Texas Department of State Health Services

Texas Hospitals: Utilization and Financial Trends

2002 - 2011

Financial and Utilization Data from the Cooperative DSHS/AHA/THA Annual Survey of Hospitals



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Executive Summary

Hospitals are classified as either Acute Care or Psychiatric. Between 2002 and 2011, the number of acute care hospitals increased by 11.6 percent, from 492 to 549 hospitals. During the same period, the number of psychiatric hospitals increased by 21.1 percent, from 38 to 46 hospitals.

Acute care hospitals are divided into three categories of ownership:

For-Profit (51 percent) - 281 hospitals NonProfit (28 percent) - 153 hospitals Public (21 percent) - 115 hospitals

In 2011, the state hospital utilization rate was 537 inpatient days per 1,000 population, a decline of 14.1 percent since 2002. According to the 11 public health regions in Texas, Region 7 (Austin, Travis County area) had the lowest utilization rate at 408 inpatient days per 1,000 population. Region 1 (Northwest Texas, including Lubbock County) had the highest utilization rate with 715 inpatient days per 1,000 population.

Uncompensated care is comprised of Bad Debt Charges and Charity Charges. In 2011, nonprofit acute care hospitals reported the highest amount of charity charges with \$4.98 billion. For-profit acute care hospitals reported the highest bad debt charges with \$3.02 billion. During the same period, public psychiatric hospitals reported the highest amount of total uncompensated care with bad debt charges of \$2.8 million and charity charges of \$187.8 million.

In 2011, the largest number of patient admissions (2,481,520) was for general medical and surgical services, the staffed occupancy rate was 58.1 percent, and the number of inpatient days was 11,667,859. Parkland Memorial Hospital in Dallas reported the highest total uncompensated care with \$1,532 million. Eight hospitals reported no uncompensated care.

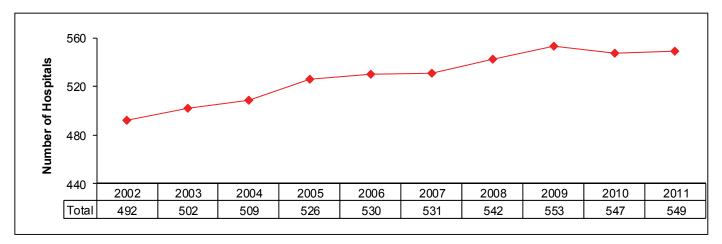


I. Beds and Ownership



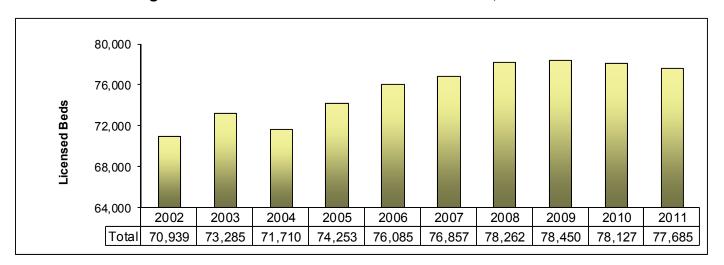
Count of Texas Acute Care Hospitals and Licensed Beds 2002- 2011

Figure 1: Number of Acute Care Hospitals, 2002 - 2011



*Due to the tracking of hospitals, the 2010 ownership numbers are as of January 2011.

Figure 2: Number of Acute Care Licensed Beds, 2002 - 2011



DEFINITIONS:

• Licensed Beds is defined as the number of beds licensed by the Department of State Health Services (DSHS), Health Facilities Licensing.

STATISTICS:

- The number of acute care hospitals in Texas, licensed by DSHS, increased 12 percent from 2002 to 2011 (Figure 1).
- The number of DSHS licensed beds increased by 9.5 percent from 2002 to 2011 (Figure 2).

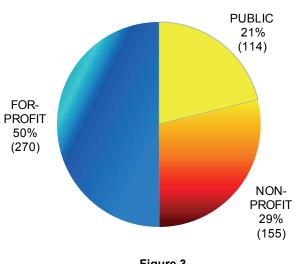
A specific hospital's Licensed Beds can be found in the Hospital Tracking Database as variable 'TDHLIC'.



Texas Acute Care Hospitals and Staffed Beds by Ownership, 2011

Reporting Hospitals by Ownership, January 2011

Staffed Beds by Ownership, January 2011



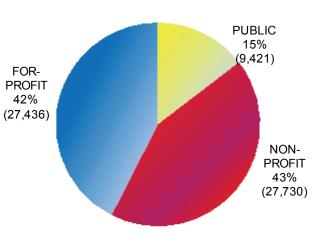


Figure 3

Figure 4

DEFINITIONS:

- Public Hospital: Hospitals owned by an agency of city, county or state government and includes hospital districts, hospital authorities, county and city facilities and state-operated facilities.
- Non-Profit Hospital: Hospitals owned by not-for-profit organizations, such as religious organizations, community hospitals, cooperative hospitals or fraternal societies.
- For-Profit Hospital: Hospitals owned on a for-profit basis by an individual, a partnership or a profit-making corporation.
- Staffed Beds is defined as the number of beds set up and staffed for use at the end of the hospital's reporting period. This number will be less than or equal to the hospital's licensed beds.

STATISTICS:

- The ownership of Texas acute care hospitals is composed of approximately one-half for-profit hospitals.
- Less than one out of six staffed beds are in public hospitals, the remaining beds being divided between for-profit and non-profit hospitals.

A specific hospital's Ownership can be found in the Hospital Tracking Database as variable 'OWNCODE' or on the DSHS/AHA/THA annual survey under variable 'F1'. Staffed beds can also be found in the DSHS/AHA/THA annual survey as variable 'D1b1'.



Count of Texas Psychiatric Care Hospitals and Licensed Beds & Texas Psychiatric Care Hospitals by Ownership, 2011

Year	Number of Hospitals	Number of Beds	Admissions
2002	38	4,876	76,870
2003	36	2,986	75,709
2004	38	3,398	80,033
2005	38	4,399	80,244
2006	41	4,918	86,072
2007	42	5,170	86,519
2008	42	5,196	88,710
2009	43	5,424	89,509
2010	42	5,450	95,834
2011	46	5,619	105,680

Psychiatric Hospitals by Ownership, January 2011

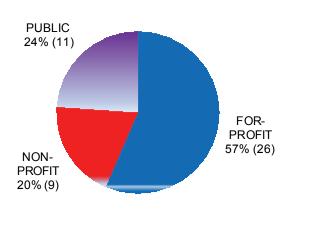


Figure 5

Table 1

DEFINITIONS:

• Psychiatric Hospital: A hospital that provides diagnostic and therapeutic services to patients with mental or emotional disorders.

