

# **TRENDWATCH**

CHARTBOOK 2021

Trends Affecting Hospitals and Health Systems



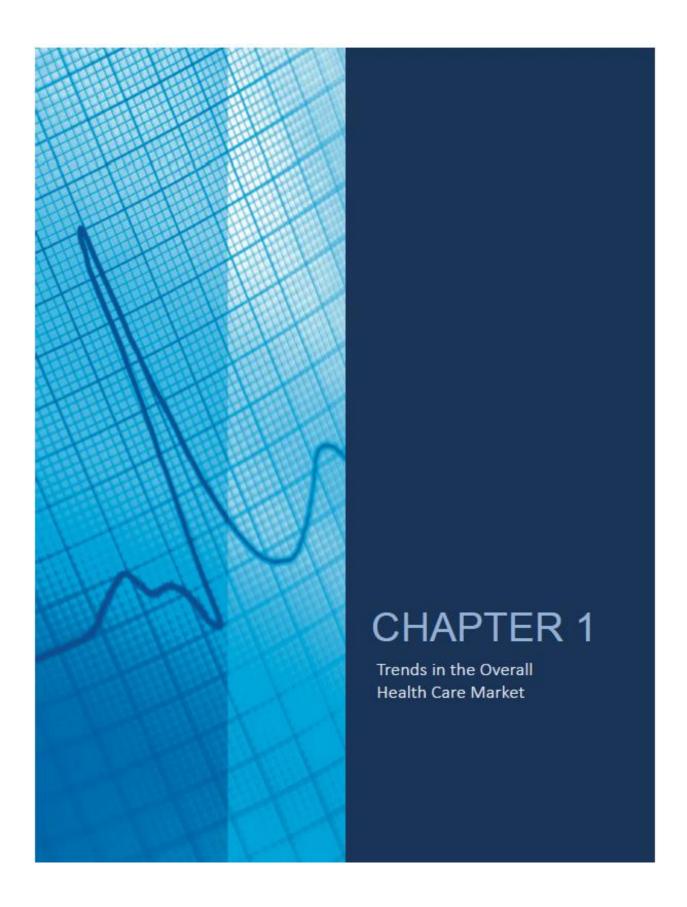
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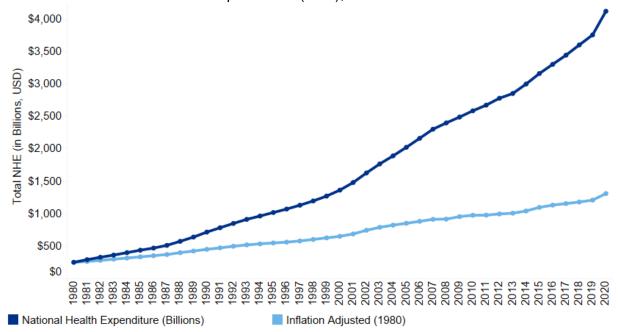
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## **CHAPTER 1: Trends in the Overall Health Care Market**

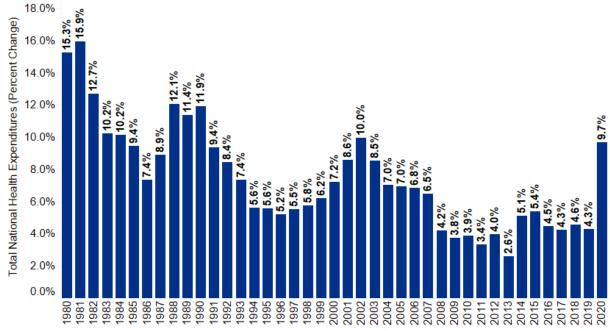
Chart 1.1: Total National Health Expenditures (NHE), 1980-2020



Source: Centers for Medicare & Medicaid Services. Data realeased December 2021.

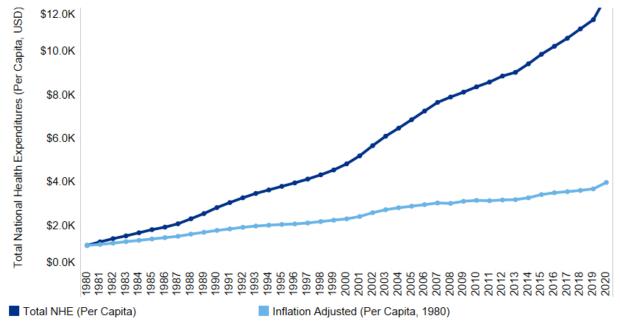
(1) CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see <a href="https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf">https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf</a>
(2) Inflation Adjusted (1980) are expressed in 1980 dollars; adjusted using the overall Consumer Price Index for Urban Consumers

Chart 1.2: Annual Percent Change in Total National Health Expenditures (NHE), 1980-2020



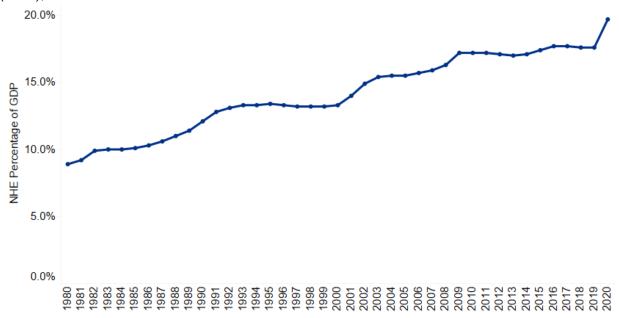
Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 2021. Note: CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see https://www.cms.gov/files/document/summary-benchmark-changes-2019.pd

Chart 1.3: Per Capita National Health Expenditures (NHE), 1980-2020



Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 2021.

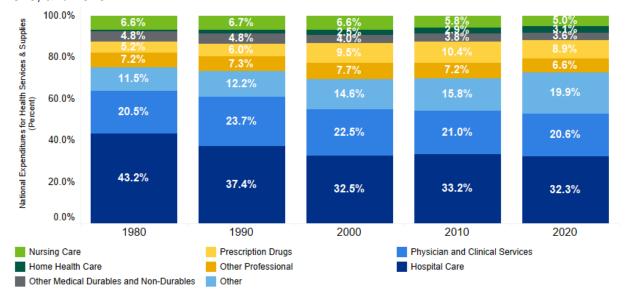
Chart 1.4: National Health Expenditures (NHE) as a Percentage of Gross Domestic Product (GDP), 1980-2020



Source: NHE Data: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 2021. Note: CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see https://www.cms.gov/files/document/summary-benchmark-changes-2019.

Notes:
(1) CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see <a href="https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf">https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf</a>
(2) Inflation Adjusted (1980) are expressed in 1980 dollars; adjusted using the overall Consumer Price Index for Urban Consumers.

Chart 1.5: National Expenditures for Health Services and Supplies by Category, 1980, 1990, 2010, and 2020



Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 2021.

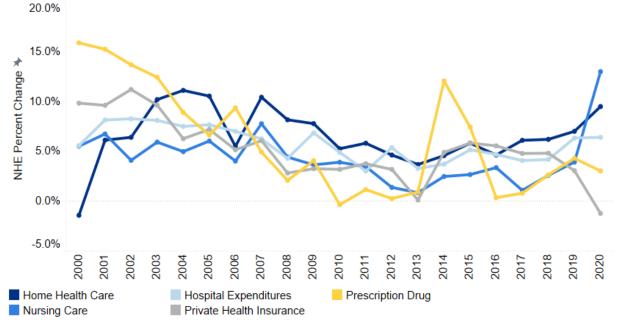
(1) CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see https://www.cms.gov/files/document/summ

(2) National expenditures to health servies and supplies excludes medical research and medical facilities construction.

"Other professional" includes dental and other non-physician professional services.

