately 96 are acute care hospitals. This report is an update on the status of our members based on data collected through the Hospital Characteristics Survey (of acute care facilities) for fiscal year 2008.

In 2008, 89 NAPH acute care hospitals responded to the annual survey, for a survey response rate of 92 percent. Some members are excluded from certain tables due to missing or incomplete data. Trend analyses in this report may

differ slightly from prior published reports on survey findings due to changes in membership.

In order to compare NAPH members to other acute care hospitals nationally and in the markets they serve, we relied on data from the American Hospital Association (AHA) Annual Survey of Hospitals for 2008. AHA has conducted this survey since 1946 and uses this tool to collect data on organizational structure, facilities, services, community orientation, utilization, finances, and staffing.

**Ambulatory Care.** Outpatient health care that includes emergency department visits, clinic visits, and outpatient surgery.

**Bad Debt.** The unpaid obligation for care provided to patients who are considered able to pay, but who do not pay. Includes unpaid co-payments from insured patients.

**Charity Care.** Care provided to individuals who are determined to be unable to pay. Results from provider policy to offer services free of charge to individuals who meet certain financial criteria.

**Discharge.** The formal release of a patient from a hospital following a procedure or course of treatment delivered in the inpatient hospital setting.

**Disproportionate Share Hospital (DSH) Payments.** Payments made either by Medicare or a state's Medicaid program to hospitals that serve a "disproportionate share" of low-income patients. These payments are in addition to the regular payments such hospitals receive for providing care to Medicare and Medicaid beneficiaries. Medicare DSH payments are based on a federal statutory qualifying formula and payment methodology. For Medicaid DSH, there are certain minimum federal criteria, but qualifying formulas and payment methodologies are largely determined by states.

**Graduate Medical Education (GME) Payments.** Medicare payments to a hospital or qualified non-hospital provider for

costs related to the salaries and supervision of medical residents (known as "Direct Graduate Medical Education" payments, or DGME) as well as the additional costs of operating a teaching hospital (known as "Indirect Medical Education" payments, or IME). In 2008, the Medicare program reimbursed providers an estimated \$2.6 billion in DGME payments and \$5.8 billion in IME payments.

- DGME pays for stipends and fringe benefits of residents, salaries and fringe benefits of supervising medical faculty, other direct costs (such as clerical support staff that work directly on GME administration), and allocated institutional overhead costs (such as maintenance and electricity).
- IME recognizes the indirect costs of graduate medical education, that is, the higher costs incurred by teaching hospitals with medical education programs. Such costs include additional tests ordered by residents in their training, a higher patient acuity, etc.

**Gross Charges.** The amount hospitals charge for providing services to all patients, irrespective of payments received for services.

**Hospital Margin.** Used as a measure of the financial condition of the hospital. It is calculated as the difference between total net revenues and total expenses divided by total net revenues.

**Medicaid.** A program jointly funded by the federal and state governments to pro-



vide health coverage to those who qualify on the basis of income and eligibility; e.g., low-income families with children, the low-income elderly, and persons with disabilities. Many states also extend coverage to groups that meet higher income limits or to certain “medically needy” populations. Through waivers, some states have expanded coverage even further.

**Medicare.** Provides health coverage for individuals 65 and older, for certain disabled individuals under age 65, and for people with end-stage renal disease (ESRD), which is permanent kidney failure requiring dialysis or a kidney transplant. In contrast to Medicaid, Medicare is a purely federal program. While covering broad categories of services, Medicare leaves major gaps in coverage, including many preventive services. The program provides coverage for hospital care through what is known as “Part A,” and physician and other ambulatory care through what is called “Part B.” Beneficiaries may also enroll in a Medicare managed care plan, or Medicare Advantage plan, through Medicare “Part C.” Starting in 2007, Medicare offered beneficiaries the option of enrolling in a new Medicare “Part D” prescription drug benefit.

**Net Revenues.** Payments the hospital receives for the services provided, including both the portion paid by the patient and that paid by a third party.

**Payment-to-Cost Ratio.** A ratio that reflects the degree to which revenues

cover expenses, calculated by dividing total revenues by total expenses.

**State and Local Payments.** Payments made to hospitals by state or local governments to subsidize unreimbursed patient care. Payments are usually made as a lump sum or as periodic payments and are not tied to volume of services or per-patient amounts. State or local payments are different from state or local indigent care programs, which usually have eligibility requirements and make payments on a per-person or per-service basis.

**Uncompensated Care.** The sum of charity care (care to patients who are unable to pay) and bad debt (care to patients who do not pay but are considered able to pay).

**Unreimbursed Care.** Losses on patient care, including losses on self-pay patients and losses on Medicare and Medicaid (excluding funding such as DSH payments, IME payments, and state and local government payments).

**Upper Payment Limit (UPL).** Limits set by CMS regulations on the amount of Medicaid payments a state may make to hospitals, nursing facilities, and other classes of providers and plans. Payments in excess of the UPLs do not qualify for federal Medicaid matching funds. The UPL generally is keyed to the reasonably estimated amount that would be paid, in the aggregate, to the class of providers in question using Medicare payment rules.

Table 1. NAPH Member Hospitals and Health Systems—Inpatient Utilization Data, 2008

Hospital Name	Staffed Beds	Discharges	Inpatient Days	Births
Alameda County Medical Center	360	13,291	117,817	1,440
Arrowhead Regional Medical Center	353	24,138	112,736	4,333
Boston Medical Center	519	27,126	143,104	2,426
Broadlawns Medical Center	89	4,360	16,751	375
Broward Health—Broward General Medical Center	640	27,695	164,288	3,644
Broward Health—Coral Springs Medical Center	182	11,975	46,263	2,305
Broward Health—Imperial Point Medical Center	180	7,673	35,550	-
Broward Health—North Broward Medical Center	360	14,947	87,363	-
Cambridge Health Alliance	283	15,518	91,408	1,463
Contra Costa Regional Medical Center	112	9,254	39,135	2,568
Cook County HHS—Oak Forest Hospital	95	2,895	24,893	-
Cook County HHS—Provident Hospital of Cook County	84	5,214	20,856	361
Cook County HHS—The John H. Stroger, Jr. Hospital of Cook County	460	23,343	114,970	894
Cooper Green Mercy Hospital	141	4,549	18,892	469
Denver Health	370	21,291	101,431	3,669
Erlanger Health System	560	28,065	148,335	4,991
Grady Health System	667	28,159	177,513	3,193
Halifax Community Health System	619	28,536	142,490	2,394
Harborview Medical Center	368	18,597	136,662	-
Harris County Hospital District	891	41,355	243,670	9,939
The Health and Hospital Corporation of Marion County	335	16,518	88,076	3,143
Health Care District of Palm Beach County	60	3,402	10,961	588
Hennepin County Medical Center	465	25,845	129,887	2,570
Howard University Hospital	291	11,416	65,477	676
Hurley Medical Center	443	20,745	112,828	2,849
Jackson Memorial Hospital	1,871	73,866	493,984	8,963
JPS Health Network	540	25,632	135,408	6,541
LAC—Harbor/UCLA Medical Center	338	21,876	123,633	1,127
LAC—LAC+USC Medical Center	662	40,173	221,794	1,442
LAC—Olive View/UCLA Medical Center	238	14,255	70,124	1,059
Lee Memorial Health System	1,382	67,441	330,100	7,662
LSUHCS—Bogalusa Medical Center	51	2,571	14,850	-
LSUHCS—Earl K. Long Medical Center	135	6,467	36,964	745
LSUHCS—Lallie Kemp Regional Medical Center	17	990	3,950	-
LSUHCS—Leonard J. Chabert Medical Center	95	5,080	26,914	520
LSUHCS—Medical Center of Louisiana at New Orleans	211	11,019	61,790	907
LSUHCS—University Medical Center	110	5,201	30,249	361
LSUHCS—Walter O. Moss Regional Hospital	31	1,399	9,072	-
Maricopa Integrated Health System	571	22,681	157,572	4,218
Memorial Hospital at Gulfport	367	16,372	93,467	1,431
The MetroHealth System	554	25,935	137,925	3,498
MHS—Memorial Hospital Miramar	178	9,364	31,536	2,889
MHS—Memorial Hospital Pembroke	149	7,164	29,853	-
MHS—Memorial Hospital West	299	23,093	94,835	4,934
MHS—Memorial Regional Hospital	1,014	40,695	220,343	4,199
Nashville General Hospital at Meharry	117	5,296	25,837	1,156
Nassau University Medical Center	481	23,883	152,005	1,841
NYCHHC—Bellevue Hospital Center	809	29,021	239,226	2,021
NYCHHC—Coney Island Hospital	371	18,024	116,061	1,080
NYCHHC—Elmhurst Hospital Center	545	23,961	172,794	4,096

## Hospital-Specific Data on Utilization and Finances

Hospital Name	Staffed Beds	Discharges	Inpatient Days	Births
NYCHHC—Harlem Hospital Center	257	11,364	71,713	1,204
NYCHHC—Jacobi Medical Center	466	20,665	143,808	2,251
NYCHHC—Kings County Hospital Center	627	24,811	191,145	2,652
NYCHHC—Lincoln Medical and Mental Health Center	322	22,480	94,046	2,416
NYCHHC—Metropolitan Hospital Center	345	13,899	106,152	1,854
NYCHHC—North Central Bronx Hospital	191	13,993	99,214	1,732
NYCHHC—Queens Hospital Center	261	17,728	95,088	2,130
NYCHHC—Woodhull Medical and Mental Health Center	388	19,295	117,399	1,893
The Ohio State University Medical Center	1,073	53,165	333,177	4,385
Parkland Health & Hospital System	795	41,475	222,382	15,632
Riverside County Regional Medical Center	395	20,901	110,213	2,886
San Francisco General Hospital	529	14,730	155,434	1,334
San Joaquin General Hospital	121	9,257	42,133	2,686
San Mateo Medical Center	112	4,086	39,639	-
Santa Clara Valley Health & Hospital System	554	24,925	134,980	5,672
Shands HealthCare—Shands at the University of Florida and Shands AGH	831	39,418	246,669	3,991
Shands HealthCare—Shands Jacksonville Medical Center	596	27,413	172,012	3,746
Stony Brook University Hospital	542	29,315	170,176	3,360
SUNY Downstate Medical Center	339	17,743	110,673	1,744
Tampa General Hospital	958	36,983	247,265	5,566
Truman Medical Centers	530	21,013	147,497	3,703
UK HealthCare Hospital System	611	32,926	178,217	1,870
UMass Memorial Medical Center	677	40,566	211,095	4,289
UMDNJ—University Hospital	421	20,299	130,345	1,853
University Health System at San Antonio	377	20,625	128,516	2,819
University Hospital, The SUNY Upstate Medical University	358	16,460	109,070	-
University Hospital, The University of New Mexico Health Sciences Center	360	23,973	129,776	3,972
University Medical Center of El Paso	282	16,331	69,172	4,847
University Medical Center of Southern Nevada	575	30,286	165,880	4,954
University of California—Davis Medical Center	565	30,894	169,997	2,568
University of California—Irvine Medical Center	363	16,719	101,681	1,344
University of California—San Diego Medical Center	514	23,057	136,743	2,789
University of Colorado Hospital Authority	398	19,364	110,592	3,240
The University of Kansas Hospital	519	22,393	129,390	1,581
University of South Alabama Medical Center	137	6,004	39,193	-
University of Texas Health Center at Tyler	117	2,272	12,002	-
University of Utah Health Care	442	23,355	126,830	3,547
VCU Health System	739	30,891	191,093	2,336
Westchester Medical Center	733	24,536	243,405	739
<b>Total</b>	<b>38,483</b>	<b>1,837,154</b>	<b>10,801,150</b>	<b>228,444</b>
<b>Average</b>	<b>432</b>	<b>20,642</b>	<b>121,361</b>	<b>2,967</b>
<b>Count</b>	<b>89</b>	<b>89</b>	<b>89</b>	<b>77</b>

Note: Averages are for hospitals that have the service, e.g., if no births are reported, that hospital is not included in the average.

Note: Row percentages may not add up to 100% due to rounding.