STATISTICS:

Between 2002 and 2011 the number of psychiatric hospitals in Texas increased 21 percent and the number of beds increased 15 percent (Table 1), while admissions increased 37.5 percent.

Psychiatric admissions can be found in the DSHS/AHA/THA annual survey in Section D1e1. The number of hospitals and the number of beds can be found in the hospital tracking database



^{*} Includes ten state owned psychiatric hospitals and their 2,658 beds.

II. Hospital Utilization Trends



Texas Acute Care Hospitals: Staffed Beds Occupancy Rate and Licensed Beds Occupancy Rate, 2002 - 2011

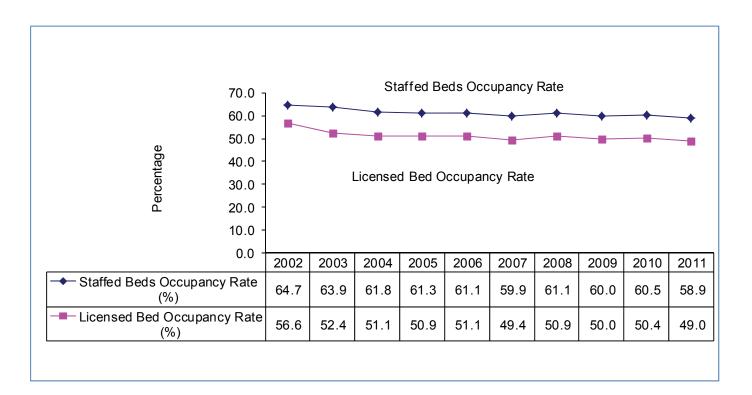


Figure 6

DEFINITIONS:

- Staffed Occupancy Rate = inpatient days ÷ days open ÷ staffed beds x 100
- **Licensed Occupancy Rate** = inpatient days for Texas Department of State Health Services licensed hospitals ÷ days open ÷ licensed beds x 100

STATISTICS:

From 2002 to 2011, the staffed bed occupancy rate for Texas acute care hospitals decreased 9 percent and the licensed beds occupancy rate for Texas acute care hospitals decreased 13.4 percent. (Figure 6)

Licensed beds can be found in the Hospital Tracking Database under variable 'TDHLIC'. Staffed beds can be found on the DSHS/AHA/THA annual survey on page 15, D1b1.



Texas Acute Care Hospitals: Total Inpatient Days, Admissions, and Average Length of Stay (ALOS), 2002 - 2011

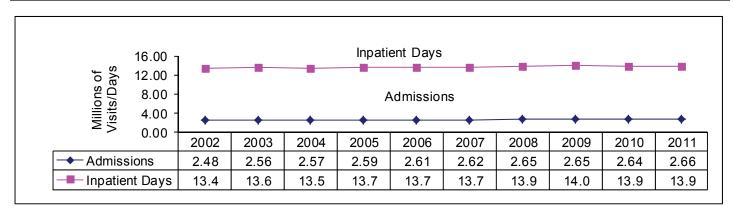


Figure 7

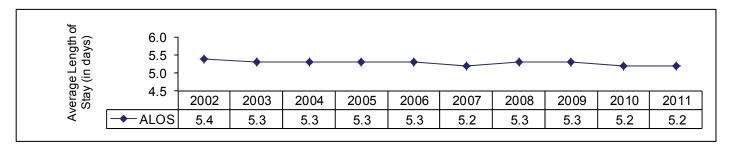


Figure 8

DEFINITIONS:

- Inpatient Days: The number of adult and pediatric days of care rendered during the reporting period. Includes neonatal and swing days. Does not include days of care rendered for normal infants born in the hospital, but does include those for their mothers. Includes days of care for infants born in the hospital and transferred into a neonatal care unit. Also includes swing bed inpatient days. Inpatient day of care (also commonly referred to as a patient day or a census day, or by some federal hospitals as an occupied bed day) is a period of service between the census-taking hours on two successive calendar days, the day of discharge being counted only when the patient was admitted the same day.
- Admissions: Defined as all patient accepted for inpatient service during the reporting period. Includes adult, pediatric, neonatal and swing admissions. Excludes newborns.
- Average Length of Stay: The average number of days a patient stays in the hospital. Average length of stay = inpatient days ÷ admissions.

STATISTICS:

- Inpatient days increased 3.7 percent between 2002 and 2011.
- The number of admissions increased by 7.3 percent between 2002 and 2011.

Inpatient days can be found on the DSHS/AHA/THA annual survey on page 15 as D1f1 and admissions as D1e1.



Texas Acute Care Hospitals: Outpatient Visits and Emergency Room Visits, 2002 - 2011

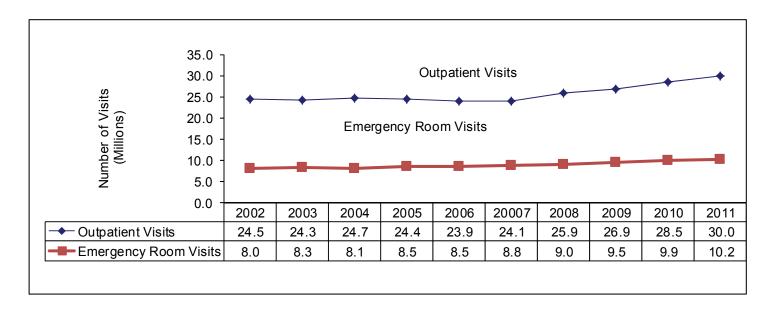


Figure 9

DEFINITIONS:

- Outpatient Visit: A visit by a patient who is not lodged in the hospital while receiving medical, dental or other services. Each appearance of an outpatient in each unit constitutes one visit regardless of the number of diagnostic and/or therapeutic treatments that the patient receives. Total outpatient visits should include all clinic visits, referred visits, observation services, outpatient surgeries, and emergency room visits. Clinic visits should reflect total number of visits to each specialized medical unit that is responsible for the diagnosis and treatment of patients on an outpatient, non-emergency basis (i.e., alcoholism, dental, gynecology, etc.). Visits to the satellite clinics and primary group practices should be included if revenue is received by the hospital. Referred visits should reflect total number of outpatient ancillary visits to each specialty unit of the hospital established for providing technical aid used in the diagnosis and treatment of patients. Examples of such units are diagnostic radiology, EKG, pharmacy, etc.
- Emergency Room Visit: The number of visits to the emergency unit. Emergency outpatients can be admitted to the inpatient areas of the hospital, but they are still counted as emergency visits and subsequently as inpatient admissions.