(4) "Other" includes net cost of insurance and administration, government public health activities, and other personal health care. (5) Percentages across categories may not sum to 100 percent

Chart 1.6: Annual Percent Change in National Health Expenditures (NHE) for Selected Health Services and Supplies, 2000-2020

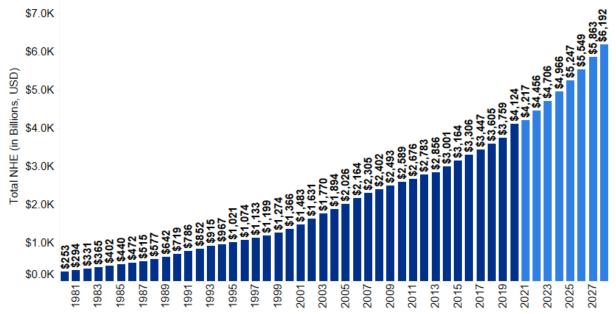


Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 2021. Notes:

(1) CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf

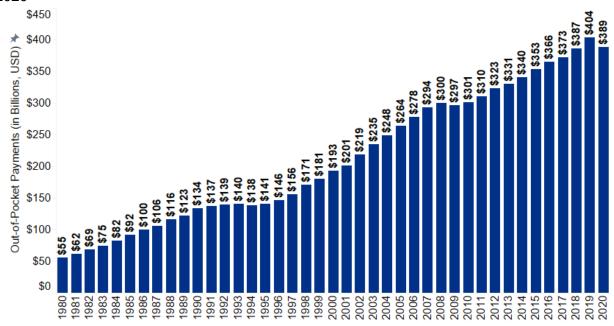
(2) Private Health Insurance includes administration and net cost

Chart 1.7: National Health Expenditures (NHE) with Projections, 1980-2028



Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 2021.

**Chart 1.8:** Consumer Out-of-pocket Payments for National Health Expenditures (NHE), 1980-2020



Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 2021.

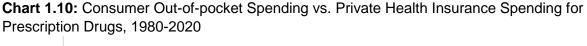
Note: CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see <a href="https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf">https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf</a>

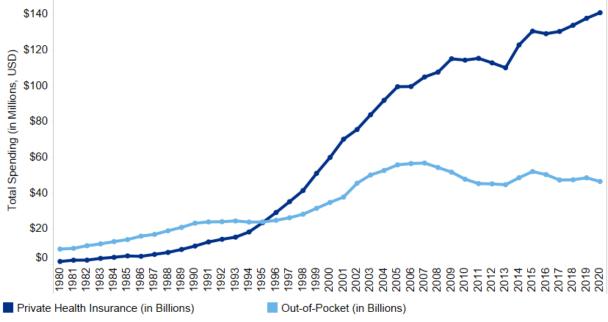
<sup>(1)</sup> CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see <a href="https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf">https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf</a>
(2) Years 2021 – 2028 are projections.

\$400 Total Prescription Drug Spending (in Millions, USD) \$350 \$300 \$250 \$200 \$150 \$100 \$50 1983 984 1985 986 1987 1988 1989 0661 1993 966 1991 1994

Chart 1.9: Total Prescription Drug Spending, 1980-2020

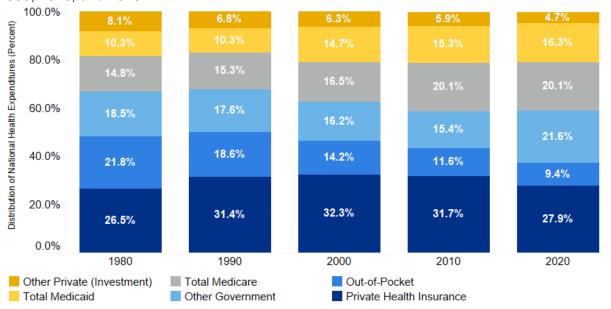
Source: Centers for Medicare & Medicaid Services. Data released December 2021. National Health Expenditures by types of service and source of funds, CY 1960-2020. https://www.cms.gov/files/zip/national-health-expenditures-type-service-and-source-funds-cy-1960-Note: CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf





Source: Centers for Medicare & Medicaid Services. Data released December 2021. National Health Expenditures by types of service and source of funds, CY 1960-2020. https://www.cms.gov/files/zip/national-health-expenditures-type-service-and-source-funds-cy-1960-2020.zip Note: CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf

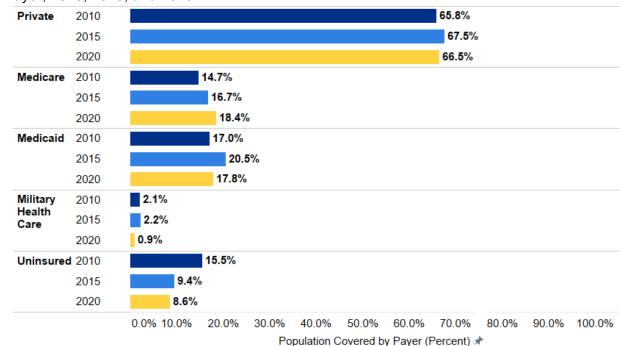
**Chart 1.11:** Distribution of National Health Expenditures by Source of Payment, 1980, 1990, 2000, 2010, and 2020



Source: Centers for Medicare & Medicaid Services. Data released December 2021.

(1) CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see <a href="https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf">https://www.cms.gov/files/document/summary-benchmark-changes-2019.pdf</a>
(2) Percentages across categories may not sum to 100 percent

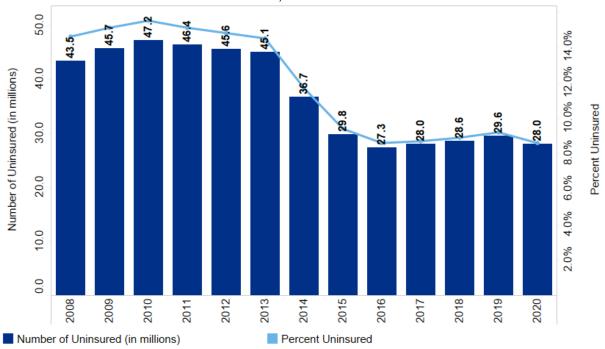
**Chart 1.12:** Distribution of Health Insurance Coverage, Percentage of Population Covered by Payer, 2010, 2015, and 2020



Source: US Census Bureau, Current Population Survey, 2020 Annual and Social Economic Supplement. Data released October 2021.

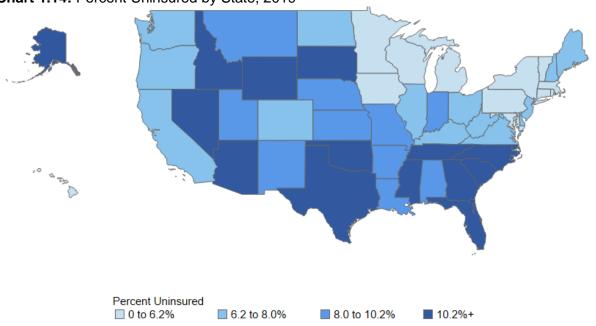
Note: Percentages across categories within the same year may not sum to 100 percent, as individuals may maintain coverage from multiple payers (e.g. Medicare and Medicaid, Medicare and private, etc.)

Chart 1.13: Number and Percent Uninsured, 2008-2020



(1) US Census Bureau, Health Insurance Coverage in the United States: 2020. Data released September 2020 (for year 2020).
(2) U.S. Census Bureau, American Community Surveys (ACS). Table HIC-4\_ACS. Health Insurance Coverage Status and Type of Coverage by State All Persons (for years 2008 to 2019).

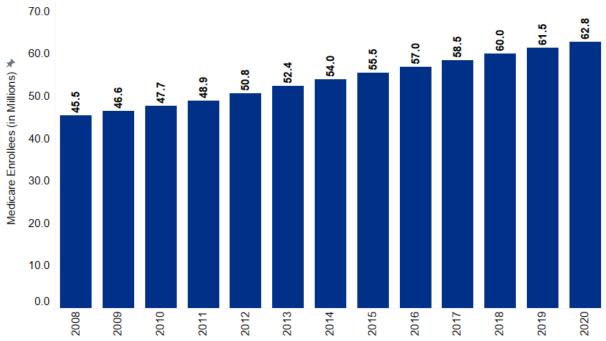
Chart 1.14: Percent Uninsured by State, 2019



Source: US Census Bureau, Health Insurance Coverage in the United States: 2020. Data released September 2020. Table HIC-4\_ACS. Health Insurance Coverage Status and Type of Coverage by State All Persons: 2008 to 2019.

Note: The percent uninsured by state represents a weighted average uninsured rate for the year indicated.