Source: NAPH Hospital Characteristics Survey, 2008

# Appendix C

## Hospital-Specific Data on Utilization and Finances

**Table 2.** NAPH Member Hospitals and Health Systems—Emergency Department and Outpatient Visits, 2008

Hospital Name	Emergency Department Number	Emergency Department % of Total	All Other Outpatient Number	All Other Outpatient % of Total	Total
Alameda County Medical Center	72,715	21%	274,478	79%	347,193
Arrowhead Regional Medical Center	103,547	17%	498,167	83%	601,714
Boston Medical Center	112,700	13%	747,622	87%	860,322
Broadlawns Medical Center	28,826	17%	138,048	83%	166,874
Broward Health—Broward General Medical Center	107,733	29%	264,261	71%	371,994
Broward Health—Coral Springs Medical Center	47,646	42%	65,327	58%	112,973
Broward Health—Imperial Point Medical Center	27,835	33%	55,751	67%	83,586
Broward Health—North Broward Medical Center	55,423	38%	89,907	62%	145,330
Cambridge Health Alliance	94,721	14%	590,959	86%	685,680
Contra Costa Regional Medical Center	55,885	13%	385,382	87%	441,267
Cook County Health and Hospitals System*	197,136	26%	574,125	74%	771,261
Cooper Green Mercy Hospital	30,941	18%	140,540	82%	171,481
Denver Health	54,874	6%	877,085	94%	931,959
Erlanger Health System	87,952	37%	147,767	63%	235,719
Grady Health System	113,849	13%	734,549	87%	848,398
Halifax Community Health System	113,760	40%	170,812	60%	284,572
Harborview Medical Center	68,987	22%	248,945	78%	317,932
Harris County Hospital District	124,512	9%	1,315,822	91%	1,440,334
The Health and Hospital Corporation of Marion County	111,177	9%	1,128,699	91%	1,239,876
Health Care District of Palm Beach County	19,195	45%	23,058	55%	42,253
Hennepin County Medical Center	90,930	16%	460,870	84%	551,800
Howard University Hospital	49,147	34%	95,064	66%	144,211
Hurley Medical Center	75,708	24%	235,130	76%	310,838
Jackson Memorial Hospital	216,814	37%	362,626	63%	579,440
JPS Health Network	67,140	8%	777,081	92%	844,221
LAC—Harbor/UCLA Medical Center	72,500	15%	421,356	85%	493,856
LAC—LAC+USC Medical Center	99,738	14%	621,149	86%	720,887
LAC—Olive View/UCLA Medical Center	36,364	11%	294,821	89%	331,185
Lee Memorial Health System	151,985	27%	417,104	73%	569,089
LSUHCS—Bogalusa Medical Center	28,394	23%	94,856	77%	123,250
LSUHCS—Earl K. Long Medical Center	43,752	21%	163,752	79%	207,504
LSUHCS—Lallie Kemp Regional Medical Center	26,220	25%	80,563	75%	106,783
LSUHCS—Leonard J. Chabert Medical Center	42,446	20%	171,820	80%	214,266
LSUHCS—Medical Center of Louisiana at New Orleans	51,788	30%	118,839	70%	170,627
LSUHCS—University Medical Center	45,427	23%	155,862	77%	201,289
LSUHCS—Walter O. Moss Regional Hospital	24,839	24%	79,331	76%	104,170
Maricopa Integrated Health System	57,187	9%	578,339	91%	635,526
Memorial Hospital at Gulfport	53,119	38%	88,241	62%	141,360
The MetroHealth System	86,833	10%	817,924	90%	904,757
MHS—Memorial Hospital Miramar	44,653	48%	48,276	52%	92,929
MHS—Memorial Hospital Pembroke	33,341	26%	95,019	74%	128,360
MHS—Memorial Hospital West	85,642	32%	179,632	68%	265,274
MHS—Memorial Regional Hospital	140,102	30%	334,770	70%	474,872
Nashville General Hospital at Meharry	31,160	38%	51,221	62%	82,381
Nassau University Medical Center	75,307	27%	207,534	73%	282,841
NYCHHC—Bellevue Hospital Center	101,792	17%	506,361	83%	608,153

## Hospital-Specific Data on Utilization and Finances

Hospital Name	Emergency Department Number	Emergency Department % of Total	All Other Outpatient Number	All Other Outpatient % of Total	Total
NYCHHC—Coney Island Hospital	70,184	20%	274,456	80%	344,640
NYCHHC—Elmhurst Hospital Center	119,749	17%	574,770	83%	694,519
NYCHHC—Harlem Hospital Center	72,928	21%	279,823	79%	352,751
NYCHHC—Jacobi Medical Center	96,044	18%	427,769	82%	523,813
NYCHHC—Kings County Hospital Center	125,299	18%	588,711	82%	714,010
NYCHHC—Lincoln Medical and Mental Health Center	148,352	27%	403,295	73%	551,647
NYCHHC—Metropolitan Hospital Center	60,649	15%	353,421	85%	414,070
NYCHHC—North Central Bronx Hospital	61,061	24%	196,099	76%	257,160
NYCHHC—Queens Hospital Center	83,206	19%	352,476	81%	435,682
NYCHHC—Woodhull Medical and Mental Health Center	99,272	21%	370,680	79%	469,952
The Ohio State University Medical Center	103,290	11%	844,353	89%	947,643
Parkland Health & Hospital System	124,492	11%	1,050,246	89%	1,174,738
Riverside County Regional Medical Center	90,455	17%	455,695	83%	546,150
San Francisco General Hospital	50,346	7%	673,831	93%	724,177
San Joaquin General Hospital	42,235	20%	174,009	80%	216,244
San Mateo Medical Center	30,022	7%	394,524	93%	424,546
Santa Clara Valley Health & Hospital System	57,556	7%	766,076	93%	823,632
Shands HealthCare—Shands at the University of Florida and Shands AGH	75,149	9%	731,208	91%	806,357
Shands HealthCare—Shands Jacksonville Medical Center	89,133	22%	312,439	78%	401,572
Stony Brook University Hospital	77,658	28%	195,430	72%	273,088
SUNY Downstate Medical Center	69,567	20%	275,128	80%	344,695
Tampa General Hospital	70,577	27%	186,815	73%	257,392
Truman Medical Centers	91,888	13%	632,972	87%	724,860
UK HealthCare Hospital System	66,045	18%	301,427	82%	367,472
UMass Memorial Medical Center	132,628	12%	933,995	88%	1,066,623
UMDNJ—University Hospital	95,013	36%	170,101	64%	265,114
University Health System at San Antonio	64,227	6%	1,089,925	94%	1,154,152
University Hospital, The SUNY Upstate Medical University	49,476	12%	352,651	88%	402,127
University Hospital, The University of New Mexico Health Sciences Center	80,293	8%	951,865	92%	1,032,158
University Medical Center of El Paso	61,836	12%	463,295	88%	525,131
University Medical Center of Southern Nevada	115,056	13%	801,113	87%	916,169
University of California—Davis Medical Center	55,703	2%	2,826,140	98%	2,881,843
University of California—Irvine Medical Center	32,030	7%	406,984	93%	439,014
University of California—San Diego Medical Center	60,392	21%	225,620	79%	286,012
University of Colorado Hospital Authority	51,587	8%	602,015	92%	653,602
The University of Kansas Hospital	31,410	6%	495,749	94%	527,159
University of South Alabama Medical Center	31,208	85%	5,409	15%	36,617
University of Texas Health Center at Tyler	11,648	7%	153,849	93%	165,497
University of Utah Health Care	37,387	4%	989,673	96%	1,027,060
Westchester Medical Center	36,655	22%	131,502	78%	168,157
<b>Total</b>	<b>6,383,448</b>	<b>15%</b>	<b>37,344,384</b>	<b>85%</b>	<b>43,727,832</b>
<b>Average</b>	<b>74,226</b>		<b>434,237</b>		<b>508,463</b>
<b>Count</b>	<b>86</b>		<b>86</b>		<b>86</b>

Note: Row percentages may not add up to 100% due to rounding.

\*Data for the three hospitals of the Cook County Health and Hospitals System have been consolidated because community ambulatory care volumes are not associated with specific hospitals.

Source: NAPH Hospital Characteristics Survey, 2008

# Appendix C

## Hospital-Specific Data on Utilization and Finances

**Table 3.** NAPH Member Hospitals and Health Systems—Discharges by Payer Source, 2008

Hospital Name	Medicare		Medicaid		Commercial		Uninsured*		Other**		Total
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
Alameda County Medical Center	2,055	15%	6,925	52%	557	4%	3,754	28%	0	0%	13,291
Arrowhead Regional Medical Center	2,722	11%	11,259	47%	1,913	8%	7,400	31%	844	3%	24,138
Boston Medical Center	8,942	33%	9,847	36%	5,138	19%	2,920	11%	279	1%	27,126
Broadlawn Medical Center	789	18%	986	23%	368	8%	2,217	51%	0	0%	4,360
Broward Health—Broward General Medical Center	6,831	25%	8,378	30%	5,813	21%	6,673	24%	0	0%	27,695
Broward Health—Coral Springs Medical Center	3,489	29%	2,586	22%	4,390	37%	1,510	13%	0	0%	11,975
Broward Health—Imperial Point Medical Center	3,536	46%	961	13%	1,710	22%	1,466	19%	0	0%	7,673
Broward Health—North Broward Medical Center	6,881	46%	1,542	10%	3,178	21%	3,346	22%	0	0%	14,947
Cambridge Health Alliance	5,528	36%	5,611	36%	2,360	15%	1,998	13%	21	0.1%	15,518
Contra Costa Regional Medical Center	1,600	17%	4,951	54%	874	9%	1,691	18%	138	1%	9,254
Cook County HHS—Oak Forest Hospital	617	21%	1,169	40%	42	1%	1,067	37%	0	0%	2,895
Cook County HHS—Provident Hospital of Cook County	988	19%	1,090	21%	493	9%	2,642	51%	1	0.02%	5,214
Cook County HHS—The John H. Stroger, Jr. Hospital of Cook County	2,687	12%	8,311	36%	1,173	5%	11,172	48%	0	0%	23,343
Cooper Green Mercy Hospital	640	14%	1,022	22%	333	7%	2,428	53%	126	3%	4,549
Denver Health	3,507	16%	9,278	44%	2,311	11%	5,297	25%	898	4%	21,291
Erlanger Health System	8,829	31%	6,880	25%	9,758	35%	2,306	8%	292	1%	28,065
Grady Health System	5,893	21%	7,971	28%	6,168	22%	8,127	29%	0	0%	28,159
Halifax Community Health System	12,119	42%	4,421	15%	8,612	30%	2,744	10%	640	2%	28,536
Harborview Medical Center	4,830	26%	4,819	26%	5,955	32%	2,993	16%	0	0%	18,597
Harris County Hospital District	3,302	8%	17,422	42%	885	2%	19,462	47%	284	1%	41,355
The Health and Hospital Corporation of Marion County	3,551	21%	6,197	38%	931	6%	4,772	29%	1,067	6%	16,518
Health Care District of Palm Beach County	773	23%	1,638	48%	507	15%	435	13%	49	1%	3,402
Hennepin County Medical Center	5,383	21%	11,164	43%	4,388	17%	4,616	18%	294	1%	25,845
Howard University Hospital	2,820	25%	4,960	43%	1,875	16%	1,746	15%	15	0.1%	11,416
Hurley Medical Center	5,869	28%	8,312	40%	5,173	25%	963	5%	428	2%	20,745
Jackson Memorial Hospital	15,214	21%	32,306	44%	11,649	16%	10,474	14%	4,223	6%	73,866
JPS Health Network	3,297	13%	9,618	38%	2,392	9%	10,004	39%	321	1%	25,632
LAC—Harbor/UCLA Medical Center	1,962	9%	11,334	52%	718	3%	7,113	33%	749	3%	21,876
LAC—LAC+USC Medical Center	1,919	5%	16,874	42%	3,394	8%	17,638	44%	348	1%	40,173
LAC—Olive View/UCLA Medical Center	1,049	7%	7,501	53%	159	1%	5,213	37%	333	2%	14,255
Lee Memorial Health System	30,810	46%	11,369	17%	17,887	27%	4,977	7%	2,398	4%	67,441
LSUHCS—Bogalusa Medical Center	835	32%	536	21%	268	10%	889	35%	43	2%	2,571
LSUHCS—Earl K. Long Medical Center	548	8%	2,690	42%	197	3%	2,275	35%	757	12%	6,467
LSUHCS—Lallie Kemp Regional Medical Center	202	20%	278	28%	47	5%	446	45%	17	2%	990
LSUHCS—Leonard J. Chabert Medical Center	818	16%	2,452	48%	398	8%	1,360	27%	52	1%	5,080
LSUHCS—Medical Center of Louisiana at New Orleans	1,100	10%	3,875	35%	668	6%	4,894	44%	482	4%	11,019
LSUHCS—University Medical Center	660	13%	1,844	35%	215	4%	2,374	46%	108	2%	5,201
LSUHCS—Walter O. Moss Regional Hospital	149	11%	326	23%	57	4%	833	60%	34	2%	1,399
Maricopa Integrated Health System	2,479	11%	12,900	57%	2,072	9%	2,276	10%	2,954	13%	22,681
Memorial Hospital at Gulfport	7,035	43%	3,379	21%	3,414	21%	1,773	11%	771	5%	16,372
The MetroHealth System	7,028	27%	9,911	38%	5,295	20%	3,042	12%	659	3%	25,935
MHS—Memorial Hospital Miramar	1,794	19%	1,554	17%	5,047	54%	580	6%	389	4%	9,364
MHS—Memorial Hospital Pembroke	3,166	44%	784	11%	1,855	26%	1,058	15%	301	4%	7,164
MHS—Memorial Hospital West	8,084	35%	3,282	14%	9,474	41%	1,501	6%	752	3%	23,093
MHS—Memorial Regional Hospital	13,964	34%	8,124	20%	11,925	29%	5,224	13%	1,458	4%	40,695
Nashville General Hospital at Meharry	552	10%	2,144	40%	208	4%	1,535	29%	857	16%	5,296
Nassau University Medical Center	4,538	19%	11,398	48%	4,274	18%	1,999	8%	1,674	7%	23,883
NYCHHC—Bellevue Hospital Center	4,636	16%	17,163	59%	2,543	9%	2,250	8%	2,429	8%	29,021