STATISTICS:

- Outpatient visits, excluding emergency room visits, increased 22.4% between 2002 and 2011.
- Emergency room visits steadily increased by 27.5 percent.

Both variables can be found on page 15 the DSHS/AHA/THA annual survey as D1h1 (Total Outpatient Visits) and D1g1 (Emergency Room Visits). D1h1 includes ER visits. To create the graph above subtract D1g1 from D1h1.



Texas Acute Care Hospitals: Inpatient and Outpatient Surgical Operations, 2002 - 2011

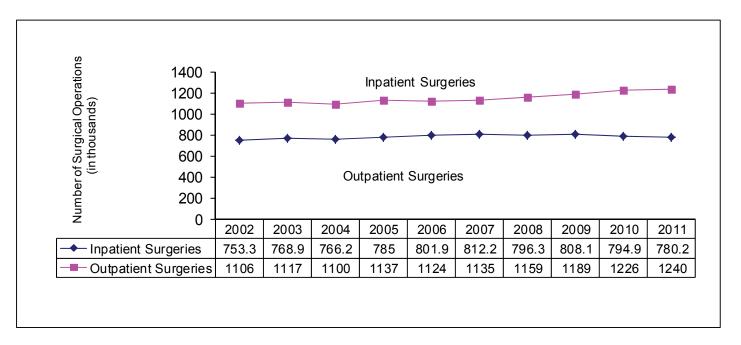


Figure 10

DEFINITIONS:

- Inpatient Surgical Operations: The number of patients undergoing surgery who are lodged in the hospital.
- Outpatient Surgical Operations: Operations performed on patients who do not remain in the hospital overnight. Includes all operations whether performed in the inpatient operating rooms or in procedure rooms located in an outpatient facility. Includes an endoscopy only when used as an operative tool and not when used for diagnosis alone.
- Each patient undergoing surgery is counted as one surgical operation regardless of the number of surgical procedures.

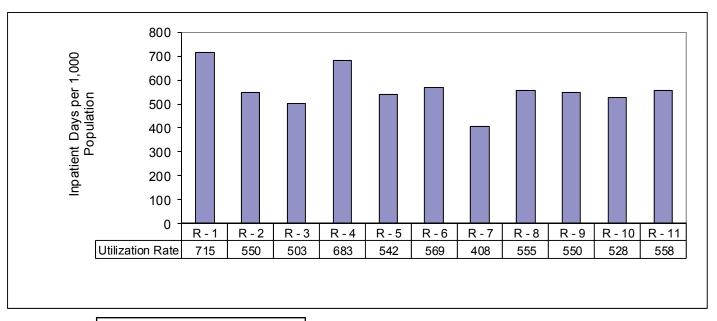
STATISTICS:

- Inpatient surgical operations in Texas acute care hospitals increased 3.6 percent between 2002 and 2011.
- Acute care hospitals reported approximately 1,239,978 outpatient surgical operations in 2011, an increase of 12.1 percent since 2002.

Both variables can be found on page 15 the DSHS/AHA/THA annual survey as D1i1 (Inpatient Surgical Operations) and D1k1 (Outpatient Surgical Operations).



Texas Acute Care Hospitals: Utilization Rate by Public Health Region, 2011



537 = State Average Utilization Rate R = Region

Figure 11

DEFINITIONS:

• **Hospital Utilization:** Measures the rate at which the hospital's services are employed with respect to time. In this case, inpatient days per 1,000 of the state's population.

STATISTICS:

- •The utilization rate reported for 2002 was 625 and 537 reported for 2011 with a decrease of 14.1 percent.
- The utilization rate for all Texas acute care hospitals was 537 inpatient days per 1,000 population in 2011.
- Eight of the 11 regions had hospital utilization rates above the state average hospital utilization rate of 537 inpatient days per 1,000 population. Public Health Regions 3, 7, and 10 had hospital utilization rates below the state average.
- Public Health Region 7, encompassing the central part of the state, including Austin, had the lowest hospital utilization rate at 408 inpatient days per 1,000 population. Region 1, northwest Texas, including Lubbock, had the highest hospital utilization rate at 715 inpatient days per 1,000 population.

A map of the Texas Department of State Health Services Public Health Regions can be found on page 26, Map 2.



III. Hospital Financial Trends



Texas Acute Care Hospitals: Total Uncompensated Care Adjusted for Inflation, 2002 - 2011

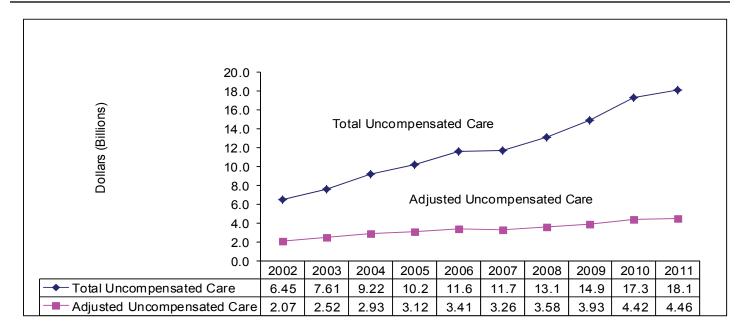


Figure 12

DEFINITIONS:

- Uncompensated Care: The services provided for which no payment is received from the patient or from third-party payers. Uncompensated care is the sum of bad debt charges and charity charges. (AHA/DSHS/THA Annual Survey, item I1c + I2c
- Bad Debt Charges: Consist of uncollectible inpatient and outpatient charges that result from the extension of credit. (AHA/DSHS survey, item I1c)
- Charity Charges: The total amount of hospital charges for inpatient and outpatient services attributable to charity care in a cost reporting period. These charges do not include bad debt charges, contractual allowances or discounts (other than for indigent patients not eligible for medical assistance under the approved Medicaid state plan); that is, reductions or discounts in charges given to other third party payers such as, but no limited to, health maintenance organizations, Medicare or Blue Cross.
- Adjusted Uncompensated Care: total uncompensated care/consumer price index X 100.

STATISTICS:

• Total uncompensated care increased 180.6 percent between 2002 and 2011. However, adjusted for inflation, uncompensated care increased by only 115.5 percent during the same period.