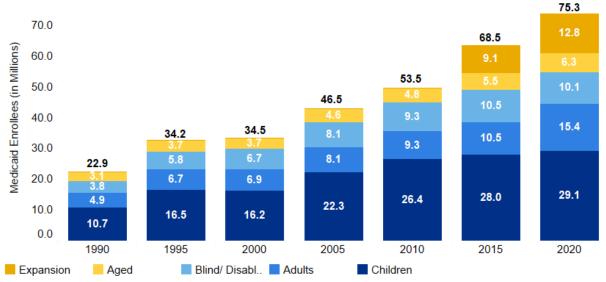
Chart 1.15: Medicare Enrollees, 2008-2020



Source: Centers for Medicare & Medicaid Services. Medicare Total Enrollment (for years 2008-2020) Table MDCR ENROLL AB 1. Data downloaded June 2022. <a href="https://data.cms.gov/summary-statistics-on-beneficiary-enrollment/medicare-and-medicaid-reports/medicare-total-enrollment/medicare-and-medicaid-reports/medicare-total-enrollment/medicare Advantage; Note: Hospital insurance (Part A) enrollees and/or Supplementary Medical Insurance (Part B) enrollees, including enrollees with Medicare Advantage;

includes all persons (aged and disabled).

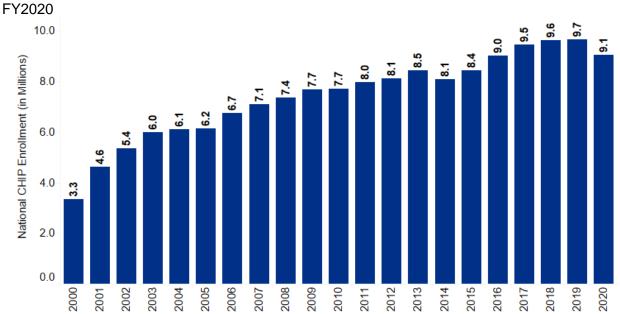
Chart 1.16: Medicaid Enrollees, 1990, 1995, 2000, 2005, 2010, 2015, and 2020



- (1) Centers for Medicare & Medicaid Services 2012 CMS Statistics .Table I.16 (for year 1990). Data downloaded June 2022. https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/CMS-Statistics-Reference-Booklet/Downloads/CMS Stats 2012.

  (2) Centers for Medicare & Medicaid Services 2016 CMS Statistics . Table I.16 (for years 1995- 2015). Data downloaded June 2022.
- https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/CMS-Statistics-Reference-Booklet/Downloads/2016 CMS Stats.pdf
- (3) Centers for Medicare & Medicaid Services 2022 CMS Fast Facts. Table CMS Program Data-Populations (for year 2020). Data downloaded June 2022. https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/CMS-Fast-Facts
- (1) Expansion category added as a category after 2015.
- (2) Total enrollment numbers include Title XIX and other territory programs. Total enrollment sum does not equal the sum of Expansion, Aged, Blind/Dis..

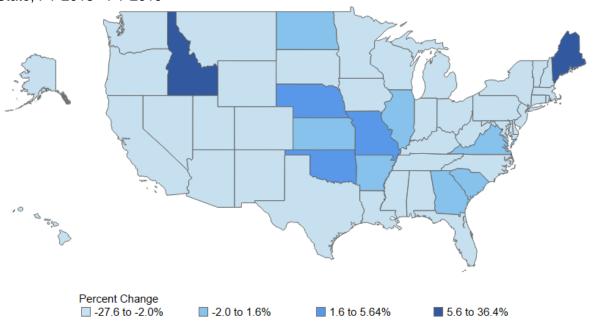
Chart 1.17: National Children's Health Insurance Program (CHIP) Enrollment, FY2000 -



Source: Centers for Medicare & Medicaid Services. Data downloaded November 2021. Number of Children Ever Enrolled Report. https://www.medicaid.gov/chip/downloads/fy-2020-childrens-enrollment-report.pdf Notes:

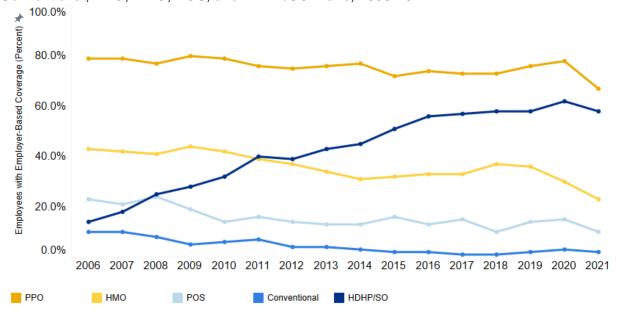
Graph to include number of children enrolled at any point in the year.
 2009 CHIP enrollment reflects revised data released by Centers for Medicare & Medicaid Services on February 1, 2011.

Chart 1.18: Percent Change in Children's Health Insurance Program (CHIP) Enrollment by State, FY 2018 - FY 2019



Source: Centers for Medicare & Medicaid Services. Data downloaded December 2021. Number of Children Ever Enrolled Report. https://www.medicaid.gov/chip/downloads/fy-2020-childrens-enrollment-report.pdf

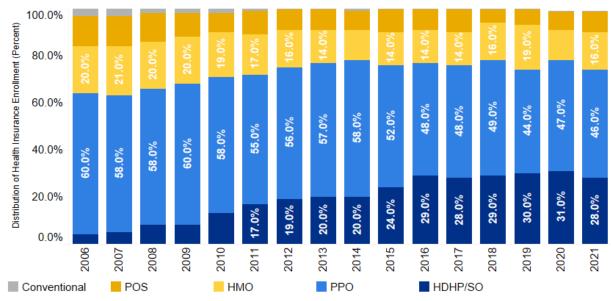
**Chart 1.19:** Percentage of Employees with Employer-based Coverage Who Can Choose Conventional, PPO, HMO, POS, and HDHP/SO Plans, 2006-2021



Source: The Kaiser Family Foundation and Health Research and Educational Trust. Data Released November 10, 2021. Employer Health Benefits: 2021. https://www.kff.org/health-costs/report/2021-employer-health-benefits-survey/

- (1) PPO: Preferred Provider Organization; HMO: Health Maintenance Organization. HDHP/SO: High-Deductible Health Plan with Savings Option
- Conventional plans refer to traditional indemnity plans.
- (3) In 2006, the survey began asking about HDHP/SO, high deductible health plans with a savings option.

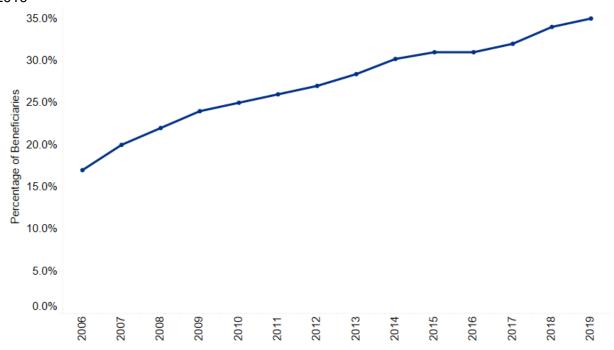
**Chart 1.20:** Distribution of Employer-sponsored Health Insurance Enrollment by Type of Plan, 2006-2021



Source: The Kaiser Family Foundation and Health Research and Educational Trust. Data Released November 10, 2021. Employer Health Benefits: 2021. https://www.kff.org/health-costs/report/2021-employer-health-benefits-survey/

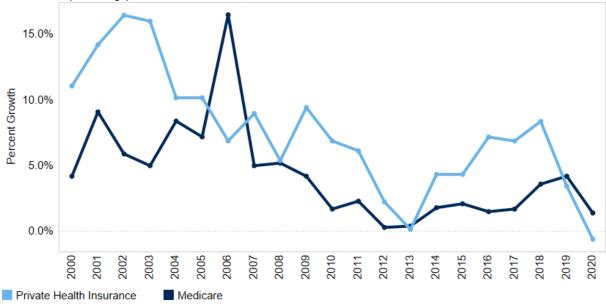
- (1) PPO: Preferred Provider Organization; HMO: Health Maintenance Organization. HDHP/SO: High-Deductible Health Plan with Savings Option
- (2) Conventional plans refer to traditional indemnity plans
- (3) In 2006, the survey began asking about HDHP/SO, high deductible health plans with a savings option.
- (4) Percentages across categories may not sum to 100 percent

Chart 1.21: Percentage of Medicare Beneficiaries Enrolled in Medicare Managed Care, 2006-2019



Source: Centers for Medicare & Medicaid Services, Data downloaded December 2021 (for years 2006-2019).