## Hospital-Specific Data on Utilization and Finances

Hospital Name	Medicare		Medicaid		Commercial		Uninsured*		Other**		Total
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
NYCHHC—Coney Island Hospital	6,854	38%	8,358	46%	1,800	10%	872	5%	140	1%	18,024
NYCHHC—Elmhurst Hospital Center	4,557	19%	15,031	63%	1,709	7%	1,053	4%	1,611	7%	23,961
NYCHHC—Harlem Hospital Center	2,389	21%	7,355	65%	866	8%	522	5%	232	2%	11,364
NYCHHC—Jacobi Medical Center	4,352	21%	12,197	59%	2,249	11%	1,244	6%	623	3%	20,665
NYCHHC—Kings County Hospital Center	4,379	18%	15,518	63%	2,714	11%	1,677	7%	523	2%	24,811
NYCHHC—Lincoln Medical and Mental Health Center	5,015	22%	14,521	65%	1,495	7%	1,019	5%	430	2%	22,480
NYCHHC—Metropolitan Hospital Center	2,607	19%	9,655	69%	465	3%	803	6%	463	3%	13,993
NYCHHC—North Central Bronx Hospital	1,442	18%	5,485	68%	608	8%	498	6%	44	1%	8,077
NYCHHC—Queens Hospital Center	2,849	16%	11,945	67%	1,432	8%	1,359	8%	143	1%	17,728
NYCHHC—Woodhull Medical and Mental Health Center	3,336	17%	13,593	70%	1,035	5%	1,308	7%	23	0.1%	19,295
The Ohio State University Medical Center	15,591	29%	11,458	22%	17,309	33%	5,344	10%	3,463	7%	53,165
Parkland Health & Hospital System	3,909	9%	20,463	49%	1,966	5%	14,387	35%	750	2%	41,475
Riverside County Regional Medical Center	2,157	10%	8,653	41%	1,746	8%	5,615	27%	2,730	13%	20,901
San Francisco General Hospital	3,081	21%	5,002	34%	709	5%	3,942	27%	1,996	14%	14,730
San Joaquin General Hospital	1,196	13%	5,491	59%	761	8%	1,809	20%	0	0%	9,257
San Mateo Medical Center	1,139	28%	1,657	41%	167	4%	1,083	27%	40	1%	4,086
Santa Clara Valley Health & Hospital System	2,997	12%	14,083	57%	2,388	10%	4,889	20%	568	2%	24,925
Shands HealthCare—Shands at the University of Florida and Shands AGH	12,564	32%	9,863	25%	11,924	30%	3,098	8%	1,969	5%	39,418
Shands HealthCare—Shands Jacksonville Medical Center	9,461	35%	8,084	29%	3,398	12%	5,020	18%	1,450	5%	27,413
Stony Brook University Hospital	9,824	34%	5,515	19%	11,355	39%	1,784	6%	837	3%	29,315
SUNY Downstate Medical Center	6,156	35%	7,011	40%	3,640	21%	892	5%	44	0.2%	17,743
Tampa General Hospital	11,120	30%	10,207	28%	8,571	23%	5,233	14%	1,852	5%	36,983
Truman Medical Centers	3,794	18%	9,463	45%	2,010	10%	5,501	26%	245	1%	21,013
UK HealthCare Hospital System	9,718	30%	8,995	27%	9,822	30%	3,667	11%	724	2%	32,926
UMass Memorial Medical Center	16,088	40%	8,180	20%	14,351	35%	1,743	4%	204	1%	40,566
UMDNJ—University Hospital	3,963	20%	8,147	40%	3,330	16%	4,586	23%	273	1%	20,299
University Health System at San Antonio	3,138	15%	5,698	28%	2,647	13%	8,264	40%	878	4%	20,625
University Hospital, The SUNY Upstate Medical University	5,351	33%	3,593	22%	5,296	32%	579	4%	1,641	10%	16,460
University Hospital, The University of New Mexico Health Sciences Center	3,420	14%	8,715	36%	5,259	22%	4,758	20%	1,821	8%	23,973
University Medical Center of El Paso	2,104	13%	5,818	36%	1,531	9%	6,878	42%	0	0%	16,331
University Medical Center of Southern Nevada	5,011	17%	8,378	28%	6,473	21%	9,388	31%	1,036	3%	30,286
University of California—Davis Medical Center	6,662	22%	7,596	25%	12,476	40%	3,553	12%	607	2%	30,894
University of California—Irvine Medical Center	4,308	26%	5,177	31%	4,833	29%	2,401	14%	0	0%	16,719
University of California—San Diego Medical Center	5,875	25%	6,429	28%	7,707	33%	3,046	13%	0	0%	23,057
University of Colorado Hospital Authority	5,707	29%	3,531	18%	7,276	38%	2,269	12%	581	3%	19,364
The University of Kansas Hospital	7,032	31%	5,034	22%	7,890	35%	1,785	8%	652	3%	22,393
University of South Alabama Medical Center	1,066	18%	891	15%	1,256	21%	2,204	37%	587	10%	6,004
University of Texas Health Center at Tyler	1,351	59%	334	15%	339	15%	219	10%	29	1%	2,272
University of Utah Health Care	6,128	26%	4,384	19%	9,484	41%	2,045	9%	1,314	6%	23,355
VCU Health System	8,164	26%	8,062	26%	8,278	27%	4,673	15%	1,714	6%	30,891
Westchester Medical Center	6,645	27%	6,768	28%	8,359	34%	927	4%	1,837	7%	24,536
<b>Total</b>	<b>438,520</b>	<b>24%</b>	<b>655,680</b>	<b>36%</b>	<b>355,985</b>	<b>19%</b>	<b>325,410</b>	<b>18%</b>	<b>61,559</b>	<b>3%</b>	<b>1,837,154</b>
<b>Average</b>	<b>4,927</b>		<b>7,367</b>		<b>4,000</b>		<b>3,656</b>		<b>692</b>		<b>20,642</b>
<b>Count</b>											<b>89</b>

Note: Row percentages may not add up to 100% due to rounding.

\*Uninsured discharges are attributed to patients that are considered Self Pay, Charity Care, or covered by a State or Local Indigent Care Program.

\*\*Examples of Other payer sources include Workers' Compensation, Veterans' Care, and Prisoner Care.

Source: NAPH Hospital Characteristics Survey, 2008

# Appendix C

## Hospital-Specific Data on Utilization and Finances

**Table 4.** NAPH Member Hospitals and Health Systems—Outpatient Visits by Payer Source, 2008

Hospital Name	Medicare		Medicaid		Commercial		Uninsured**		Other***		Total
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
Alameda County Medical Center	28,487	8%	158,206	46%	11,487	3%	148,710	43%	303	0.1%	347,193
Arrowhead Regional Medical Center	44,883	7%	196,759	33%	14,256	2%	256,527	43%	89,289	15%	601,714
Boston Medical Center	175,917	20%	296,157	34%	216,387	25%	154,779	18%	17,082	2%	860,322
Broadlawn Medical Center	19,975	12%	39,638	24%	16,936	10%	90,325	54%	0	0%	166,874
Broward Health—Broward General Medical Center	32,426	9%	74,669	20%	69,673	19%	195,226	52%	0	0%	371,994
Broward Health—Coral Springs Medical Center	19,056	17%	15,264	14%	62,263	55%	16,390	15%	0	0%	112,973
Broward Health—Imperial Point Medical Center	31,241	37%	4,742	6%	34,556	41%	13,047	16%	0	0%	83,586
Broward Health—North Broward Medical Center	31,083	21%	21,526	15%	29,855	21%	62,866	43%	0	0%	145,330
Cambridge Health Alliance	116,986	17%	247,214	36%	199,295	29%	114,533	17%	7,652	1%	685,680
Contra Costa Regional Medical Center	65,743	15%	221,730	50%	56,017	13%	95,100	22%	2,677	1%	441,267
Cook County Health and Hospitals System*	62,348	8%	158,482	21%	34,920	5%	515,437	67%	74	0.01%	771,261
Cooper Green Mercy Hospital	47,080	27%	21,645	13%	3,504	2%	94,228	55%	5,024	3%	171,481
Denver Health	73,482	8%	234,170	25%	89,915	10%	314,757	34%	219,635	24%	931,959
Erlanger Health System	30,643	13%	71,196	30%	104,529	44%	26,165	11%	3,186	1%	235,719
Grady Health System	159,889	19%	187,867	22%	57,581	7%	443,061	52%	0	0%	848,398
Halifax Community Health System	98,276	35%	55,398	19%	85,304	30%	39,283	14%	6,311	2%	284,572
Harborview Medical Center	69,780	22%	100,219	32%	74,931	24%	73,002	23%	0	0%	317,932
Harris County Hospital District	166,095	12%	207,144	14%	7,103	0.5%	1,036,985	72%	23,007	2%	1,440,334
The Health and Hospital Corporation of Marion County	200,479	16%	371,489	30%	105,397	9%	509,347	41%	53,164	4%	1,239,876
Health Care District of Palm Beach County	7,564	18%	14,570	34%	12,034	28%	7,512	18%	573	1%	42,253
Hennepin County Medical Center	64,882	12%	140,501	25%	80,040	15%	257,816	47%	8,561	2%	551,800
Howard University Hospital	29,566	21%	47,259	33%	31,718	22%	35,668	25%	0	0%	144,211
Hurley Medical Center	62,195	20%	144,192	46%	86,803	28%	15,722	5%	1,926	1%	310,838
Jackson Memorial Hospital	131,577	23%	242,047	42%	89,834	16%	82,570	14%	33,412	6%	579,440
JPS Health Network	101,380	12%	243,985	29%	42,038	5%	449,499	53%	7,319	1%	844,221
LAC—Harbor/UCLA Medical Center	34,976	7%	153,777	31%	4,746	1%	270,488	55%	29,869	6%	493,856
LAC—LAC+USC Medical Center	30,495	4%	244,790	34%	57,362	8%	388,240	54%	0	0%	720,887
LAC—Olive View/UCLA Medical Center	17,412	5%	94,775	29%	1,311	0.4%	172,716	52%	44,971	14%	331,185
Lee Memorial Health System	197,418	35%	87,644	15%	154,412	27%	91,174	16%	38,441	7%	569,089
LSUHCS—Bogalusa Medical Center	28,686	23%	19,156	16%	21,377	17%	50,680	41%	3,351	3%	123,250
LSUHCS—Earl K. Long Medical Center	19,270	9%	56,024	27%	7,173	3%	113,295	55%	11,742	6%	207,504
LSUHCS—Lallie Kemp Regional Medical Center	14,790	14%	15,626	15%	7,845	7%	67,049	63%	1,473	1%	106,783
LSUHCS—Leonard J. Chabert Medical Center	34,275	16%	48,461	23%	19,762	9%	108,396	51%	3,372	2%	214,266
LSUHCS—Medical Center of Louisiana at New Orleans	15,862	9%	30,689	18%	7,031	4%	111,330	65%	5,715	3%	170,627
LSUHCS—University Medical Center	27,530	14%	44,824	22%	12,346	6%	112,529	56%	4,060	2%	201,289
LSUHCS—Walter O. Moss Regional Hospital	16,914	16%	14,437	14%	6,648	6%	64,501	62%	1,670	2%	104,170
Maricopa Integrated Health System	68,971	11%	370,279	58%	27,457	4%	82,941	13%	85,878	14%	635,526
Memorial Hospital at Gulfport	47,263	33%	21,035	15%	36,198	26%	23,655	17%	13,209	9%	141,360
The MetroHealth System	169,308	19%	302,506	33%	235,407	26%	182,934	20%	14,602	2%	904,757
MHS—Memorial Hospital Miramar	10,443	11%	10,122	11%	56,983	61%	9,208	10%	6,173	7%	92,929
MHS—Memorial Hospital Pembroke	24,227	19%	13,422	10%	52,110	41%	30,094	23%	8,507	7%	128,360
MHS—Memorial Hospital West	65,368	25%	29,515	11%	137,012	52%	26,612	10%	6,767	3%	265,274
MHS—Memorial Regional Hospital	97,622	21%	82,164	17%	135,752	29%	138,905	29%	20,429	4%	474,872
Nashville General Hospital at Meharry	9,312	11%	19,992	24%	6,483	8%	38,694	47%	7,900	10%	82,381
Nassau University Medical Center	39,191	14%	87,609	31%	59,246	21%	74,584	26%	22,211	8%	282,841
NYCHHC—Bellevue Hospital Center	84,504	14%	264,926	44%	41,892	7%	197,696	33%	19,135	3%	608,153
NYCHHC—Coney Island Hospital	66,589	19%	148,765	43%	33,986	10%	91,830	27%	3,470	1%	344,640
NYCHHC—Elmhurst Hospital Center	81,460	12%	330,822	48%	40,652	6%	229,145	33%	12,440	2%	694,519
NYCHHC—Harlem Hospital Center	53,206	15%	181,810	52%	25,323	7%	88,097	25%	4,315	1%	352,751
NYCHHC—Jacobi Medical Center	67,001	13%	332,460	63%	61,323	12%	54,888	10%	8,141	2%	523,813