Comparison Of Uncompensated Care Figures For Seven Most Populous States, 2011

	Bad Debt	Charity	Total Uncompensated Care	Gross Patient Revenue	Uncompensated Care as a Percentage of Gross Patient Revenue	2011 Population	Total Uncompensated Care per Capita
California	\$5,521	\$8,144	\$13,664	\$293,116	4.66%	37,266,600	\$363
Texas	\$6,739	\$10,423	\$17,162	\$192,441	8.92%	25,213,445	\$668
New York	\$2,421	\$3,342	\$5,763	\$144,057	4.00%	19,577,730	\$296
Florida	\$5,143	\$6,694	\$11,837	\$165,000	7.17%	18,678,049	\$621
Illinois	\$2,323	\$2,808	\$5,131	\$97,941	5.24%	12,944,410	\$399
Pennsylvania	\$2,037	\$1,991	\$4,028	\$142,588	2.82%	12,632,780	\$316
Ohio	\$2,079	\$3,904	\$5,983	\$100,711	5.94%	11,532,111	\$518
United States	\$57,404	\$76,550	\$133,954	\$2,303,112	5.82%	309,050,816	\$430

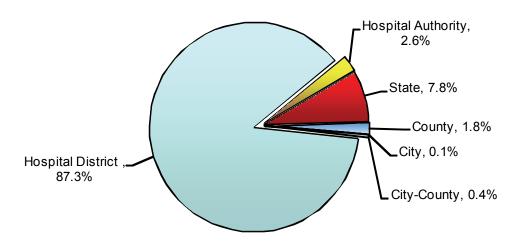
^{*} Dollars in millions

Table 2

- In 2011, Texas ranked first among the seven most populous states in total uncompensated care reported by hospitals (\$117,162) and in the ratio of uncompensated care to gross patient revenue (8.92 percent). Texas was first in per capita uncompensated care (\$668).
- Of the top seven most populous states, New York had the lowest uncompensated care per capita with approximately \$296 per person spent on uncompensated care.
- The average uncompensated care per capita for the United States was \$430 per person



Texas Acute Care Hospitals: Uncompensated Care by Public Hospitals, 2011



Number of Public Hospitals = 114
Uncompensated Care Provided by Public Acute Care Hospitals = \$6.09 billion
Total Uncompensated Care = \$18.1 billion

Figure 13

DEFINITIONS (Public acute care hospitals are divided into six categories):

- State Controlled by an agency of state government
- County Controlled by an agency of county government.
- City Controlled by an agency of municipal government.
- City-County Controlled jointly by agencies of municipal and county governments.
- Hospital District or Authority Controlled by a political subdivision of a state, county, or city created solely for the purpose of establishing and maintaining medical care or health-related care institutions.

- Of the six categories for public acute care hospitals, hospital districts provided the highest amount of uncompensated care. These 84 reporting hospital district hospitals were responsible for most (87.3 percent) of the total uncompensated care provided by Texas public acute care hospitals in 2011.
- Five state-owned acute care hospitals provided 7.8 percent of the uncompensated care provided by all public acute care hospitals. Hospital authorities and hospitals owned by a county, city-county, or city were responsible for the remaining 4.9 percent.



Texas Acute Care Hospitals: Bad Debt, Charity Charges, and Total Uncompensated Care by Ownership, 2011

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
PUBLIC										
Bad Debt Charges*	\$0.82	\$0.89	\$1.12	\$1.30	\$1.60	\$1.63	\$1.59	\$1.84	\$2.10	\$2.11
% of Total Public	33.4	30.7	33.4	33.6	36.1	38.5	36.0	36.7	37.2	34.6
Charity Charges*	\$1.63	\$2.03	\$2.23	\$2.58	\$2.70	\$2.61	\$2.84	\$3.18	\$3.54	\$3.99
% of Total Public	66.5	69.3	66.6	66.4	63.9	61.5	64.0	63.3	62.8	65.4
NON-PROFIT										
Bad Debt Charges*	\$1.24	\$1.47	\$1.74	\$1.78	\$2.00	\$2.06	\$2.45	\$2.49	\$2.63	\$2.66
% of Total Non-Profit	49.38	50.8	46.9	43.3	42.7	42.2	41.9	39.5	36.3	34.8
Charity Charges*	\$1.25	\$1.42	\$1.97	\$2.33	\$2.70	\$2.82	\$3.42	\$3.81	\$4.62	\$4.98
% of Non-Profit	50.2	49.2	53.1	56.7	57.3	57.8	58.1	60.5	63.7	65.2
FOR-PROFIT										
Bad Debt Charges*	\$1.04	\$1.25	\$1.55	\$1.47	\$1.90	\$1.61	\$1.84	\$2.23	\$3.09	\$3.02
% of Total For-Profit	71.2	70	72.1	65.5	69.5	63.7	65.4	61.5	69.7	69.5
Charity Charges*	\$0.42	\$0.53	\$0.60	\$0.77	\$0.82	\$0.92	\$0.97	\$1.39	\$1.34	\$1.33
% of Total For-Profit	28.8	30	27.9	34.5	30.5	36.3	34.6	38.5	30.3	30.5
REPORTED TOTALS										
Bad Debt Charges*	\$3.11	\$3.62	\$4.40	\$4.60	\$5.38	\$5.30	\$5.90	\$6.6	\$7.8	\$7.8
% of Total	48.4	47.6	47.8	44.5	46.5	45.5	44.9	43.9	45.1	43.1
Charity Charges*	\$3.31	\$3.97	\$4.81	\$5.69	\$6.19	\$6.35	\$7.23	\$8.4	\$9.5	\$10.3
% of Total	51.5	52.4	52.2	55.5	53.5	54.5	55.1	56.1	54.9	56.9

^{*}Dollars in billions
Includes hospitals that provided complete information for bad debt charges and charity charges.

Table 3

DEFINITIONS:

- **Financially Indigent Patient:** An uninsured or underinsured person who is accepted for care with no obligation or a discounted obligation to pay for the services rendered based on the hospital's eligibility system.
- Medically Indigent Patient: A person whose medical or hospital bills after payment by third-party payers exceed a
 specified percentage of the patient's annual gross income, determined in accordance with the hospital's eligibility
 system, and the person is financially unable to pay the remaining bill.

- Charity charges exceeded bad debt charges for public acute care hospitals in Texas since 2002. In 2011, public acute care hospitals reported 65.4 percent of the uncompensated care as charity charges.
- Non-profit acute care hospitals nearly quadrupled the amount of charity charges between 2002 and 2011 increasing from \$1.25 billion to \$4.98 billion.
- For-profit acute care hospitals consistently reported bad debt charges exceeding charity charges since 2002, reporting 69.55% of the uncompensated care as bad debt charges in 2011.