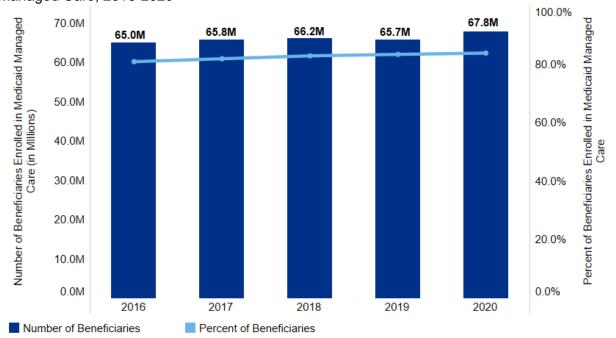
Chart 1.22: Annual Percent Growth in Medicare Spending per Beneficiary vs. Private Health Insurance Spending per Enrollee, 2000-2020



Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 2021. NHE Table 21

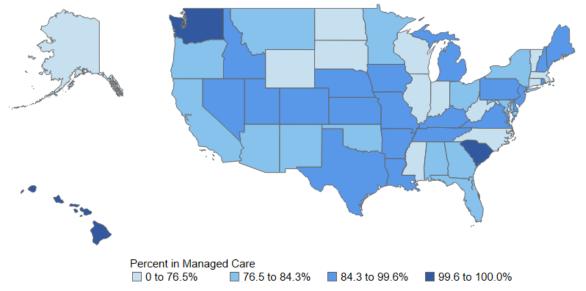
<sup>(1)</sup> CMS completed a benchmark revision in 2019, introducing changes in methods, definitions and source data that are retroactively applied to the entire time series. For more information on this revision, see <a href="https://www.cms.gov/files/document/summary-1">https://www.cms.gov/files/document/summary-1</a>
(2) Data reflects spending on benefits commonly covered by Medicare and Private Health Insurance.

**Chart 1.23:** Number and Percentage of Medicaid Beneficiaries Enrolled in Medicaid Managed Care, 2016-2020



Source: Centers for Medicare & Medicaid Services, Managed Care Enrollment Summary. Downloaded June 2022 (for years 2016-2020). https://data.medicaid.gov/dataset/52ed908b-0cb8-5dd2-846d-99d4af12b369

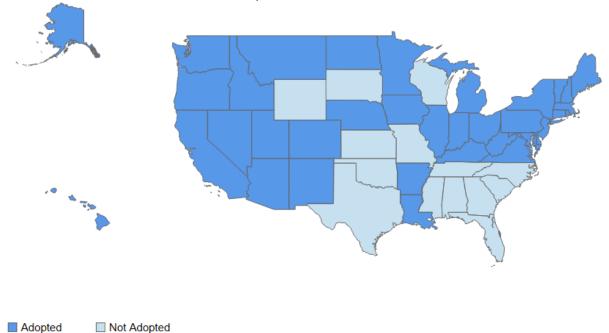
**Chart 1.24:** Percentage of Medicaid Beneficiaries Enrolled in Medicaid Managed Care by State, 2019



Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Medicaid Managed Care Enrollment and Program Characteristics. Downloaded December 2021.

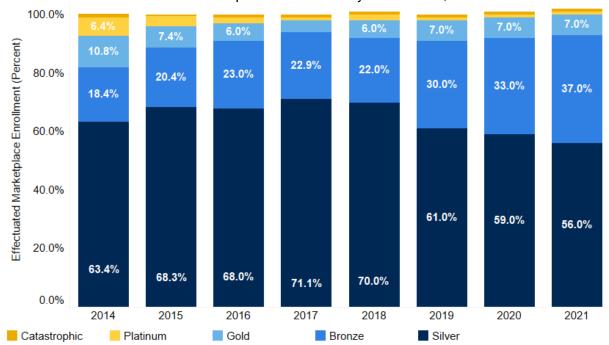
Note: CMS has not released data for 2012 total Medicaid managed care enrollment.

Chart 1.25: Status of State Medicaid Expansion Decisions, 2021



Source: Kaiser Family Foundation. Data as of November 2021. Current Status of State Medicaid Expansion Decisions. Kaiser Family Foundation Note: Arizona, Arkansas, Indiana, Iowa, Michigan, Montana, New Hampshire, New Mexico, Ohio, and Utah have approved Section 1115 waivers to operate their Medicaid expansion programs in ways not otherwise allowed under federal law. Arkansas continues to operate its expansion program through a waiver, however, the waiver provisions related to the work requirement and reduction of retroactive eligibility were set aside by court on March 27, 2019.

Chart 1.26: Total Effectuated Marketplace Enrollment by Metal Level, 2014-2021



Source: Centers for Medicare & Medicaid Services. Data downloaded December 2021. Health Insurance Marketplaces Open Enrollment Period Final Enrollment Report. <a href="https://www.cms.gov/files/document/health-insurance-exchanges-2021-open-enrollment-report-final.pdf">https://www.cms.gov/files/document/health-insurance-exchanges-2021-open-enrollment-report-final.pdf</a>
Note: Percentages across categories may not sum to 100 percent

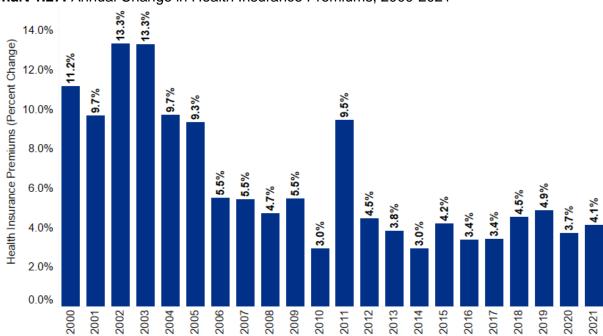
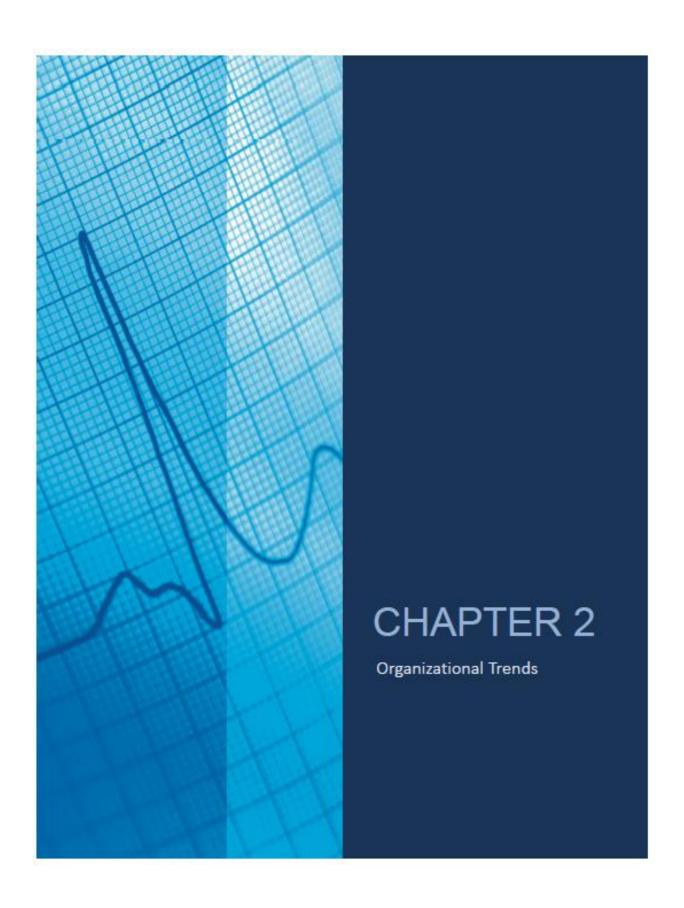


Chart 1.27: Annual Change in Health Insurance Premiums, 2000-2021

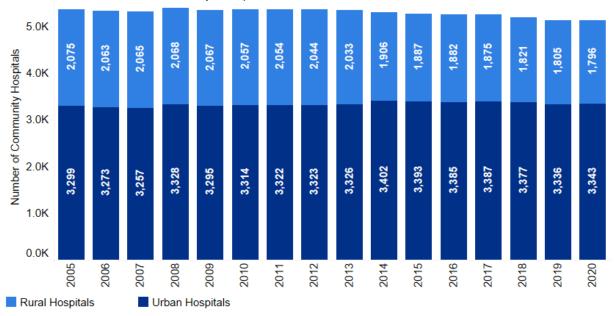
Source: The Kaiser Family Foundation and Health Research and Educational Trust. Data released November

2021.https://www.kff.org/report-section/ehbs-2021-section-1-cost-of-health-insurance/ Note: These premiums are for family coverage, not single coverage



# **CHAPTER 2: Organizational Trends**

Chart 2.1: Number of Community Hospitals, 2005-2020

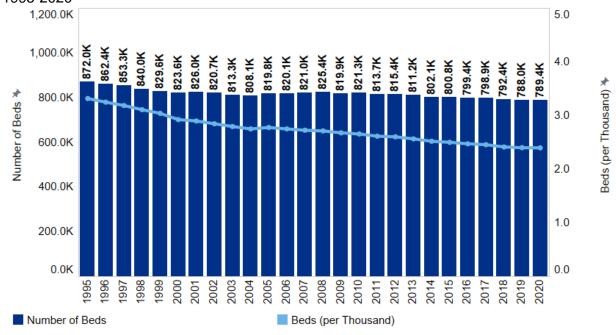


Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. Notes:

(1) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

(2) Data on the number of urban and rural hospitals in 2004 and beyond were collected using coding different from previous years to reflect new Centers for Medicare & Medicaid Services wage area designations.