## Hospital-Specific Data on Utilization and Finances

Hospital Name	Medicare		Medicaid		Commercial		Uninsured**		Other***		Total
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
NYCHHC—Kings County Hospital Center	78,426	11%	322,778	45%	57,605	8%	254,292	36%	909	0.1%	714,010
NYCHHC—Lincoln Medical and Mental Health Center	81,006	15%	276,877	50%	31,449	6%	153,404	28%	8,911	2%	551,647
NYCHHC—Metropolitan Hospital Center	64,756	16%	205,133	50%	23,401	6%	119,611	29%	1,169	0.3%	414,070
NYCHHC—North Central Bronx Hospital	23,345	9%	176,506	69%	27,174	11%	28,790	11%	1,345	1%	257,160
NYCHHC—Queens Hospital Center	58,259	13%	198,526	46%	36,882	8%	140,059	32%	1,956	0.4%	435,682
NYCHHC—Woodhull Medical and Mental Health Center	58,117	12%	235,402	50%	24,411	5%	140,253	30%	11,769	3%	469,952
The Ohio State University Medical Center	221,315	23%	131,176	14%	471,326	50%	73,471	8%	50,355	5%	947,643
Parkland Health & Hospital System	141,354	12%	334,609	28%	21,023	2%	641,785	55%	35,967	3%	1,174,738
Riverside County Regional Medical Center	36,387	7%	185,897	34%	39,400	7%	226,577	41%	57,889	11%	546,150
San Francisco General Hospital	125,243	17%	201,764	28%	11,232	2%	251,037	35%	134,901	19%	724,177
San Joaquin General Hospital	38,129	18%	101,863	47%	22,447	10%	53,805	25%	0	0%	216,244
San Mateo Medical Center	61,430	14%	144,865	34%	29,469	7%	186,431	44%	2,351	1%	424,546
Santa Clara Valley Health & Hospital System	85,706	10%	415,457	50%	115,449	14%	201,354	24%	5,666	1%	823,632
Shands HealthCare—Shands at the University of Florida and Shands AGH	228,936	28%	138,062	17%	331,471	41%	69,133	9%	38,755	5%	806,357
Shands HealthCare—Shands Jacksonville Medical Center	128,105	32%	94,323	23%	63,310	16%	86,803	22%	29,031	7%	401,572
Stony Brook University Hospital	66,771	24%	47,719	17%	119,480	44%	22,655	8%	16,463	6%	273,088
SUNY Downstate Medical Center	93,281	27%	117,674	34%	100,523	29%	31,411	9%	1,806	1%	344,695
Tampa General Hospital	48,386	19%	69,457	27%	52,177	20%	69,607	27%	17,765	7%	257,392
Truman Medical Centers	105,638	15%	225,050	31%	95,398	13%	279,489	39%	19,285	3%	724,860
UK HealthCare Hospital System	75,054	20%	67,319	18%	176,466	48%	34,672	9%	13,961	4%	367,472
UMass Memorial Medical Center	296,310	28%	163,047	15%	518,193	49%	75,368	7%	13,705	1%	1,066,623
UMDNJ—University Hospital	30,342	11%	76,613	29%	29,556	11%	125,231	47%	3,372	1%	265,114
University Health System at San Antonio	195,378	17%	140,653	12%	113,314	10%	649,378	56%	55,429	5%	1,154,152
University Hospital, The SUNY Upstate Medical University	122,338	30%	102,467	25%	116,922	29%	20,189	5%	40,211	10%	402,127
University Hospital, The University of New Mexico Health Sciences Center	138,354	13%	297,807	29%	263,174	25%	263,517	26%	69,306	7%	1,032,158
University Medical Center of El Paso	92,456	18%	118,851	23%	88,045	17%	225,779	43%	0	0%	525,131
University Medical Center of Southern Nevada	98,503	11%	141,655	15%	311,153	34%	321,610	35%	43,248	5%	916,169
University of California—Davis Medical Center	559,787	19%	242,358	8%	1,897,324	66%	145,928	5%	36,446	1%	2,881,843
University of California—Irvine Medical Center	123,177	28%	98,852	23%	172,545	39%	44,440	10%	0	0%	439,014
University of California—San Diego Medical Center	96,232	34%	70,740	25%	94,075	33%	24,965	9%	0	0%	286,012
University of Colorado Hospital Authority	188,175	29%	54,075	8%	323,170	49%	60,072	9%	28,110	4%	653,602
The University of Kansas Hospital	125,969	24%	39,874	8%	332,836	63%	23,464	4%	5,016	1%	527,159
University of South Alabama Medical Center	3,474	9%	6,181	17%	7,226	20%	18,151	50%	1,585	4%	36,617
The University of Texas Health Center at Tyler	76,998	47%	25,816	16%	41,594	25%	20,747	13%	342	0.2%	165,497
University of Utah Health Care	236,142	23%	135,548	13%	529,487	52%	76,100	7%	49,783	5%	1,027,060
Westchester Medical Center	30,069	18%	52,773	31%	57,058	34%	17,361	10%	10,896	6%	168,157
<b>Total</b>	<b>7,426,474</b>	<b>17%</b>	<b>11,979,466</b>	<b>27%</b>	<b>9,611,978</b>	<b>22%</b>	<b>13,045,175</b>	<b>30%</b>	<b>1,664,739</b>	<b>4%</b>	<b>43,727,832</b>
<b>Average</b>	<b>86,354</b>		<b>139,296</b>		<b>111,767</b>		<b>151,688</b>		<b>19,357</b>		<b>508,463</b>
<b>Count</b>											<b>86</b>

Note: Row percentages may not add up to 100% due to rounding.

\*Data for the three hospitals of the Cook County Health and Hospitals System has been consolidated because community clinic ambulatory care volumes are not associated with specific hospitals.

\*\*Uninsured visits are attributed to patients that are considered Self Pay, Charity Care, or covered by a State or Local Indigent Care Program.

\*\*\*Examples of Other payer sources include Workers' Compensation, Veterans' Care, and Prisoner Care.

Source: NAPH Hospital Characteristics Survey, 2008

# Appendix C

## Hospital-Specific Data on Utilization and Finances

**Table 5.** NAPH Member Hospitals and Health Systems—Gross Charges by Payer Source, 2008

Hospital Name	Medicare		Medicaid	
	Charges	Percent	Charges	Percent
Alameda County Medical Center	\$112,719,426	14%	\$410,340,855	52%
Arrowhead Regional Medical Center	\$121,720,488	11%	\$478,396,993	42%
Boston Medical Center	\$457,907,809	30%	\$460,046,660	30%
Broadlawns Medical Center	\$12,123,712	10%	\$19,374,985	16%
Broward Health—Broward General Medical Center	\$406,967,504	25%	\$404,756,821	25%
Broward Health—Coral Springs Medical Center	\$162,649,840	30%	\$68,123,515	13%
Broward Health—Imperial Point Medical Center	\$155,678,625	44%	\$29,086,042	8%
Broward Health—North Broward Medical Center	\$337,985,278	43%	\$88,536,155	11%
Cambridge Health Alliance	\$205,617,581	26%	\$264,672,502	33%
Contra Costa Regional Medical Center	\$80,378,725	18%	\$219,201,738	48%
Cook County HHS—Oak Forest Hospital	\$10,337,819	15%	\$29,944,321	44%
Cook County HHS—Provident Hospital of Cook County	\$7,590,970	9%	\$29,197,456	36%
Cook County HHS—The John H. Stroger, Jr. Hospital of Cook County	\$62,796,412	10%	\$168,579,226	27%
Cooper Green Mercy Hospital	\$16,754,409	18%	\$16,011,916	17%
Denver Health	\$137,988,871	13%	\$355,767,611	33%
Erlanger Health System	\$326,048,437	24%	\$329,480,099	24%
Grady Health System	\$210,346,013	17%	\$246,344,421	20%
Halifax Community Health System	\$545,066,439	48%	\$113,920,820	10%
Harborview Medical Center	\$329,540,000	27%	\$281,775,000	23%
Harris County Hospital District	\$186,128,428	10%	\$454,891,909	25%
The Health and Hospital Corporation of Marion County	\$148,207,111	20%	\$122,013,038	16%
Health Care District of Palm Beach County	\$26,541,663	24%	\$39,819,898	36%
Hennepin County Medical Center	\$245,991,984	23%	\$338,540,151	32%
Howard University Hospital	\$159,619,905	32%	\$196,960,897	40%
Hurley Medical Center	\$236,209,161	27%	\$303,965,616	35%
Jackson Memorial Hospital	\$612,334,000	16%	\$1,067,157,644	27%
JPS Health Network	\$226,992,000	15%	\$396,013,000	25%
LAC—Harbor/UCLA Medical Center	\$121,003,788	10%	\$681,496,092	56%
LAC—LAC+USC Medical Center	\$110,379,376	6%	\$1,003,053,436	57%
LAC—Olive View/UCLA Medical Center	\$29,509,133	4%	\$402,449,350	58%
Lee Memorial Health System	\$1,374,407,805	49%	\$334,251,304	12%
LSUHCS—Bogalusa Medical Center	\$21,179,066	28%	\$12,298,911	16%
LSUHCS—Earl K. Long Medical Center	\$16,280,569	10%	\$56,945,559	34%
LSUHCS—Lallie Kemp Regional Medical Center	\$7,429,583	17%	\$10,223,272	23%
LSUHCS—Leonard J. Chabert Medical Center	\$27,517,255	17%	\$55,621,844	34%
LSUHCS—Medical Center of Louisiana at New Orleans	\$41,849,111	10%	\$164,378,473	38%
LSUHCS—University Medical Center	\$25,370,725	16%	\$52,365,154	34%
LSUHCS—Walter O. Moss Regional Hospital	\$8,201,453	18%	\$11,282,385	25%
Maricopa Integrated Health System	\$207,828,704	16%	\$601,401,628	46%
Memorial Hospital at Gulfport	\$623,460,926	48%	\$181,785,456	14%
The MetroHealth System	\$291,509,000	24%	\$374,579,000	31%
MHS—Memorial Hospital Miramar	\$84,850,536	20%	\$49,165,657	12%
MHS—Memorial Hospital Pembroke	\$159,379,839	35%	\$49,364,512	11%
MHS—Memorial Hospital West	\$410,871,011	36%	\$127,043,948	11%
MHS—Memorial Regional Hospital	\$767,421,297	32%	\$436,307,288	18%
Nashville General Hospital at Meharry	\$21,048,969	12%	\$53,516,184	30%
Nassau University Medical Center	\$141,699,977	27%	\$208,705,311	39%
NYCHHC—Bellevue Hospital Center	\$157,277,339	17%	\$463,940,568	50%
NYCHHC—Coney Island Hospital	\$189,790,023	36%	\$222,706,950	42%
NYCHHC—Elmhurst Hospital Center	\$167,970,221	20%	\$405,760,536	48%