Psychiatric Care Hospitals: Bad Debt, Charity, and Total Uncompensated Care by Ownership

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
PUBLIC										
Bad Debt Charges*	\$0.5	\$1.2	\$1.3	\$0.7	\$6.3	\$1.9	\$2.1	\$2.0	\$2.3	\$2.8
% of Total Public	0.3	0.7	0.7	0.5	3.6	1.6	2.0	1.7	1.2	1.5%
Charity Charges*	\$207.6	\$156.6	\$179.9	\$126.7	\$166.7	\$116.0	\$105.3	\$116.1	\$193.5	\$187.8
% of Total Public	99.7	99.3	99.3	99.5	96.4	98.4	98.0	98.3	98.8	98.5%
NON-PROFIT										
Bad Debt Charges*	\$6.0	\$3.6	\$3.2	\$9.5	\$7.3	\$6.3	\$5.3	\$7.0	\$6.2	\$3.5
% of Total Nonprofit	66.3	φσ.σ 52	44.9	24.5	56.2	φο.σ 51.4	40.9	47.9	48.1	47.0%
Charity Charges*	\$3.0	\$3.3	\$3.9	\$29.2	\$6.0	\$6.0	\$7.7	\$7.6	\$6.7	\$4.0
% of Total Nonprofit	33.7	48	55.1	75.5	43.8	48.6	59.1	52.1	51.9	53.0%
FOR-PROFIT										
Bad Debt Charges*	\$10.3	\$14.6	\$12.7	\$7.5	\$9.9	\$13.7	\$14.0	\$14.2	\$15.2	\$19.5
% of Total For-profit	66.1	81.7	72.8	63.6	68.2	62.9	73.8	57.7	66.5	64.9%
Charity Charges*	\$5.3	\$3.2	\$4.8	\$4.3	\$4.6	\$8.1	\$5.0	\$10.4	\$7.6	\$10.5
% of Total For-profit	33.9	18.3	27.2	36.4	31.8	37.1	26.2	42.3	33.5	35.1%
REPORTED TOTALS										
	040.0	040.4	047.0	047.0	#00 F	004.0	604 5	# 00.0	000 7	005.0
Bad Debt Charges* % of Total	\$16.8 7.2	\$19.4 10.6	\$17.2 8.4	\$17.6 9.9	\$23.5 11.7	\$21.9 14.4	\$21.5 15.4	\$23.2 14.8	\$23.7 10.2	\$25.8 11.3%
Charity Charges*	\$215.9	\$163.2	\$188.6	\$160.3	\$177.0	\$130.1	\$118.0	\$134.2	\$207.8	\$202.3
% of Total	92.8	89.4	91.6	90.1	88.3	85.6	84.6	85.2	89.8	88.7%

^{*} Dollars in millions Includes hospitals that provided complete information for bad debt charges and charity charges. In 2005 charity charges increased due to a reported change of ownership by Harris County Psychiatric Hospital.

Psychiatric Care Uncompensated Care as a Percentage of Gross Patient Revenue 2002 - 2011 Figure 14

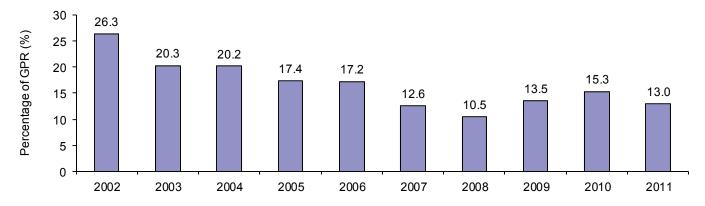


								Table 5	
2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
\$232.8	\$182.6	\$205.8	\$177.8	\$200.5	\$163.2	\$146.30	\$157.40	\$231.5	\$228.1
\$883.8	\$900.0	\$1,021	\$1,022	\$1,163	\$1,207	\$1,325	\$1,167	\$1,517	\$1,751
26.3%	20.3%	20.2%	17.4%	17.2%	12.6%	10.50%	13.5%	15.3%	13.0%
	\$232.8 \$883.8	\$232.8 \$182.6 \$883.8 \$900.0	\$232.8 \$182.6 \$205.8 \$883.8 \$900.0 \$1,021	\$232.8 \$182.6 \$205.8 \$177.8 \$883.8 \$900.0 \$1,021 \$1,022	\$232.8 \$182.6 \$205.8 \$177.8 \$200.5 \$883.8 \$900.0 \$1,021 \$1,022 \$1,163	\$232.8 \$182.6 \$205.8 \$177.8 \$200.5 \$163.2 \$883.8 \$900.0 \$1,021 \$1,022 \$1,163 \$1,207	\$232.8 \$182.6 \$205.8 \$177.8 \$200.5 \$163.2 \$146.30 \$883.8 \$900.0 \$1,021 \$1,022 \$1,163 \$1,207 \$1,325	\$232.8 \$182.6 \$205.8 \$177.8 \$200.5 \$163.2 \$146.30 \$157.40 \$883.8 \$900.0 \$1,021 \$1,022 \$1,163 \$1,207 \$1,325 \$1,167	2002 2003 2004 2005 2006 2007 2008 2009 2010 \$232.8 \$182.6 \$205.8 \$177.8 \$200.5 \$163.2 \$146.30 \$157.40 \$231.5 \$883.8 \$900.0 \$1,021 \$1,022 \$1,163 \$1,207 \$1,325 \$1,167 \$1,517

Table 4

IV. Hospital Utilization and Financial Data - Supplemental Information



Texas Acute Care Hospitals: Reported Beds Set Up and Staffed by Service, 2011

Service	Beds	Percentage of total beds
General Medical-Surgical Care	31,527	48.6%
Obstetrics	5,928	9.1%
Medical Surgical Intensive Care	4,738	7.3%
Acute Long Term Care	4,467	6.9%
Physical Rehabilitation	3,723	5.7%
Pediatric Medical-Surgical Care	3,001	4.6%
Neonatal Intensive Care	2,580	4.0%
Other Special Care	2,432	3.8%
Psychiatric Care	2,316	3.6%
Cardiac Intensive Care	1,264	1.9%
Neonatal Intermediate Care	880	1.4%
Other Intensive Care	575	0.9%
Skilled Nursing Care	456	0.7%
Pediatric Intensive Care	417	0.6%
Other Care	410	0.6%
Alcoholism-Drug abuse or Dependency Care	80	0.1%
Burn Care	58	0.1%
Intermediate Nursing Care	0	0.0%
Other Long-Term Care	0	0.0%
Total	64,852	