Chart 2.2: Number of Beds and Number of Beds per 1,000 Persons in Community Hospitals, 1995-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. US Census Bureau: National and State Population Estimates, 2020 Link: https://www2.census.gov/programs-surveys/popest/tables/2020/
Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

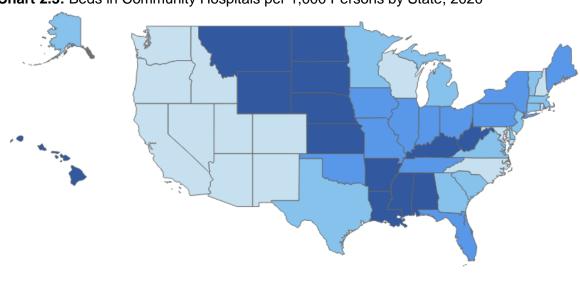


Chart 2.3: Beds in Community Hospitals per 1,000 Persons by State, 2020

Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. US Census Bureau: National and State Population Estimates, 2020 Link: <a href="https://www2.census.gov/programs-surveys/popest/tables/2020/">https://www2.census.gov/programs-surveys/popest/tables/2020/</a>. Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

2.5 to 3.1

3.1 to 4.8

2.1 to 2.5

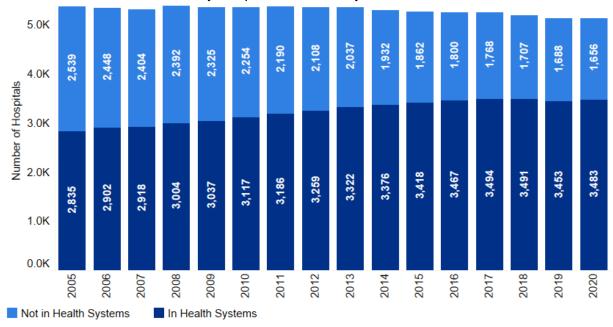


Chart 2.4: Number of Community Hospitals in Health Systems, 2005-2020

Beds Per.. 1.6 to 2.1

Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

<sup>(1)</sup> Hospitals that are part of a corporate body that may own and/or manage health provider facilities or health-related subsidiaries as well as non-health-related facilities including freestanding and/or subsidiary corporations.

<sup>(2)</sup> Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

8.0K 7.0K 5,930 Number of Ambulatory Services ▼ 5,811 6.0K 5,352 5.0K 4.0K 3.0K 2.0K 1.0K 0.0K

Chart 2.5: Number of Medicare-certified Ambulatory Surgical Centers, 2015, 2019, and 2020

Source: Medicare Payment Advisory Commission. March 2021. Report to the Congress: Medicare Payment Policy. https://www.medpac.gov/wp-content/uploads/import data/scrape files/docs/default-source/reports/mar21 medpac report to the congress sec.pdf

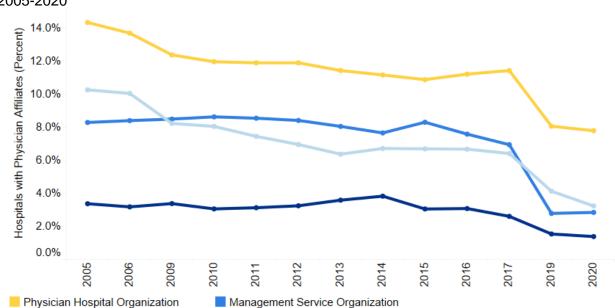


Chart 2.6: Percentage of Community Hospitals with Physician Affiliates by Type of Relationship, 2005-2020

2019

2020

Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

2015

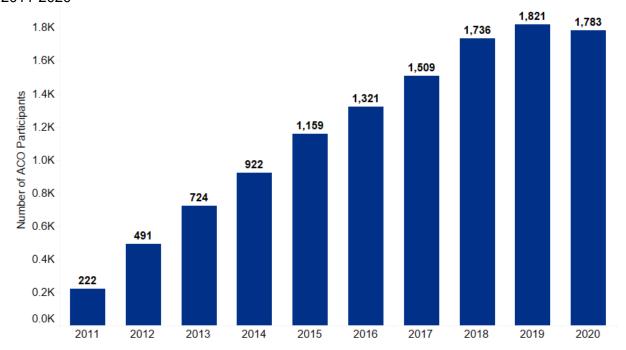
Independent Practice Association

Group Practice without Walls

<sup>(1)</sup> A hospital is considered to have a physician affliate if the relationship exists as part of the hospital or a system or network of which the hospital is a

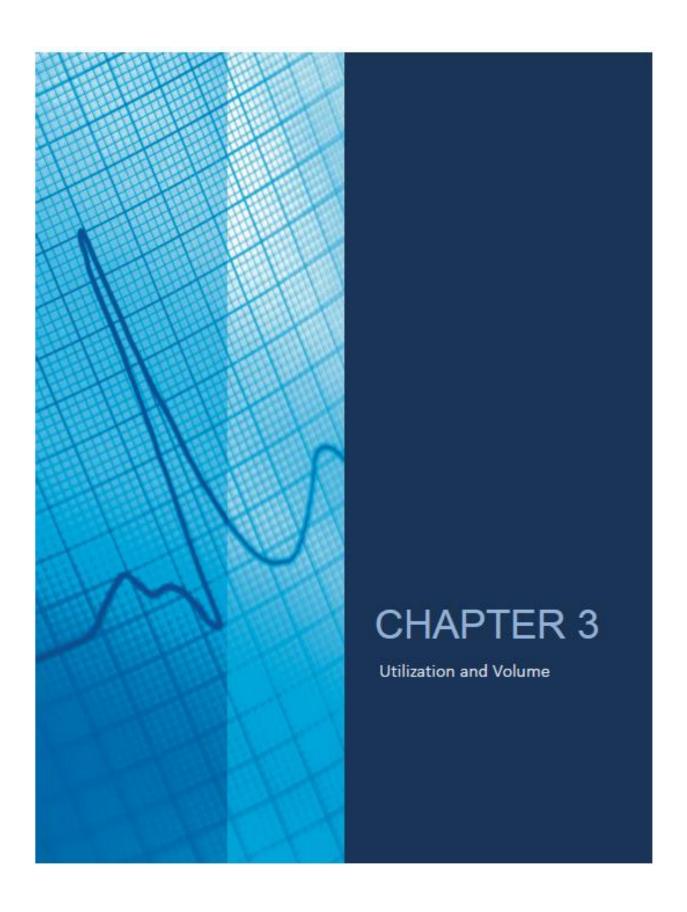
<sup>(2)</sup> Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

**Chart 2.7:** Number of Community Hospitals and Health Systems Reporting ACO Participation, 2011-2020



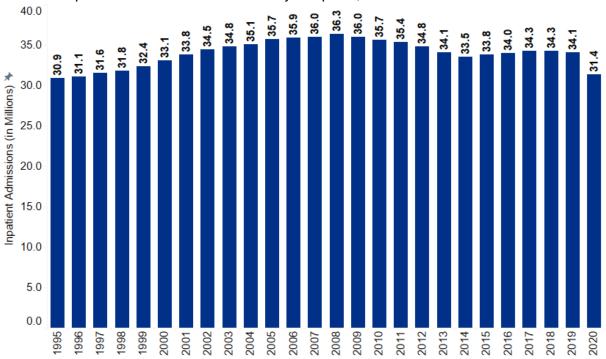
Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.