## Hospital-Specific Data on Utilization and Finances

Commercial		Uninsured*		Other**		Total
Charges	Percent	Charges	Percent	Charges	Percent	
\$36,201,543	5%	\$223,084,974	29%	\$0	0%	\$782,346,798
\$135,802,520	12%	\$365,526,497	32%	\$44,450,392	4%	\$1,145,896,890
\$364,036,226	24%	\$216,294,745	14%	\$21,082,930	1%	\$1,519,368,370
\$10,692,372	9%	\$76,013,047	64%	\$0	0%	\$118,204,116
\$407,697,557	25%	\$400,965,902	25%	\$0	0%	\$1,620,387,784
\$229,779,048	43%	\$75,616,682	14%	\$0	0%	\$536,169,085
\$117,165,037	33%	\$50,977,590	14%	\$0	0%	\$352,907,294
\$191,462,226	25%	\$163,366,865	21%	\$0	0%	\$781,350,524
\$194,267,867	25%	\$118,511,586	15%	\$8,656,238	1%	\$791,725,774
\$51,969,418	11%	\$100,007,492	22%	\$6,355,673	1%	\$457,913,046
\$1,178,916	2%	\$26,890,511	39%	\$0	0%	\$68,351,567
\$4,546,640	6%	\$39,477,691	49%	\$47,573	0.1%	\$80,860,330
\$32,324,269	5%	\$351,018,772	57%	\$0	0%	\$614,718,679
\$2,641,696	3%	\$55,586,616	60%	\$2,109,869	2%	\$93,104,506
\$233,348,729	22%	\$331,290,214	31%	\$26,758,200	2%	\$1,085,153,625
\$553,785,590	41%	\$137,792,241	10%	\$15,860,581	1%	\$1,362,966,948
\$202,477,426	16%	\$536,219,343	44%	\$36,225,367	3%	\$1,231,612,570
\$344,899,029	31%	\$109,047,410	10%	\$16,330,325	1%	\$1,129,264,023
\$447,286,000	37%	\$151,118,000	12%	\$0	0%	\$1,209,719,000
\$48,416,417	3%	\$1,137,022,916	61%	\$29,067,129	2%	\$1,855,526,799
\$68,685,645	9%	\$335,959,046	45%	\$66,437,049	9%	\$741,301,889
\$20,298,662	18%	\$17,116,362	15%	\$7,156,012	6%	\$110,932,597
\$207,308,555	20%	\$251,772,267	24%	\$17,150,544	2%	\$1,060,763,501
\$82,849,679	17%	\$53,153,765	11%	\$0	0%	\$492,584,246
\$231,196,784	26%	\$68,493,670	8%	\$35,153,539	4%	\$875,018,770
\$1,164,302,222	30%	\$945,155,125	24%	\$95,792,376	2%	\$3,884,741,367
\$141,050,000	9%	\$765,006,000	49%	\$32,586,000	2%	\$1,561,647,000
\$52,529,347	4%	\$333,756,824	28%	\$17,813,348	1%	\$1,206,599,399
\$56,681,894	3%	\$570,426,106	32%	\$30,070,866	2%	\$1,770,611,678
\$8,558,625	1%	\$225,222,300	32%	\$27,330,339	4%	\$693,069,747
\$870,838,095	31%	\$191,053,287	7%	\$51,974,597	2%	\$2,822,525,088
\$11,911,613	16%	\$29,379,579	39%	\$0	0%	\$74,769,169
\$7,015,475	4%	\$85,676,907	52%	\$0	0%	\$165,918,510
\$3,446,022	8%	\$23,050,035	52%	\$0	0%	\$44,148,912
\$13,309,963	8%	\$65,461,717	40%	\$0	0%	\$161,910,779
\$40,978,119	10%	\$180,533,761	42%	\$0	0%	\$427,739,464
\$8,955,936	6%	\$69,478,150	44%	\$0	0%	\$156,169,965
\$2,527,127	6%	\$23,491,510	52%	\$0	0%	\$45,502,475
\$153,322,694	12%	\$168,837,246	13%	\$184,684,466	14%	\$1,316,074,738
\$258,401,501	20%	\$152,327,685	12%	\$76,031,937	6%	\$1,292,007,505
\$360,298,000	30%	\$162,040,000	14%	\$9,010,000	1%	\$1,197,436,000
\$239,058,668	56%	\$46,371,862	11%	\$7,145,007	2%	\$426,591,730
\$155,898,812	34%	\$89,138,208	19%	\$5,013,784	1%	\$458,795,155
\$481,656,165	42%	\$113,372,710	10%	\$11,051,446	1%	\$1,143,995,280
\$780,844,122	33%	\$365,866,897	15%	\$24,989,347	1%	\$2,375,428,951
\$9,926,328	6%	\$61,459,608	35%	\$31,114,291	18%	\$177,065,380
\$78,756,336	15%	\$51,443,070	10%	\$51,616,674	10%	\$532,221,368
\$57,793,709	6%	\$154,429,947	17%	\$87,694,622	10%	\$921,136,185
\$45,504,010	9%	\$66,875,564	13%	\$5,050,652	1%	\$529,927,199
\$114,478,180	14%	\$114,679,988	14%	\$43,157,024	5%	\$846,045,949

# Appendix C

## Hospital-Specific Data on Utilization and Finances

**Table 5.** NAPH Member Hospitals and Health Systems—Gross Charges by Payer Source, 2008 (continued)

Hospital Name	Medicare		Medicaid	
	Charges	Percent	Charges	Percent
NYCHHC—Harlem Hospital Center	\$87,976,859	23%	\$204,779,619	53%
NYCHHC—Jacobi Medical Center	\$152,088,938	20%	\$468,510,937	60%
NYCHHC—Kings County Hospital Center	\$136,929,509	15%	\$528,313,550	59%
NYCHHC—Lincoln Medical and Mental Health Center	\$104,405,930	17%	\$334,111,981	56%
NYCHHC—Metropolitan Hospital Center	\$81,716,043	19%	\$225,157,229	52%
NYCHHC—North Central Bronx Hospital	\$44,144,063	15%	\$172,363,078	60%
NYCHHC—Queens Hospital Center	\$72,968,769	19%	\$205,996,495	54%
NYCHHC—Woodhull Medical and Mental Health Center	\$70,909,024	13%	\$331,685,915	59%
The Ohio State University Medical Center	\$1,289,645,113	30%	\$243,694,693	6%
Parkland Health & Hospital System	\$305,356,960	14%	\$647,250,853	31%
Riverside County Regional Medical Center	\$129,851,620	11%	\$466,637,235	39%
San Francisco General Hospital	\$259,291,117	20%	\$576,046,354	45%
San Joaquin General Hospital	\$54,183,006	17%	\$162,036,395	49%
San Mateo Medical Center	\$56,581,927	17%	\$155,818,027	48%
Santa Clara Valley Health & Hospital System	\$347,052,339	16%	\$1,007,815,257	47%
Shands HealthCare—Shands at the University of Florida and Shands AGH	\$747,488,927	35%	\$365,813,491	17%
Shands HealthCare—Shands Jacksonville Medical Center	\$604,439,818	37%	\$357,770,293	22%
Stony Brook University Hospital	\$653,292,987	37%	\$297,077,068	17%
SUNY Downstate Medical Center	\$268,769,533	35%	\$282,440,637	37%
Tampa General Hospital	\$1,067,443,092	34%	\$476,495,782	15%
Truman Medical Centers	\$92,854,999	19%	\$196,621,621	40%
UK HealthCare Hospital System	\$463,325,705	31%	\$318,341,404	21%
UMass Memorial Medical Center	\$917,468,660	33%	\$433,306,651	16%
UMDNJ—University Hospital	\$394,942,000	20%	\$547,486,000	28%
University Health System at San Antonio	\$207,688,229	19%	\$218,335,988	20%
University Hospital, The SUNY Upstate Medical University	\$255,545,412	33%	\$156,437,192	20%
University Hospital, The University of New Mexico Health Sciences Center	\$151,037,829	15%	\$289,885,686	29%
University Medical Center of El Paso	\$97,586,347	17%	\$142,800,456	25%
University Medical Center of Southern Nevada	\$367,106,340	19%	\$391,121,843	20%
University of California—Davis Medical Center	\$1,156,839,612	27%	\$1,069,379,208	25%
University of California—Irvine Medical Center	\$573,472,219	28%	\$590,612,385	29%
University of California—San Diego Medical Center	\$500,277,000	28%	\$407,716,000	23%
University of Colorado Hospital Authority	\$612,563,646	31%	\$250,974,189	13%
The University of Kansas Hospital	\$677,517,852	35%	\$243,422,930	13%
University of South Alabama Medical Center	\$39,333,773	19%	\$32,892,340	16%
The University of Texas Health Center at Tyler	\$78,664,553	56%	\$19,489,163	14%
University of Utah Health Care	\$356,198,637	30%	\$139,734,381	12%
VCU Health System	\$571,679,642	28%	\$345,700,865	17%
Westchester Medical Center	\$622,961,221	30%	\$525,142,908	25%
<b>Total</b>	<b>\$25,220,077,566</b>	<b>25%</b>	<b>\$26,720,778,206</b>	<b>27%</b>
<b>Average</b>	<b>\$283,371,658</b>		<b>\$300,233,463</b>	
<b>Count</b>				