Table 6



Texas Acute Care and Psychiatric Care Hospitals: Utilization by Type of Service, 2011

Type of Service	Reporting Hospitals	Beds Set Up and Staffed	Admissions	Inpatient Days	Staffed Occupancy Rate	Average Length of Stay
General Medical and Surgical	385	55,045	2,481,520	11,667,859	58.1%	4.7
Acute Long-Term Care Hospital	78	4,620	42,386	1,120,901	66.5%	26.4
Psychiatric	48	5,688	110,587	1,677,952	80.8%	15.2
Rehabilitation	45	2,338	43,824	580,675	68.0%	13.3
Surgical	10	194	7,494	15,599	22.0%	2.1
Orthopedic	6	211	8,044	24,006	31.2%	3.0
Other	4	566	23,197	132,970	64.4%	5.7
Heart	3	204	7,957	35,781	48.1%	4.5
Tuberculosis and Other Respiratory Diseases	1	75	81	14,285	52.2%	176.4
Cancer	1	607	25,230	180,354	81.4%	7.1
Obstetrics and Gynecology	1	367	13,632	72,551	54.2%	5.3
Total	582	69,915	2,763,952	15,522,933	60.8%	5.6

Table 7

DEFINITIONS:

- General medical-surgical care: Provides acute care to patients in medical and surgical units on the basis of physicians' orders and approved nursing care plans.
- **Physical rehabilitation:** Provides care encompassing a comprehensive array of restoration services for the disabled and all support services necessary to help patients attain their maximum functional capacity.
- **Alcoholism-drug abuse**: Provides diagnosis and therapeutic services to patients with alcoholism or other drug dependencies. Includes care for inpatient/residential treatment for patients whose course of treatment involves more intensive care than provided in an outpatient setting or where patient requires supervised withdrawal.
- Psychiatric care: Provides acute or long-term care to emotionally disturbed patients, including patients admitted for diagnosis and those admitted for treatment of psychiatric problems, on the basis of physicians' orders and approved nursing care plans. Long-term care may include intensive supervision to the chronically mentally ill, mentally disordered, or other mentally incompetent persons.
- Acute long term care: Provides specialized acute hospital care to medically complex patients who are critically ill, have multisystem complication and/or failure, and require hospitalization averaging 25 days, in a facility offering specialized treatment programs and therapeutic intervention on a 24 hour/ 7 day a week basis.
- Orthopedic services: Services provided for the prevention or correction of injuries or disorders of the skeletal system and associated muscles, joints and ligaments.
- Cancer services: An organized program for the treatment of cancer by the use of drugs or chemicals.



Texas Acute Care and Psychiatric Hospitals: Uncompensated Care by Type of Service, 2011

Type of Service	Number of Hospitals	Bad Debt Charges*	Charity Charges*	Total Uncompensated Care*	Gross Patient Revenue*	Jncompensated Care as a Percentage of Gross Patient Revenue
Tuberculosis and Other	•		, ,			
Respiratory Diseases	1	\$0.0	\$13	\$13	\$13	100.1%
Psychiatric	48	\$34.0	\$203	\$237	\$1,964	12.1%
General Medical and Surgical	385	\$7,580.4	\$10,018	\$17,598	\$171,704	10.2%
Surgical	10	\$49.6	\$4	\$53	\$1,145	4.7%
Cancer	1	\$46.7	\$178	\$224	\$5,544	4.0%
Other	4	\$34.7	\$37	\$71	\$2,486	2.9%
Heart	3	\$7.7	\$12	\$20	\$745	2.6%
Rehabilitation	45	\$10.8	\$16	\$26	\$1,487	1.8%
Orthopedic	6	\$7.0	\$2	\$9	\$882	1.0%
Acute Long-Term Care Hospital	78	\$35.9	\$18	\$54	\$5,920	0.9%
Obstetrics and Gynecology	1	\$3.9	\$0	\$4	\$883	0.5%

^{*} Dollars in millions

Table 8

- Tuberculosis and Other Respiratory Diseases hospitals had the highest rates of uncompensated care as a percentage of gross patient revenue.
- Obstetrics and Gynecology and Acute Long-Term Care Hospital (1.0 percent) hospitals had the lowest rates of uncompensated care as a percentage of gross patient revenue.



Texas Acute Care Hospitals: Reporting the Highest Uncompensated Care, 2011

Facility	City	County	Ownership	Total Uncompensated Care*	Total Gross Patient Revenue*	Uncompensated Care as a Percentage of Gross Patient Revenue
Parkland Memorial Hospital	Dallas	DALLAS	PUBLIC	\$1,532	\$3,415	44.9%
Harris County Hospital District Ben Taub General Hospital	Houston	HARRIS	PUBLIC	\$1,427	\$2,432	58.7%
Baptist Medical Center	San Antonio	BEXAR	FOR-PROFIT	\$945	\$3,747	25.2%
John Peter Smith Hospital	Fort Worth	TARRANT	PUBLIC	\$931	\$1,854	50.2%
University Medical Center at Brackenridge	Austin	TRAVIS	NONPROFIT	\$431	\$1,386	31.1%
University Hospital	San Antonio	BEXAR	PUBLIC	\$357	\$1,315	27.1%
University Medical Center of El Paso	El Paso	EL PASO	PUBLIC	\$306	\$739	41.4%
Scott and White Memorial Hospital	Temple	BELL	NONPROFIT	\$287	\$2,436	11.8%
Mother Frances Hospital	Tyler	SMITH	NONPROFIT	\$279	\$2,212	12.6%
University Medical Center	Lubbock	LUBBOCK	PUBLIC	\$242	\$1,323	18.3%
The Methodist Hospital	Houston	HARRIS	NONPROFIT	\$238	\$4,093	5.8%
Edinburg Regional Medical Center	Edinburg	HIDALGO	FOR-PROFIT	\$226	\$1,980	11.4%
University of TX M.D. Anderson Cancer Center	Houston	HARRIS	PUBLIC	\$224	\$5,544	4.0%
Methodist Hospital	San Antonio	BEXAR	FOR-PROFIT	\$212	\$4,903	4.3%
Memorial Hermann Hospital	Houston	HARRIS	NONPROFIT	\$207	\$2,890	7.2%
East Texas Medical Center	Tyler	SMITH	NONPROFIT	\$201	\$2,318	8.7%
Baylor University Medical Center	Dallas	DALLAS	NONPROFIT	\$201	\$2,335	8.6%
CHRISTUS Spohn Hospital Corpus Christi	Corpus Christi	NUECES	NONPROFIT	\$198	\$2,527	7.8%
Covenant Medical Center	Lubbock	LUBBOCK	NONPROFIT	\$190	\$2,697	7.1%
Good Shepherd Medical Center	Longview	GREGG	NONPROFIT	\$177	\$1,216	14.6%
Total				\$8,812	\$51,362	17.2%
State Total				\$18,082	\$191,021	9.5%

^{*} Dollars in millions

Table 9

- The above list includes the twenty acute care hospitals reporting the highest uncompensated care (bad debt charges and charity charges). Of the twenty hospitals, 7 were public, 10 were nonprofit, and 3 were for-profit. All of these hospitals are located in metropolitan areas.
- These hospitals accounted 48.7 percent of the total uncompensated care reported by Texas acute care hospitals.
- The overall uncompensated care as a percentage of gross patient revenue for these twenty hospitals was 17.2 percent.