## **CHAPTER 3: Utilization and Volume**

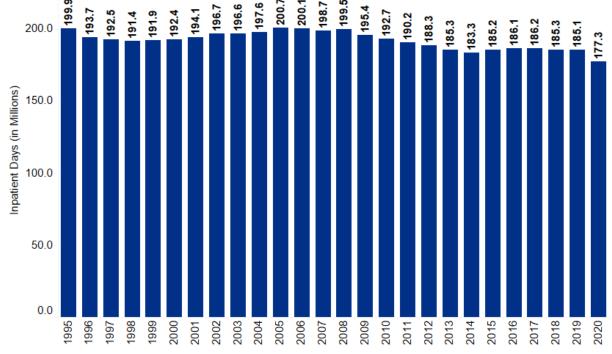
Chart 3.1: Inpatient Admissions in Community Hospitals, 1995-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

Chart 3.2: Total Inpatient Days in Community Hospitals, 1995-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

140.0 119.5 117.8 117.6 117.6 115.4 113.7 120.0 107.8 Inpatient Admissions (per 1,000 Persons) ▼ 105.4 105.7 105.4 04.4 103.9 105.0 100.0 80.0 60.0 40.0 20.0 0.0

Chart 3.3: Inpatient Admissions in Community Hospitals per 1,000 Persons, 1995-2020

Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. US Census Bureau: National and State Population Estimates, 2020 Link: https://www2.census.gov/programs-surveys/popest/tables/2020 Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

2010

2012 2013 2014 2015 2016

2008 2009

2007

2005 2006

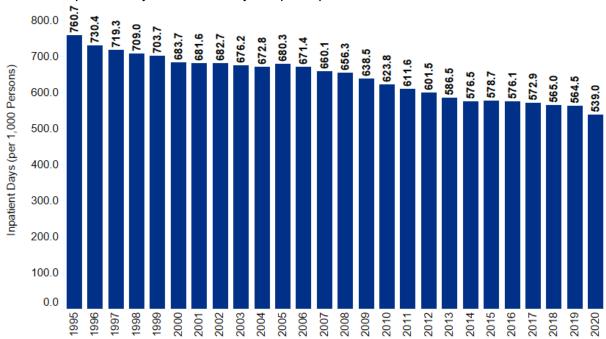


Chart 3.4: Inpatient Days in Community Hospitals per 1,000 Persons, 1995-2020

2004

2003

1996 1997 1999 2000 2001 2002

Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. US Census Bureau: National and State Population Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

6.2 6.1 6 5.7 5.7 5.6 5.6 5.5 5.5 Average Length of Stay (in Days) 1 2003 2005 2006 2008 2009 2000 2001 2002 2004 2007

Chart 3.5: Average Length of Stay in Community Hospitals, 1995-2020

Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

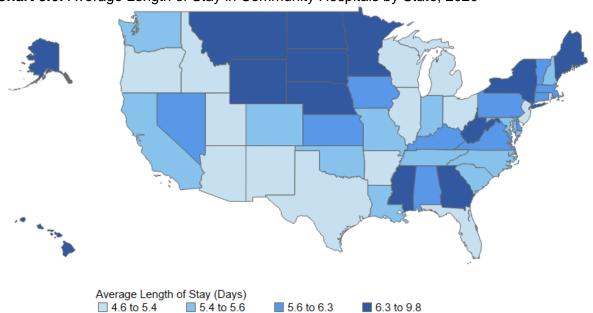
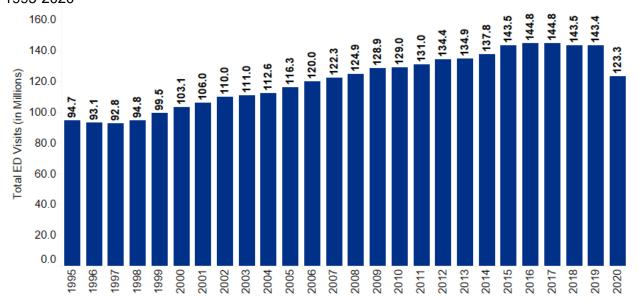


Chart 3.6: Average Length of Stay in Community Hospitals by State, 2020

Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

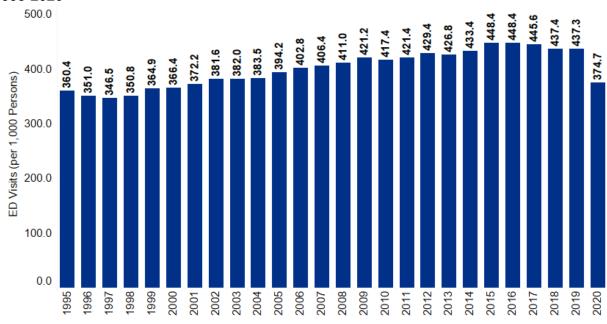
Chart 3.7: Emergency Department Visits and Emergency Departments in Community Hospitals, 1995-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. US Census Bureau: National and State Population Estimates, 2020 Link: https://www2.census.gov/programs-surveys/popest/tables/2020/

- (1) Emergency departments are defined as hospitals reporting ED visits in the AHA Annual Survey.
  (2) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

Chart 3.8: Hospital Emergency Department Visits in Community Hospitals per 1,000 Persons, 1995-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. US Census Bureau: National and State Population Estimates, 2020 Link: https://www2.census.gov/programs-surveys/popest/tables/2020/

- (1) Emergency departments are defined as hospitals reporting ED visits in the AHA Annual Survey.
- (2) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.



Chart 3.9: Total Hospital Outpatient Visits in Community Hospitals, 1995-2020

Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

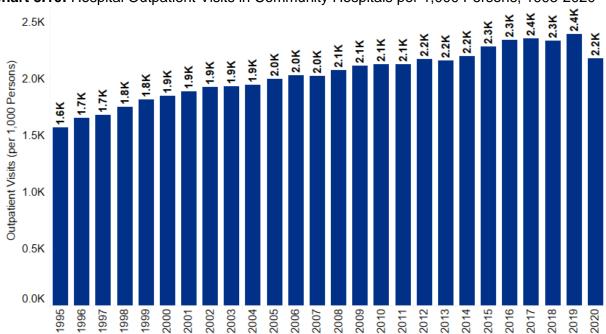
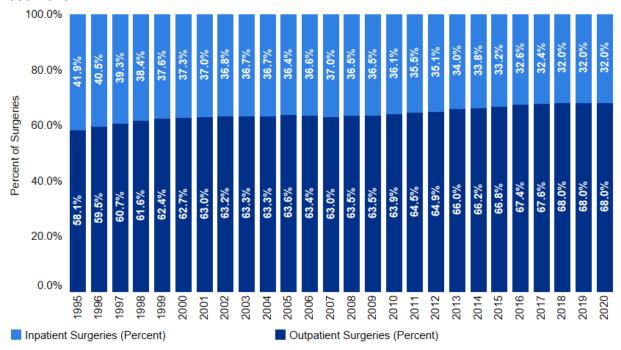


Chart 3.10: Hospital Outpatient Visits in Community Hospitals per 1,000 Persons, 1995-2020

Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. US Census Bureau: National and State Population Estimates, 2020 Link: <a href="https://www2.census.gov/programs-surveys/popest/tables/2020/">https://www2.census.gov/programs-surveys/popest/tables/2020/</a>

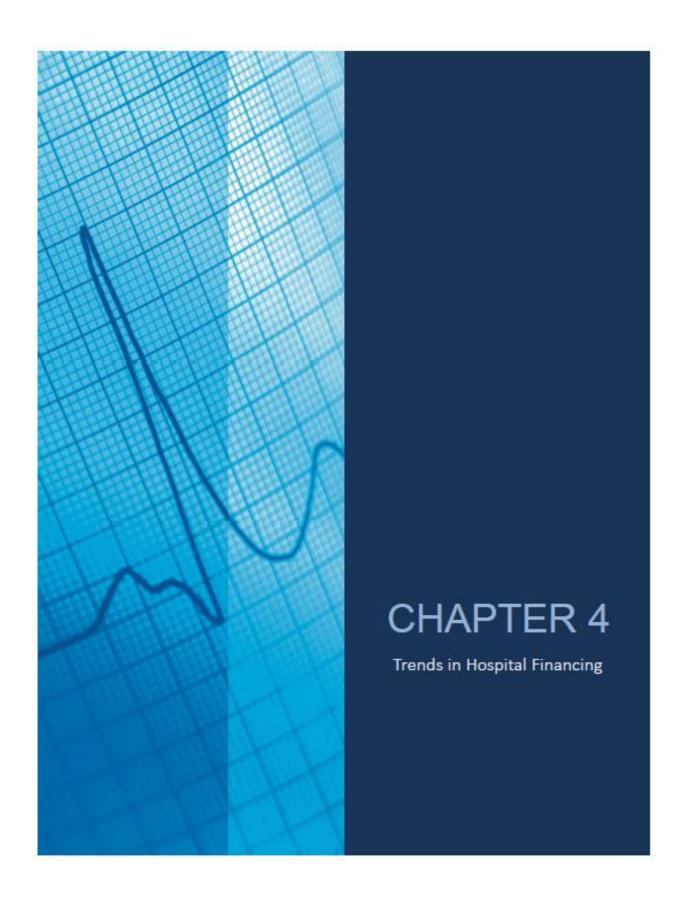
Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