## Hospital-Specific Data on Utilization and Finances

Commercial		Uninsured*		Other**		Total
Charges	Percent	Charges	Percent	Charges	Percent	
\$24,302,026	6%	\$61,236,958	16%	\$8,282,322	2%	\$386,577,784
\$83,699,792	11%	\$52,942,459	7%	\$19,710,779	3%	\$776,952,905
\$69,533,980	8%	\$147,231,513	17%	\$7,922,334	1%	\$889,930,886
\$46,727,408	8%	\$98,391,155	16%	\$15,223,907	3%	\$598,860,381
\$30,197,770	7%	\$93,453,637	21%	\$5,482,486	1%	\$436,007,165
\$22,214,796	8%	\$49,559,696	17%	\$1,096,777	0.4%	\$289,378,410
\$54,954,356	14%	\$48,131,230	13%	\$480,013	0.1%	\$382,530,863
\$46,528,865	8%	\$103,221,427	19%	\$5,193,807	1%	\$557,539,038
\$2,253,685,461	52%	\$282,634,086	7%	\$259,870,832	6%	\$4,329,530,185
\$134,876,668	6%	\$965,529,334	46%	\$54,808,351	3%	\$2,107,822,166
\$101,426,356	8%	\$322,952,713	27%	\$188,122,538	16%	\$1,208,990,462
\$78,795,451	6%	\$140,156,396	11%	\$232,662,308	18%	\$1,286,951,626
\$34,499,827	11%	\$76,674,156	23%	\$0	0%	\$327,393,384
\$15,500,824	5%	\$98,607,936	30%	\$329,841	0.1%	\$326,838,555
\$315,139,815	15%	\$430,813,993	20%	\$40,541,073	2%	\$2,141,362,477
\$753,717,575	35%	\$191,884,827	9%	\$95,592,352	4%	\$2,154,497,172
\$261,926,326	16%	\$306,977,100	19%	\$93,733,942	6%	\$1,624,847,479
\$618,307,294	35%	\$97,533,234	6%	\$92,391,697	5%	\$1,758,602,280
\$163,596,455	21%	\$47,665,389	6%	\$3,019,441	0.1%	\$765,491,455
\$818,770,520	26%	\$586,782,451	18%	\$226,696,408	7%	\$3,176,188,253
\$56,981,625	12%	\$129,621,679	27%	\$11,141,978	2%	\$487,221,902
\$541,648,486	36%	\$152,404,245	10%	\$40,940,180	3%	\$1,516,660,020
\$1,151,413,146	42%	\$235,174,912	9%	\$20,678,793	1%	\$2,758,042,162
\$405,109,000	21%	\$582,403,000	30%	\$23,188,000	1%	\$1,953,128,000
\$151,343,766	14%	\$463,492,020	43%	\$47,506,068	4%	\$1,088,366,071
\$248,044,070	32%	\$23,695,743	3%	\$93,620,191	12%	\$777,342,608
\$238,562,884	24%	\$236,776,964	24%	\$68,130,350	7%	\$984,393,713
\$82,823,758	14%	\$248,152,081	43%	\$0	0%	\$571,362,642
\$475,158,631	24%	\$628,186,953	32%	\$95,235,786	5%	\$1,956,809,553
\$1,578,401,114	37%	\$401,076,674	9%	\$80,005,793	2%	\$4,285,702,401
\$653,608,051	32%	\$237,038,918	12%	\$0	0%	\$2,054,731,573
\$723,704,000	40%	\$165,146,000	9%	\$0	0%	\$1,796,843,000
\$855,882,871	43%	\$194,274,638	10%	\$64,099,455	3%	\$1,977,794,799
\$827,331,439	43%	\$101,179,793	5%	\$63,339,743	3%	\$1,912,791,757
\$55,155,963	26%	\$65,032,293	31%	\$15,950,597	8%	\$208,364,966
\$29,344,237	21%	\$13,062,308	9%	\$533,994	0.4%	\$141,094,255
\$553,377,331	47%	\$53,152,561	5%	\$69,027,794	6%	\$1,171,490,704
\$611,687,831	30%	\$386,794,700	19%	\$121,894,874	6%	\$2,037,757,912
\$683,174,671	33%	\$65,854,522	3%	\$184,549,506	9%	\$2,081,682,828
<b>\$25,189,515,253</b>	<b>25%</b>	<b>\$19,031,757,984</b>	<b>19%</b>	<b>\$3,475,972,507</b>	<b>4%</b>	<b>\$99,638,101,516</b>
<b>\$283,028,261</b>		<b>\$213,839,977</b>		<b>\$39,055,871</b>		<b>\$1,119,529,231</b>

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Note: Row percentages may not add up to 100% due to rounding.

\*Uninsured charges are attributed to patients that are considered Self Pay, Charity Care, or covered by a State or Local Indigent Care Program.

\*\*Examples of Other payer sources include Workers' Compensation, Veterans' Care, and Prisoner Care.

Source: NAPH Hospital Characteristics Survey, 2008

# Appendix C

## Hospital-Specific Data on Utilization and Finances

**Table 6.** NAPH Member Hospitals and Health Systems—Net Revenues by Payer Source, 2008

Hospital Name	Medicare		Medicaid*	
	Revenues	Percent	Revenues	Percent
Alameda County Medical Center	\$37,425,748	9%	\$168,830,116	40%
Arrowhead Regional Medical Center	\$31,928,998	8%	\$195,058,547	49%
Boston Medical Center	\$229,483,558	22%	\$263,013,669	25%
Broadlawns Medical Center	\$6,857,234	8%	\$12,112,382	14%
Broward Health—Broward General Medical Center	\$103,382,889	24%	\$120,519,042	28%
Broward Health—Coral Springs Medical Center	\$36,210,681	28%	\$15,883,434	12%
Broward Health—Imperial Point Medical Center	\$37,584,422	40%	\$11,317,649	12%
Broward Health—North Broward Medical Center	\$77,593,155	38%	\$25,453,074	12%
Cambridge Health Alliance	\$95,038,683	26%	\$136,908,637	37%
Contra Costa Regional Medical Center	\$38,102,168	14%	\$155,721,007	56%
Cook County HHS—Oak Forest Hospital	\$3,755,597	4%	\$52,907,012	51%
Cook County HHS—Provident Hospital of Cook County	\$4,840,183	5%	\$39,357,498	39%
Cook County HHS—The John H. Stroger, Jr. Hospital of Cook County	\$42,473,644	7%	\$231,595,072	37%
Cooper Green Mercy Hospital	\$10,268,227	14%	\$13,237,291	18%
Denver Health	\$54,249,753	11%	\$264,545,329	53%
Erlanger Health System	\$92,196,551	21%	\$97,334,276	22%
Grady Health System	\$104,457,830	17%	\$218,362,163	37%
Halifax Community Health System	\$170,486,816	45%	\$48,180,775	13%
Harborview Medical Center	\$141,004,000	24%	\$143,826,000	24%
Harris County Hospital District	\$55,328,131	6%	\$279,182,944	31%
The Health and Hospital Corporation of Marion County	\$69,068,059	18%	\$158,266,853	41%
Health Care District of Palm Beach County	\$4,968,140	14%	\$16,857,094	46%
Hennepin County Medical Center	\$103,932,327	19%	\$187,034,946	35%
Howard University Hospital	\$79,704,270	28%	\$118,465,949	42%
Hurley Medical Center	\$74,468,624	25%	\$137,919,466	46%
Jackson Memorial Hospital	\$217,406,258	14%	\$187,609,630	12%
JPS Health Network	\$68,425,000	12%	\$175,255,000	31%
LAC—Harbor/UCLA Medical Center	\$51,874,716	9%	\$239,476,282	42%
LAC—LAC+USC Medical Center	\$32,461,749	3%	\$516,270,658	45%
LAC—Olive View/UCLA Medical Center	\$15,851,155	4%	\$181,260,094	49%
Lee Memorial Health System	\$333,242,687	40%	\$88,198,622	11%
LSUHCS—Bogalusa Medical Center	\$7,455,085	29%	\$7,719,770	30%
LSUHCS—Earl K. Long Medical Center	\$13,888,786	20%	\$19,510,054	29%
LSUHCS—Lallie Kemp Regional Medical Center	\$4,084,587	22%	\$6,866,478	37%
LSUHCS—Leonard J. Chabert Medical Center	\$10,861,666	24%	\$25,705,189	56%
LSUHCS—Medical Center of Louisiana at New Orleans	\$28,767,843	25%	\$7,202,075	6%
LSUHCS—University Medical Center	\$11,796,246	22%	\$31,555,367	59%
LSUHCS—Walter O. Moss Regional Hospital	\$3,149,437	14%	\$12,487,389	54%
Maricopa Integrated Health System	\$61,277,119	16%	\$169,258,455	45%
Memorial Hospital at Gulfport	\$126,111,915	33%	\$70,992,095	19%
The MetroHealth System	\$148,817,000	28%	\$167,595,000	32%
MHS—Memorial Hospital Miramar	\$16,839,390	14%	\$15,518,844	13%
MHS—Memorial Hospital Pembroke	\$27,984,297	27%	\$13,142,411	13%
MHS—Memorial Hospital West	\$83,770,024	27%	\$30,252,551	10%
MHS—Memorial Regional Hospital	\$194,377,449	29%	\$130,625,791	19%
Nashville General Hospital at Meharry	\$10,759,471	13%	\$22,569,101	27%
Nassau University Medical Center	\$70,716,440	21%	\$160,713,883	49%
NYCHHC—Bellevue Hospital Center ****	\$93,572,796	18%	\$383,252,831	73%
NYCHHC—Coney Island Hospital ****	\$127,412,635	20%	\$491,835,202	77%
NYCHHC—Elmhurst Hospital Center ****	\$67,511,940	17%	\$272,857,932	70%
NYCHHC—Harlem Hospital Center ****	\$45,864,306	16%	\$218,505,099	78%
NYCHHC—Jacobi Medical Center ****	\$122,792,062	26%	\$304,665,234	65%