Acute Care Hospitals: Uncompensated Care by Public Health Region, 2011

Public Health Region	Reporting Hospitals	Bad Debt Charges*	Charity Charges*	Total Uncompensated Care*	Gross Patient Revenue*	Uncompensated Care as a Percentage of Gross Patient Revenue	2011 PHR Population	Total Uncompensated Care Per Capita
1	41	\$371.6	\$388.4	\$760.0	\$7,757.9	9.8%	844,615	\$899.8
2	37	\$142.2	\$205.6	\$347.8	\$3,536.3	9.8%	558,403	\$622.9
3	131	\$1,963.5	\$3,051.1	\$5,014.5	\$48,178.1	10.4%	7,159,025	\$700.4
4	36	\$514.2	\$686.0	\$1,200.2	\$11,247.0	10.7%	1,128,891	\$1,063.2
5	23	\$239.7	\$261.2	\$500.9	\$5,491.9	9.1%	769,710	\$650.7
6	99	\$1,700.0	\$2,569.7	\$4,269.8	\$52,284.3	8.2%	6,269,377	\$681.0
7	55	\$572.7	\$1,346.9	\$1,919.7	\$18,712.9	10.3%	2,998,061	\$640.3
8	43	\$1,297.6	\$749.5	\$2,047.1	\$17,326.1	11.8%	2,596,720	\$788.3
9	29	\$264.1	\$102.8	\$367.0	\$3,524.1	10.4%	556,285	\$659.7
10	13	\$238.4	\$212.4	\$450.9	\$7,194.4	6.3%	810,320	\$556.4
11	32	\$480.6	\$723.4	\$1,204.0	\$15,768.5	7.6%	2,192,592	\$549.1
Total	539	\$7,784.8	\$10,297.0	\$18,081.8	\$191,021.5	9.5%	25,883,999	\$698.6

^{*} Dollars in millions

Table 10

DEFINITIONS:

• Uncompensated care: Includes bad debt charges and charity charges.

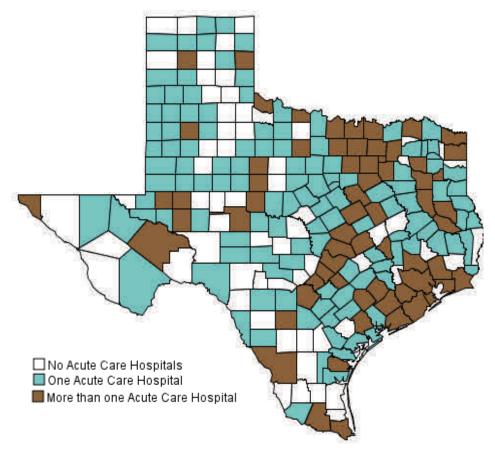
STATISTICS:

- Total uncompensated care was the highest for Public Health Regions 3, 6, and 8. These regions include the Dallas and Houston metropolitan areas. They account for 61.9 percent of the population and 50.6 percent of the hospitals.
- Seven of the eleven Public Health Regions' uncompensated care as a percentage of gross patient revenue was equal to or exceeded the state rate of 9.5 percent. Public Health Region 8 had the highest uncompensated care as a percentage of gross patient revenue at 11.8 percent. Region 4 had the highest uncompensated care per capita at \$1,063.2 per person.
- Public Health Region 10 in west Texas had the lowest uncompensated care as a percentage of gross patient revenue at 6.3 percent; however, the region was ranked eight for total uncompensated care per capita.

A map of Texas Department of State Health Services Public Health Regions and a list of regions by county is included in the appendix.



Texas Acute Care Hospitals by County, 2011



- 64 counties in the state are without an acute care hospital.
- 124 counties have only one acute care hospital.
- 66 counties have more than one acute care hospital.
- Harris county has the most number of acute care hospitals (64) followed by Dallas county (43), Tarrant county (38) and Bexar (21).

Map 1

Counties Without An Acute Care Hospital, 2011 (64)

Aransas	Dallam	Irion	Loving	Roberts	
Archer	Delta	Jeff Davis	Marion	Robertson	
Armstrong	Dickens	Jim Hogg	Mason	San Jacinto	
Bandera	Donley	Kendall	McMullen	San Saba	
Blanco	Duval	Kenedy	Menard	Shackelford	
Borden	Edwards	Kent	Mills	Sherman	
Briscoe	Foard	King	Morris	Sterling	
Brooks	Garza	Kinney	Motley	Terrell	
Callahan	Glasscock	La Salle	Newton	Waller	
Carson	Goliad	Lee	Oldham	Willacy	
Coke	Hall	Leon	Presidio	Zapata	
Cottle	Hardin	Lipscomb	Rains	Zavala	
Crockett	Hudspeth	Live Oak	Real		