## Hospital-Specific Data on Utilization and Finances

Commercial		Uninsured**		Other***		State/Local Payments		Total
Revenues	Percent	Revenues	Percent	Revenues	Percent	Revenues	Percent	
\$21,509,514	5%	\$1,438,296	0.3%	\$0	0%	\$197,343,752	46%	\$426,547,426
\$63,910,972	16%	\$25,367,688	6%	\$15,558,209	4%	\$67,128,017	17%	\$398,952,431
\$147,579,290	14%	\$170,688,975	16%	\$10,531,883	1%	\$216,744,673	21%	\$1,038,042,048
\$5,224,978	6%	\$12,998,545	15%	\$0	0%	\$49,140,388	57%	\$86,333,527
\$135,214,503	31%	\$4,336,253	1%	\$0	0%	\$71,402,517	16%	\$434,855,204
\$63,683,034	49%	\$1,757,815	1%	\$0	0%	\$13,043,365	10%	\$130,578,329
\$35,797,545	38%	\$1,341,481	1%	\$0	0%	\$8,812,265	9%	\$94,853,362
\$64,381,354	31%	\$5,159,616	3%	\$0	0%	\$33,396,962	16%	\$205,984,161
\$65,839,225	18%	\$61,439,134	17%	\$3,862,966	1%	\$6,000,000	2%	\$369,088,645
\$26,222,438	9%	\$1,490,601	1%	\$354,515	0.1%	\$56,479,229	20%	\$278,369,958
\$459,608	0.4%	\$219,114	0.2%	\$0	0%	\$47,073,450	45%	\$104,414,781
\$3,979,273	4%	\$228,427	0.2%	\$54,292	0.1%	\$51,334,419	51%	\$99,794,092
\$8,769,859	1%	\$2,391,212	0.4%	\$0	0%	\$333,900,034	54%	\$619,129,821
\$2,314,228	3%	\$1,306,549	2%	\$154,174	0.2%	\$47,150,004	63%	\$74,430,473
\$131,637,234	26%	\$15,766,207	3%	\$8,562,391	2%	\$27,542,700	5%	\$502,303,614
\$240,118,996	54%	\$4,599,623	1%	\$7,072,227	2%	\$2,975,000	1%	\$444,296,673
\$80,878,752	14%	\$18,458,878	3%	\$12,627,150	2%	\$163,421,043	27%	\$598,205,816
\$152,026,945	40%	\$2,312,841	1%	\$5,932,130	2%	\$0	0%	\$378,939,507
\$295,671,000	49%	\$9,590,000	2%	\$0	0%	\$7,740,000	1%	\$597,831,000
\$29,542,563	3%	\$56,253,745	6%	\$9,200,409	1%	\$480,544,545	53%	\$910,052,337
\$49,881,499	13%	\$1,778,760	0.5%	\$61,304,489	16%	\$47,900,000	12%	\$388,199,660
\$7,703,858	21%	\$1,192,133	3%	\$5,880,712	16%	\$18,750	0.1%	\$36,620,687
\$113,272,153	21%	\$91,479,654	17%	\$10,531,357	2%	\$28,995,000	5%	\$535,245,437
\$41,369,986	15%	\$16,043,188	6%	\$0	0%	\$29,075,089	10%	\$284,658,482
\$72,888,394	24%	\$10,185,300	3%	\$6,187,376	2%	\$0	0%	\$301,649,160
\$470,058,838	30%	\$184,734,486	12%	\$74,067,095	5%	\$410,468,578	27%	\$1,544,344,885
\$51,041,000	9%	\$14,002,000	2%	\$3,323,000	1%	\$257,960,000	45%	\$570,006,000
\$27,434,496	5%	\$6,193,230	1%	\$13,859,614	2%	\$231,204,729	41%	\$570,043,067
\$28,791,821	3%	\$7,291,309	1%	\$35,864,592	3%	\$524,987,394	46%	\$1,145,667,523
\$8,558,948	2%	\$2,167,958	1%	\$14,252,991	4%	\$147,337,707	40%	\$369,428,853
\$384,377,706	46%	\$6,841,746	1%	\$19,775,336	2%	\$0	0%	\$832,436,097
\$4,635,065	18%	\$560,418	2%	\$0	0%	\$5,417,408	21%	\$25,787,746
\$2,330,997	3%	\$1,017,101	1%	\$0	0%	\$31,564,921	46%	\$68,311,859
\$1,688,701	9%	\$371,293	2%	\$0	0%	\$5,458,028	30%	\$18,469,087
\$4,135,150	9%	\$713,440	2%	\$0	0%	\$4,326,712	9%	\$45,742,157
\$17,713,044	15%	\$1,337,114	1%	\$0	0%	\$61,080,102	53%	\$116,100,178
\$2,710,882	5%	\$677,017	1%	\$0	0%	\$6,389,148	12%	\$53,128,660
\$674,642	3%	\$367,675	2%	\$0	0%	\$6,505,769	28%	\$23,184,912
\$74,322,316	20%	\$8,571,696	2%	\$60,868,875	16%	\$2,668,146	1%	\$376,966,607
\$102,382,114	27%	\$35,433,476	9%	\$43,215,981	11%	\$0	0%	\$378,135,581
\$165,777,000	31%	\$2,954,000	1%	\$1,972,000	0.4%	\$39,523,000	8%	\$526,638,000
\$79,724,232	67%	\$3,602,028	3%	\$2,524,001	2%	\$1,128,978	1%	\$119,337,473
\$56,148,306	54%	\$1,752,804	2%	\$2,123,801	2%	\$3,565,656	3%	\$104,717,275
\$178,610,426	58%	\$8,357,620	3%	\$3,435,724	1%	\$3,982,862	1%	\$308,409,207
\$280,139,279	41%	\$15,840,314	2%	\$11,334,284	2%	\$44,486,686	7%	\$676,803,803
\$5,161,318	6%	\$1,927,988	2%	\$9,242,765	11%	\$34,926,983	41%	\$84,587,626
\$21,319,440	6%	\$42,986,674	13%	\$33,364,515	10%	\$0	0%	\$329,100,952
\$12,994,515	2%	\$5,524,000	1%	\$31,951,599	6%	(\$104,470)	-0.02%	\$527,191,271
\$22,237,829	3%	\$1,509,000	0.2%	\$8,894,552	1%	(\$8,990,917)	-1%	\$642,898,301
\$66,485,071	17%	\$2,961,000	1%	(\$8,238,778)	-2%	(\$11,494,874)	-3%	\$390,082,291
\$9,014,243	3%	\$1,216,000	0.4%	\$5,674,506	2%	(\$1,209,536)	-0.4%	\$279,064,618
\$32,606,341	7%	\$1,770,000	0.4%	\$3,089,799	1%	\$567,066	0.1%	\$465,490,502

# Appendix C

## Hospital-Specific Data on Utilization and Finances

**Table 6.** NAPH Member Hospitals and Health Systems—Net Revenues by Payer Source, 2008 (continued)

Hospital Name	Medicare		Medicaid*	
	Revenues	Percent	Revenues	Percent
NYCHHC—Kings County Hospital Center ****	\$99,385,553	20%	\$387,442,343	78%
NYCHHC—Lincoln Medical and Mental Health Center ****	\$97,162,974	25%	\$276,415,813	72%
NYCHHC—Metropolitan Hospital Center ****	\$41,781,265	16%	\$207,449,622	77%
NYCHHC—North Central Bronx Hospital ****	\$30,393,893	21%	\$114,756,433	80%
NYCHHC—Queens Hospital Center ****	\$42,174,234	21%	\$134,252,000	67%
NYCHHC—Woodhull Medical and Mental Health Center ****	\$56,946,485	16%	\$256,032,869	74%
The Ohio State University Medical Center	\$298,664,609	22%	\$34,918,014	3%
Parkland Health & Hospital System	\$111,659,603	12%	\$305,145,909	32%
Riverside County Regional Medical Center	\$26,171,135	8%	\$163,475,303	49%
San Francisco General Hospital	\$58,950,209	12%	\$162,313,354	32%
San Joaquin General Hospital	\$25,160,353	14%	\$96,427,935	55%
San Mateo Medical Center	\$19,293,476	13%	\$87,698,606	61%
Santa Clara Valley Health & Hospital System	\$117,258,536	14%	\$414,710,896	48%
Shands HealthCare—Shands at the University of Florida and Shands AGH	\$270,484,098	32%	\$176,690,921	21%
Shands HealthCare—Shands Jacksonville Medical Center	\$191,793,121	39%	\$167,737,084	34%
Stony Brook University Hospital	\$217,063,990	31%	\$168,652,016	24%
SUNY Downstate Medical Center	\$138,678,312	34%	\$185,820,173	46%
Tampa General Hospital	\$120,040,456	16%	\$98,408,640	13%
Truman Medical Centers	\$51,067,859	15%	\$213,475,282	61%
UK HealthCare Hospital System	\$195,556,813	30%	\$146,026,994	22%
UMass Memorial Medical Center	\$325,085,641	28%	\$304,544,000	26%
UMDNJ—University Hospital	\$94,888,000	18%	\$92,437,000	17%
University Health System at San Antonio	\$97,971,711	17%	\$134,633,388	24%
University Hospital, The SUNY Upstate Medical University	\$112,078,759	29%	\$120,959,989	31%
University Hospital, The University of New Mexico Health Sciences Center	\$73,128,794	14%	\$202,606,712	39%
University Medical Center of El Paso	\$33,059,942	14%	\$88,465,376	37%
University Medical Center of Southern Nevada	\$79,552,352	15%	\$199,130,725	36%
University of California—Davis Medical Center	\$236,323,534	22%	\$270,667,150	25%
University of California—Irvine Medical Center	\$129,579,758	25%	\$118,696,163	23%
University of California—San Diego Medical Center	\$172,092,000	24%	\$175,209,000	25%
University of Colorado Hospital Authority	\$150,159,960	24%	\$72,459,403	12%
The University of Kansas Hospital	\$168,304,329	26%	\$89,977,792	14%
University of South Alabama Medical Center	\$29,696,377	26%	\$15,901,044	14%
The University of Texas Health Center at Tyler	\$17,148,460	23%	\$5,605,435	8%
University of Utah Health Care	\$197,402,653	26%	\$137,165,825	18%
VCU Health System	\$210,055,553	24%	\$269,567,721	31%
Westchester Medical Center	\$210,518,998	26%	\$172,879,701	22%
<b>Total</b>	<b>\$8,248,615,542</b>	<b>21%</b>	<b>\$13,331,547,893</b>	<b>33%</b>
<b>Average</b>	<b>\$92,681,074</b>		<b>\$149,792,673</b>	
<b>Count</b>				



## Hospital-Specific Data on Utilization and Finances

Commercial		Uninsured**		Other***		State/Local Payments		Total
Revenues	Percent	Revenues	Percent	Revenues	Percent	Revenues	Percent	
\$34,707,933	7%	\$1,944,000	0.4%	(\$11,449,753)	-2%	(\$17,092,379)	-3%	\$494,937,697
\$32,630,180	9%	\$1,649,000	0.4%	(\$13,436,381)	-4%	(\$11,156,354)	-3%	\$383,265,232
\$12,186,597	5%	\$1,267,000	0.5%	\$5,356,906	2%	(\$1,933)	-0.001%	\$268,039,457
\$1,359,264	1%	\$443,000	0.3%	\$1,430,387	1%	(\$4,762,851)	-3%	\$143,620,126
\$29,388,587	15%	\$2,467,000	1%	\$430,076	0.2%	(\$8,216,702)	-4%	\$200,495,195
\$20,880,274	6%	\$4,281,000	1%	\$18,763,509	5%	(\$10,891,836)	-3%	\$346,012,301
\$900,428,075	66%	\$44,967,207	3%	\$86,202,479	6%	\$0	0%	\$1,365,180,384
\$79,017,392	8%	\$48,648,866	5%	\$15,395,024	2%	\$401,997,991	42%	\$961,864,785
\$39,678,880	12%	\$4,387,124	1%	\$44,987,289	13%	\$55,389,348	17%	\$334,089,079
\$59,864,089	12%	\$1,578,490	0.3%	\$17,090,863	3%	\$201,616,132	40%	\$501,413,137
\$10,842,675	6%	\$6,386,013	4%	\$0	0%	\$36,920,047	21%	\$175,737,023
\$5,043,968	4%	\$16,692,314	12%	\$214,397	0.1%	\$15,151,701	11%	\$144,094,462
\$171,938,046	20%	\$19,956,701	2%	\$5,833,047	1%	\$133,963,664	16%	\$863,660,890
\$357,059,308	43%	\$0	0%	\$35,104,155	4%	\$0	0%	\$839,338,482
\$95,684,363	20%	\$3,354,418	1%	\$28,615,586	6%	\$0	0%	\$487,184,572
\$266,424,934	38%	\$23,585,550	3%	\$20,047,801	3%	\$0	0%	\$695,774,291
\$50,370,125	12%	\$31,301,698	8%	\$1,987,443	0%	\$0	0%	\$408,157,751
\$195,757,426	26%	\$176,000,002	24%	\$155,360,211	21%	\$0	0%	\$745,566,735
\$24,911,286	7%	\$16,927,692	5%	\$5,436,042	2%	\$37,858,182	11%	\$349,676,343
\$289,822,585	44%	\$1,484,876	0.2%	\$20,200,693	3%	\$1,053,000	0.2%	\$654,144,961
\$467,719,403	41%	\$44,695,482	4%	\$9,170,230	1%	\$0	0%	\$1,151,214,756
\$126,851,000	23%	\$125,753,000	23%	\$9,660,000	2%	\$90,220,000	17%	\$539,809,000
\$58,165,812	10%	\$36,022,271	6%	\$10,134,593	2%	\$233,129,860	41%	\$570,057,635
\$113,938,005	29%	\$5,613,955	1%	\$36,852,326	9%	\$0	0%	\$389,443,034
\$140,793,106	27%	\$7,382,126	1%	\$22,342,879	4%	\$79,641,024	15%	\$525,894,641
\$26,817,596	11%	\$36,079,040	15%	\$0	0%	\$54,801,129	23%	\$239,223,083
\$119,750,314	22%	\$86,334,028	16%	\$17,087,126	3%	\$45,800,000	8%	\$547,654,545
\$502,123,639	47%	\$53,034,754	5%	\$14,214,292	1%	\$0	0%	\$1,076,363,369
\$224,065,906	44%	\$30,487,535	6%	\$0	0%	\$12,076,641	2%	\$514,906,003
\$333,870,000	47%	\$21,108,000	3%	\$0	0%	\$8,318,000	1%	\$710,597,000
\$357,584,405	58%	\$19,249,228	3%	\$14,047,566	2%	\$0	0%	\$613,500,562
\$352,657,107	56%	\$4,564,628	1%	\$19,817,653	3%	\$0	0%	\$635,321,509
\$30,890,166	27%	\$3,120,667	3%	\$3,318,984	3%	\$29,695,369	26%	\$112,622,607
\$9,946,226	13%	\$1,392,110	2%	\$152,219	0.2%	\$40,449,460	54%	\$74,693,910
\$379,433,813	49%	\$14,770,885	2%	\$40,216,823	5%	\$4,941,500	1%	\$773,931,499
\$289,562,787	34%	\$26,004,980	3%	\$65,859,536	8%	\$0	0%	\$861,050,577
\$246,350,592	31%	\$9,451,522	1%	\$77,739,594	10%	\$80,581,704	10%	\$797,522,111
<b>\$10,429,466,785</b>	<b>26%</b>	<b>\$1,810,891,584</b>	<b>4%</b>	<b>\$1,306,549,127</b>	<b>3%</b>	<b>\$5,300,393,975</b>	<b>13%</b>	<b>\$40,427,509,906</b>
<b>\$117,185,020</b>		<b>\$20,347,096</b>		<b>\$14,680,833</b>		<b>\$59,554,988</b>		<b>\$454,241,684</b>

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Note: Row percentages may not add up to 100% due to rounding.

\*Medicaid Net Revenues include base Medicaid payments, net Medicaid DSH payments, and net supplemental Medicaid payments.

Intergovernmental Transfers and Provider Taxes related to base Medicaid payments are excluded.

\*\*Uninsured revenue are attributed to patients that are considered Self Pay, Charity Care, or covered by a State or Local Indigent Care Program.

\*\*\*Examples of Other payer sources include Workers' Compensation, Veterans' Care, and Prisoner Care.

\*\*\*\*New York City subsidy for FY2008 was pre-paid in prior years resulting in negative tax levies being reported as State/Local Payments for some NYCHHC hospitals.

Source: NAPH Hospital Characteristics Survey, 2008

## Notes

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1. U.S. Census Bureau, Income, Poverty, and Health Insurance Coverage in the United States: 2008. Data released August 2009. Table 6. People With or Without Health Insurance Coverage by Selected Characteristics: 2007 and 2008.
  2. National figure is reported in AHA Uncompensated Hospital Care Cost Fact Sheet, November 2009.
  3. National uncompensated care provided in 2009 totaled \$36.4 billion, Uncompensated Hospital Care Cost Fact Sheet, November 2009.
  4. L.E. Felland, S. Felt-Lisk, M. McHugh, "Health Care Access For Low-income People: Significant Safety Net Gaps Remain." Issue Brief No. 84, (Washington, DC: Center for Studying Health System Change, June 2004); M. Regenstein, L. Nolan, M. Wilson, H. Mead, B. Siegel, Walking a Tightrope: The State of the Safety Net in 10 U.S. Communities, (Washington, DC: Urgent Matters, The George Washington University Medical Center, 2004); J. Graham, "Needy Patients Find Door Shut When Searching for Specialist," Chicago Tribune, May 23, 2005.
  5. The AHA survey collects data on inpatient admissions, while the NAPH survey collects discharge data.
  6. The analysis is based on the 10 largest cities base on data presented in US Census Bureau: Table 1: Annual Estimates of the Population for Incorporated Places >100,000 (July 1, 2009). These cities include New York City, Los Angeles, Chicago, Houston, Phoenix, Philadelphia, San Antonio, San Diego, Dallas, and San Jose.
  7. Metropolitan Medical Response System [www.fema.gov/mmrs/](http://www.fema.gov/mmrs/). Last accessed September 23, 2008.
  8. S. Siegel-Spieler, M. Ptacek Singer, L. Cummings, Emergency Preparedness in Public Hospitals: Complete Findings of the 2006–2007 Emergency Preparedness Study, (Washington, DC: National Association of Public Hospitals and Health Systems, June 2008).
  9. ACGME designates a hospital as a teaching hospital if it meets at least one of the following criteria: reports a medical school affiliation to the American Medical Association; supports a residency program accredited by the Accreditation Council of Graduate Medical Education; supports an internship program approved by the American Osteopathic Association (AOA); or supports a residency program approved by the AOA.
  10. Using ACGME definitions, all members of the COTH are considered academic medical center hospitals. COTH membership is limited to organizations having a documented affiliation agreement with a medical school accredited by the Liaison Committee on Medical Education (LCME). These organizations must sponsor, or participate significantly in, at least four approved, active residency programs. At least two of the approved residency programs should be in medicine, surgery, obstetrics/ gynecology, pediatrics, family practice, or psychiatry. For additional information, please refer to [www.aamc.org/members/coth/membercriteria.htm](http://www.aamc.org/members/coth/membercriteria.htm).
  11. Safety Net Health Systems: An Essential Resource During the Economic Recession, (Washington, DC: National Association of Public Hospitals and Health Systems, May 2009).
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# NAPH Members

**Alameda County Medical Center** Oakland CA

**Arrowhead Regional Medical Center** Colton CA

**Boston Medical Center** Boston MA

**Broadlawns Medical Center** Des Moines IA

**Broward Health** Fort Lauderdale FL

**Broward General Medical Center** Fort Lauderdale FL

**Broward Health Coral Springs Medical Center**  
Coral Springs FL

**Broward Health Imperial Point Medical Center**  
Imperial Point FL

**Broward Health North Broward Medical Center**  
Deerfield Beach FL

**Cambridge Health Alliance** Cambridge MA

**Carolinas HealthCare System** Charlotte NC

**Central Georgia Health System Inc.** Macon GA

**Community Health Network of San Francisco**  
San Francisco CA

**Laguna Honda Hospital & Rehabilitation Center**  
San Francisco CA

**San Francisco General Hospital Medical Center**  
San Francisco CA

**Contra Costa Regional Medical Center** Martinez CA

**Cook County Health and Hospitals System** Chicago IL

**The John H. Stroger, Jr. Hospital of Cook County**  
Chicago IL

**Oak Forest Hospital** Oak Forest IL

**Provident Hospital of Cook County** Chicago IL

**Cooper Green Mercy Hospital** Birmingham AL

**Denver Health** Denver CO

**Erlanger Health System** Chattanooga TN

**Grady Health System** Atlanta GA

**Halifax Health** Daytona Beach FL

**Harborview Medical Center** Seattle WA

**Harris County Hospital District** Houston TX

**Ben Taub General Hospital** Houston TX

**Lyndon Baines Johnson General Hospital** Houston TX

**Health Care District of Palm Beach County**  
West Palm Beach FL

**Glades General Hospital** Belle Glade FL

**The Health and Hospital Corporation of  
Marion County** Indianapolis IN

**Wishard Health Services** Indianapolis IN

**Hennepin County Medical Center** Minneapolis MN

**Howard University Hospital** Washington DC

**Hurley Medical Center** Flint MI

**Jackson Health System** Miami FL

**JPS Health Network** Fort Worth TX

**Kern Medical Center** Bakersfield CA

**Lee Memorial Health System** Fort Myers FL

**Los Angeles County Department of Health  
Services** Los Angeles CA

**Harbor/UCLA Medical Center** Torrance CA

**Martin Luther King Jr. Multi-Service Ambulatory  
Care Center** Los Angeles CA

**LAC+USC Healthcare Network** Los Angeles CA

**Olive View—UCLA Medical Center** Sylmar CA

**Rancho Los Amigos National Rehabilitation Center**  
Downey CA

**LSU Health Care Services Division** Baton Rouge LA

**Bogalusa Medical Center** Bogalusa LA

**Earl K. Long Medical Center** Baton Rouge LA

**Lallie Kemp Regional Medical Center**  
Independence LA

**Leonard J. Chabert Medical Center** Houma LA

**LSU Interim Hospital** New Orleans LA

**University Medical Center** Lafayette LA

**Walter O. Moss Regional Medical Center**  
Lake Charles LA

**Maricopa Integrated Health System** Phoenix AZ

**MCV Hospitals (formerly VCU Health System)**  
Richmond VA

**Memorial Healthcare System** Hollywood FL

**Joe DiMaggio Children's Hospital at Memorial**  
Hollywood FL

**Memorial Hospital Miramar** Miramar FL

**Memorial Hospital Pembroke** Pembroke Pines FL

**Memorial Regional Hospital South** Hollywood FL

**Memorial Hospital West** Pembroke Pines FL

**Memorial Regional Hospital** Hollywood FL

**Memorial Hospital at Gulfport** Gulfport MS

**The MetroHealth System** Cleveland OH

**Nashville General Hospital at Meharry** Nashville TN

**Nassau University Medical Center** East Meadow NY

## NAPH Members

<b>Natividad Medical Center</b> Salinas CA	<b>San Mateo Medical Center</b> San Mateo CA
<b>New York City Health and Hospitals Corporation</b> New York NY	<b>Santa Clara Valley Health &amp; Hospital System</b> San Jose CA
<b>Bellevue Hospital Center</b> New York NY	<b>Shands HealthCare</b> Gainesville FL
<b>Coler-Goldwater Specialty Hospital and Nursing Facility</b> Roosevelt Island NY	<b>Sinai Health System</b> Chicago IL
<b>Coney Island Hospital</b> Brooklyn NY	<b>Stony Brook University Medical Center</b> Stony Brook NY
<b>Cumberland Diagnostics &amp; Treatment Center</b> Brooklyn NY	<b>Tampa General Hospital</b> Tampa FL
<b>Dr. Susan Smith McKinney Nursing and Rehabilitation Center</b> Brooklyn NY	<b>Truman Medical Centers</b> Kansas City MO
<b>East New York Diagnostics &amp; Treatment Center</b> Brooklyn NY	<b>TMC Hospital Hill</b> Kansas City MO
<b>Elmhurst Hospital Center</b> Elmhurst NY	<b>TMC Lakewood</b> Kansas City MO
<b>Gouverneur Nursing and Diagnostic &amp; Treatment Center</b> New York NY	<b>TMC Behavioral Health</b> Kansas City MO
<b>Harlem Hospital Center</b> New York NY	<b>UMass Memorial Health Care System</b> Worcester MA
<b>Jacobi Medical Center</b> Bronx NY	<b>UMDNJ—University Hospital</b> Newark NJ
<b>Kings County Hospital</b> Brooklyn NY	<b>University Health System</b> San Antonio TX
<b>Lincoln Medical and Mental Health Center</b> Bronx NY	<b>University HealthSystem Consortium</b> Oak Brook IL
<b>Metropolitan Hospital Center</b> New York NY	<b>University Hospital, The University of New Mexico Health Sciences Center</b> Albuquerque NM
<b>Morrisania Diagnostics &amp; Treatment Center</b> Bronx NY	<b>University Medical Center of El Paso</b> El Paso TX
<b>North Central Bronx Hospital</b> Bronx NY	<b>University Medical Center of Southern Nevada</b> Las Vegas NV
<b>Queens Hospital Center</b> Jamaica NY	<b>University of Arkansas for Medical Sciences</b> Little Rock AR
<b>Renaissance Health Care Network Diagnostics &amp; Treatment Center</b> New York NY	<b>University of California Health System</b> Oakland CA
<b>Sea View Hospital Rehabilitation Center &amp; Home</b> Saten Island NY	<b>University of California, Davis Medical Center</b> Sacramento CA
<b>Segundo Ruiz Belvis Neighborhood Family Health</b> Bronx NY	<b>University of California, Irvine Medical Center</b> Orange CA
<b>Woodhull Medical and Mental Health Center</b> Brooklyn NY	<b>University of California, San Diego Medical Center</b> San Diego CA
<b>The Ohio State University Hospital</b> Columbus OH	<b>University of Colorado Hospital</b> Denver CO
<b>Orlando Health</b> Orlando FL	<b>The University of Kansas Hospital</b> Kansas City KS
<b>Parkland Health &amp; Hospital System</b> Dallas TX	<b>University of Kentucky Medical Center, UK HealthCare</b> Lexington KY
<b>Regional Medical Center at Memphis</b> Memphis TN	<b>The University of Texas Health Center at Tyler</b> Tyler TX
<b>Riverside County Regional Medical Center</b> Moreno Valley CA	<b>University of Utah Health Care</b> Salt Lake City UT
<b>Safety Net Hospital Alliance of Florida</b> Tallahassee FL	<b>USA Medical Center</b> Mobile AL
<b>San Joaquin General Hospital</b> Stockton CA	<b>Ventura County Health Care Agency</b> Ventura CA
	<b>Westchester Medical Center</b> Valhalla NY



1301 Pennsylvania Ave. NW, Suite 950  
Washington, DC 20004  
202 585 0100 tel / 202 585 0101 fax

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