V. Appendix



Hospital Data Planning Staff Roster, 2011

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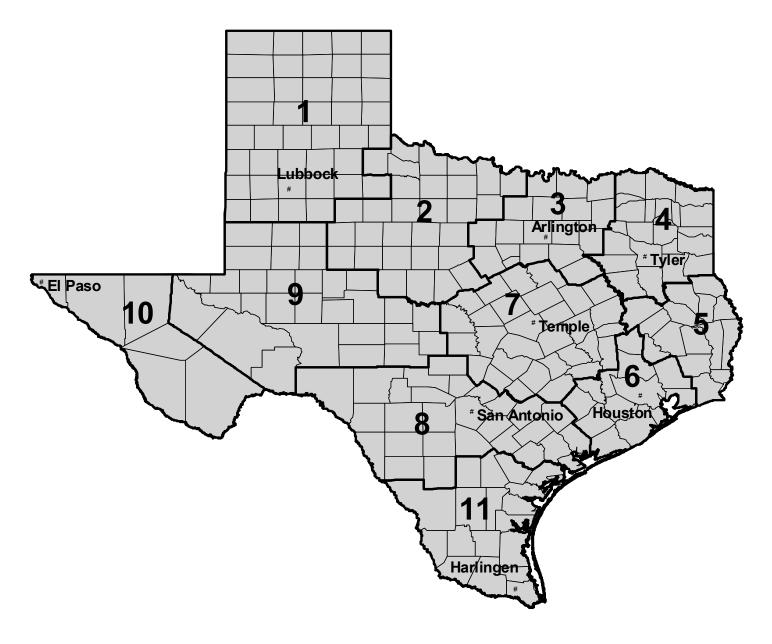
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Texas Department of State Health Services Public Health Regions Map



Map 2

Regional Offices							
1.	Lubbock	4/5.	Tyler	7.	Temple	9/10. El Paso	
2/3.	Arlington	6/5.	Houston	8.	San Antonio	11. Harlingen	



Texas Department of State Health Services Public Health Regions By County

County	Region	County	Region	County	Region	County Region
ANDERSON	4	DONLEY	1	KAUFMAN	3	REAL 8
ANDREWS	9	DUVAL	11	KENDALL	8	RED RIVER 4
ANGELINA	5	EASTLAND	2	KENEDY	11	REEVES 9
ARANSAS	11	ECTOR	9	KENT	2	REFUGIO 11
ARCHER	2	EDWARDS	8	KERR	8	ROBERTS 1
ARMSTRONG	1	ELLIS	3	KIMBLE	9	ROBERTSON 7
ATASCOSA	8	EL PASO	10	KING	1	ROCKWALL 3
AUSTIN	6	ERATH	3	KINNEY	8	RUNNELS 2
BAILEY	1 8	FALLS	7 3	KLEBERG	11 2	RUSK 4 SABINE 5
BANDERA BASTROP	7	FANNIN FAYETTE	3 7	KNOX LAMAR	4	SABINE 5 SAN AUGUSTINE 5
BAYLOR	2	FISHER	2	LAMB	1	SAN JACINTO 5
BEE	11	FLOYD	1	LAMPASAS	7	SAN PATRICIO 11
BELL	7	FOARD	2	LA SALLE	8	SAN SABA 7
BEXAR	8	FORT BEND	6	LAVACA	8	SCHLEICHER 9
BLANCO	7	FRANKLIN	4	LEE	7	SCURRY 2
BORDEN	9	FREESTONE	7	LEON	7	SHACKELFORD 2
BOSQUE	7	FRIO	8	LIBERTY	6	SHELBY 5
BOWIE	4	GAINES	9	LIMESTONE	7	SHERMAN 1
BRAZORIA	6	GALVESTON	6	LIPSCOMB	1	SMITH 4
BRAZOS	7	GARZA	1	LIVE OAK	<u>1</u> 1	SOMERVILLE 3
BREWSTER	10	GILLESPIE	8	LLANO	7	STARR 11
BRISCOE	1 11	GLASSCOCK	9 8	LOVING	9	STEPHENS 2
BROOKS BROWN	2	GOLIAD GONZALES	8	LUBBOCK	1 1	STERLING 9 STONEWALL 2
BURLESON	7	GRAY	1	LYNN MC CULLOCH	9	SUTTON 9
BURNET	7	GRAYSON	3	MC LENNAN	7	SWISHER 1
CALDWELL	7	GREGG	4	MC MULLEN	11	TARRANT 3
CALHOUN	8	GRIMES	7	MADISON	7	TAYLOR 2
CALLAHAN	2	GUADALUPE	8	MARION	4	TERRELL 9
CAMERON	11	HALE	1	MARTIN	9	TERRY 1
CAMP	4	HALL	1	MASON	9	THROCKMORTON 2
CARSON	1	HAMILTON	7	MATAGORDA	6	TITUS 4
CASS	4	HANSFORD	1	MAVERICK	8	TOM GREEN 9
CASTRO	1	HARDEMAN	2	MEDINA	8	TRAVIS 7
CHAMBERS	6	HARDIN	5	MENARD	9	TRINITY 5
CHEROKEE CHILDRESS	4 1	HARRIS HARRISON	6 4	MIDLAND MILAM	9 7	TYLER 5 UPSHUR 4
CLAY	2	HARTLEY	1	MILLS	7	UPTON 9
COCHRAN	1	HASKELL	2	MITCHELL	2	UVALDE 8
COKE	9	HAYS	7	MONTAGUE	2	VAL VERDE 8
COLEMAN	2	HEMPHILL	1	MONTGOMERY	6	VAN ZANDT 4
COLLIN	3	HENDERSON	4	MOORE	1	VICTORIA 8
COLLINGSWOR	RTH 1	HIDALGO	11	MORRIS	4	WALKER 6
COLORADO	6	HILL	7	MOTLEY	1	WALLER 6
COMAL	8	HOCKLEY	1	NACOGDOCHES		WARD 9
COMANCHE	2	HOOD	3	NAVARRO	3	WASHINGTON 7
CONCHO	9	HOPKINS	4	NEWTON	5	WEBB 11
COOKE	3	HOUSTON	5	NOLAN	2	WHARTON 6
CORYELL COTTLE	7 2	HOWARD HUDSPETH	9 10	NUECES OCHILTREE	11 1	WHEELER 1 WICHITA 2
CRANE	9	HUNT	3	OLDHAM	1	WILBARGER 2
CROCKETT	9	HUTCHINSON	1	ORANGE	5	WILLACY 11
CROSBY	1	IRION	9	PALO PINTO	3	WILLIAMSON 7
CULBERSON	10	JACK	2	PANOLA	4	WILSON 8
DALLAM	1	JACKSON	8	PARKER	3	WINKLER 9
DALLAS	3	JASPER	5	PARMER	1	WISE 3
DAWSON	9	JEFF DAVIS	10	PECOS	9	WOOD 4
DEAF SMITH	1	JEFFERSON	5	POLK	5	YOAKUM 1
DELTA	4	JIM HOGG	11	POTTER	1	YOUNG 2
DENTON	3	JIM WELLS	11	PRESIDIO	10	ZAPATA 11
DE WITT	8	JOHNSON	3	RAINS	4	ZAVALA 8
DICKENS	1	JONES	2	RANDALL	1	
DIMMIT	8	KARNES	8	REAGAN	9	

Table 13