**Chart 3.11:** Percentage Share of Inpatient vs. Outpatient Surgeries in Community Hospitals, 1995-2020



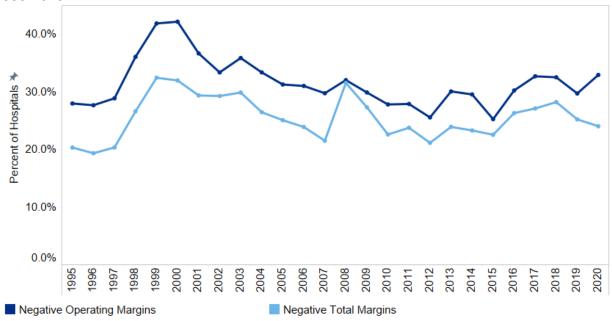
Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.



# **CHAPTER 4: Trends in Hospital Financing**

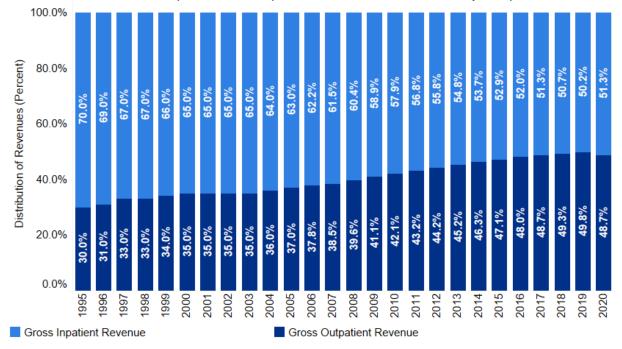
**Chart 4.1:** Percentage of Community Hospitals with Negative Total and Operating Margins, 1995-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals Notes:

- (1) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.
- (2) Total Margin is calculated as the difference between total net revenue and total expenses divided by total net revenue.
  (3) Operating Margin is calculated as the difference between operating revenue and total expenses divided by operating revenue.

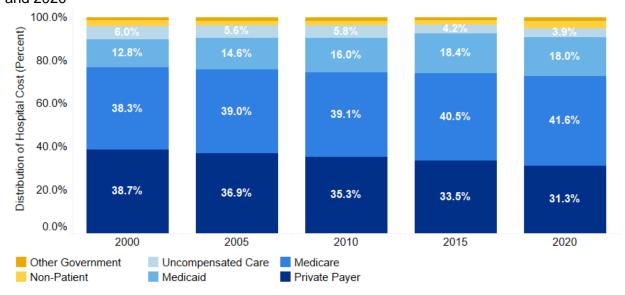
Chart 4.2: Distribution of Inpatient vs. Outpatient Revenues in Community Hospitals, 1995-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

Chart 4.3: Distribution of Community Hospital Cost by Payer Type, 2000, 2005, 2010, 2015, and 2020

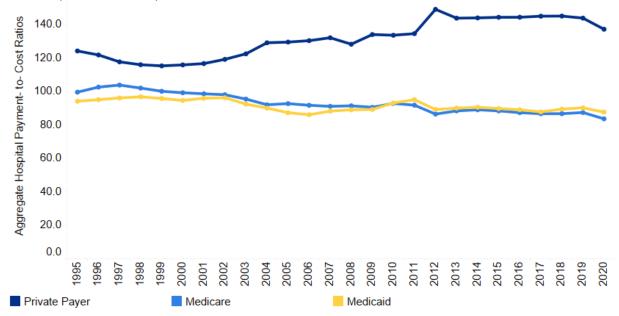


Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

- (1) Non-patient represents revenue from cafeterias, parking lots, gift shops and other non-patient care operating services and are not attributed to any one payer.
- (2) Uncompensated care represents bad debt expense and charity care expense, at cost.
- (3) Private payer formulas were updated in 2014 to account for the change in bad debt calculations, with bad debt now reported as a deduction from revenue rather than an expense.
- (4) Percentages were rounded, so they do not add to 100 percent in all years.

  (5) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

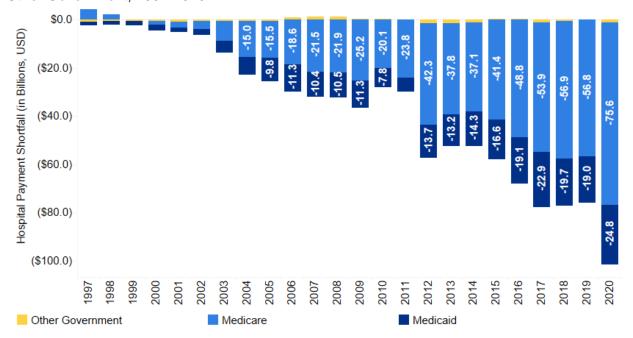
Chart 4.4: Aggregate Community Hospital Payment-to-Cost Ratios for Private Payers, Medicare, and Medicaid, 1995-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

- (1) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.
- (2) Medicaid category includes Medicaid Disproportionate Share Hospital payments
- (3) Medicare category includes Medicare Disproportionate Share Hospital payments.

**Chart 4.5:** Community Hospital Payment Shortfall Relative to Costs for Medicare, Medicaid and Other Government, 1997-2020

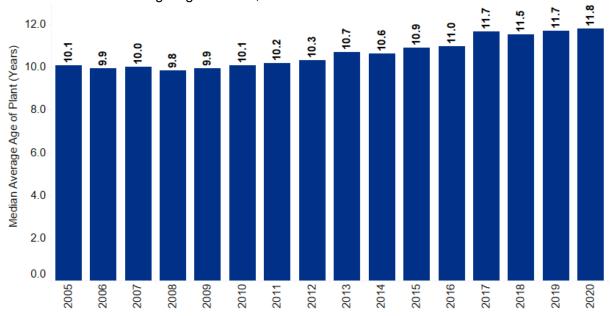


Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

(1) Costs reflect a cap of 1.0 on the cost-to-charge ratio.

(2) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

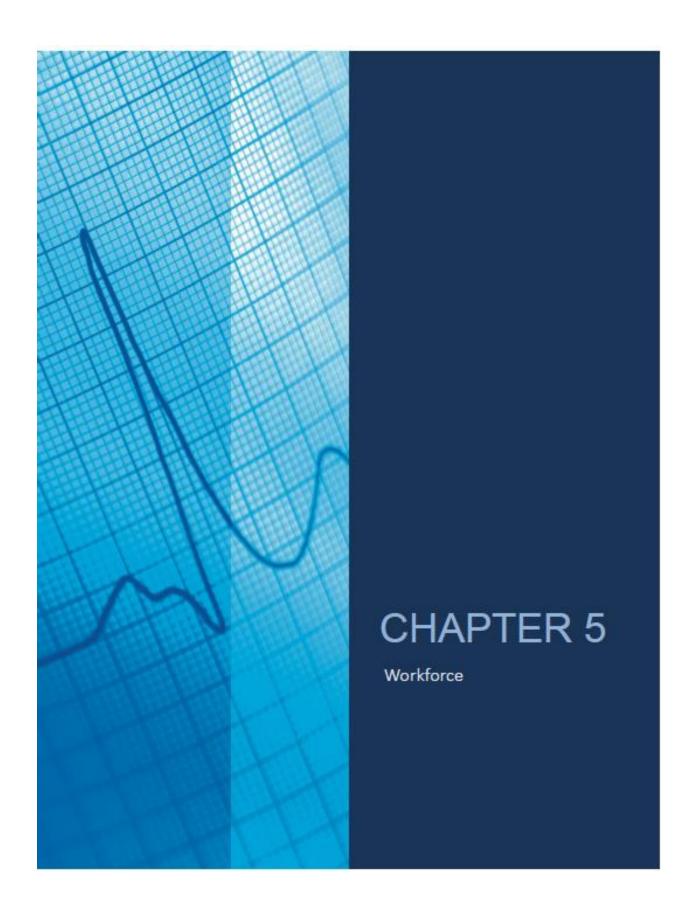
Chart 4.6: Median Average Age of Plant, 2005-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals. Notes:

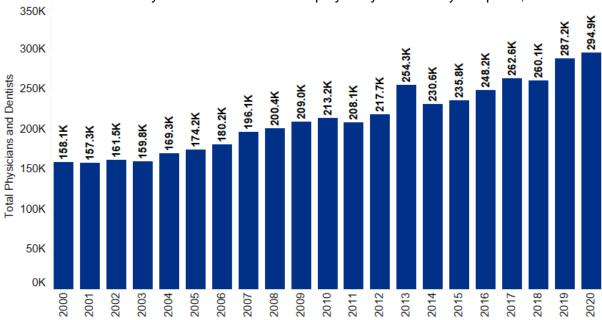
<sup>(1)</sup> Average age of plant is defined as a "ratio [that] provides a measure of the average age of the hospital's fixed assets in years. This calculation assumes that the hospital uses straight-line depreciation. This method of estimating age has been found to be reasonable accurate in prior research studies. Lower values indicate a new fixed asset base and thus less need for near term replacement" https://aharesourcecenter.wordpress.com/tag/ayerage-age-of-plant/

<sup>(2)</sup> Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.



## **CHAPTER 5: Workforce**

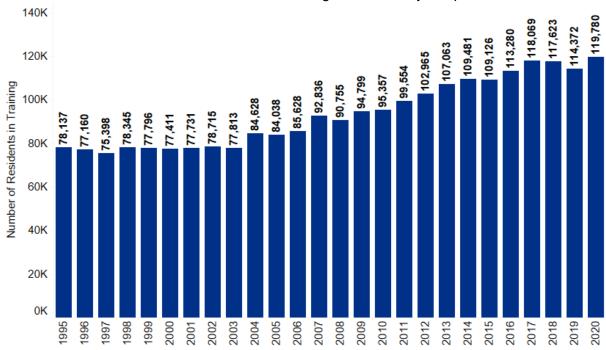
Chart 5.1: Number of Physicians and Dentists Employed by Community Hospitals, 2000-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals

- Includes full-time and part-time physicians, dentists, medical interns and residents, and dental interns and residents
   Estimates for 2013 represent an anomaly due to estimation of full-time residents for non-registered community hospitals.
   Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

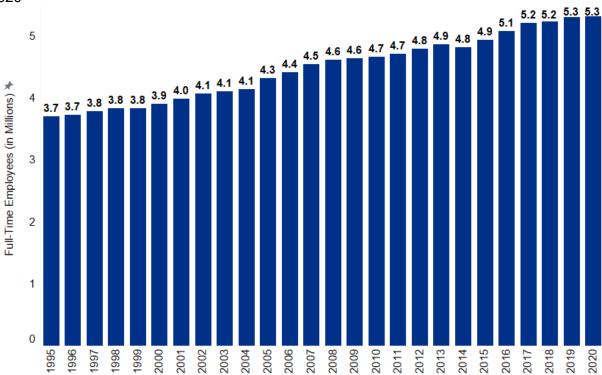
Chart 5.2: Medical and Dental Residents in Training in Community Hospitals, 1995-2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals

- (1) Rsidents in training Include full-time equivalent interns and residents.
- (2) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

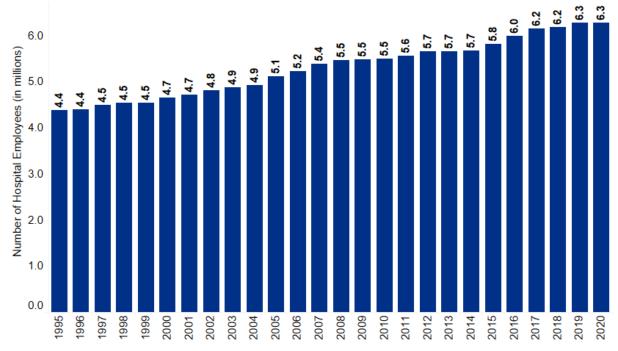
**Chart 5.3:** Total Full -Time Equivalent Employees Working in Community Hospitals, 1995 - 2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

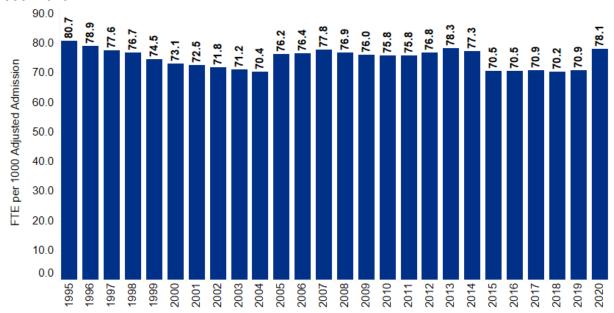
**Chart 5.4:** Number of Full-time and Part-time Hospital Employees in Community Hospitals, 1995- 2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals

Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

**Chart 5.5:** Full-Time Equivalent Employees per Adjusted Admission in Community Hospitals, 1995-2020



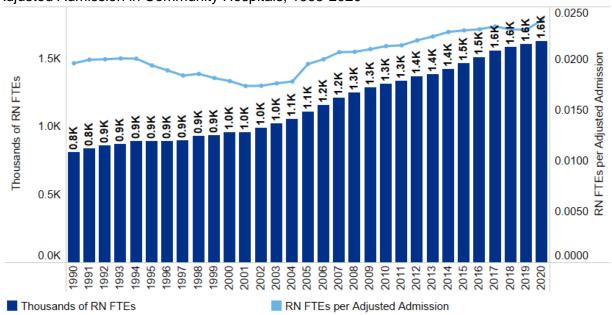
Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

Notes:

(1) An aggregate measure of workload reflecting the number of inpatient admissions, plus an estimate of the volume of outpatient services, expressed in units equivalent to an inpatient admission in terms of level of effort.

(2) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

Chart 5.6: Number of Registered Nurse (RN) Full-Time Employees (FTEs) and RN FTEs per Adjusted Admission in Community Hospitals, 1995-2020

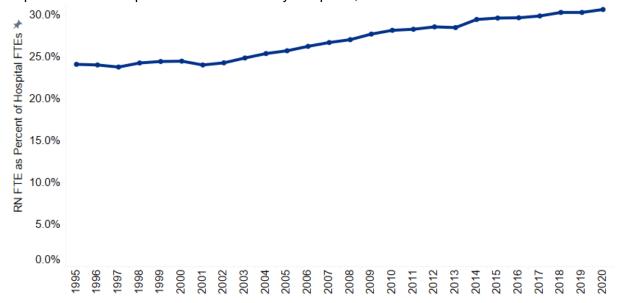


Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals.

(1) An aggregate measure of workload reflecting the number of inpatient admissions, plus an estimate of the volume of outpatient services, expressed in units equivalent to an inpatient admission in terms of level of effort.

(2) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

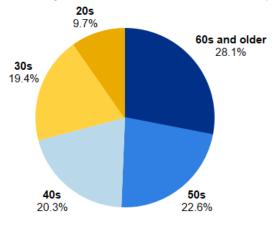
**Chart 5.7:** Registered Nurse (RN) Full-Time Employees (FTEs) as a Percentage of Total Hospital Full-Time Equivalents in Community Hospitals, 1995- 2020



Source: Analysis of American Hospital Association Annual Survey data, 2020, for community hospitals

(2) Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

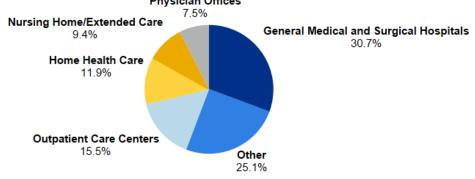
Chart 5.8: Percent Distribution of Registered Nurse (RN) Workforce by Age Group, 2020



Source: Journal of Nursing Regulation, Volume 12/Issue 1 Supplement April 2021 (updated January 2019), accessible at https://www.journalofnursingregulation.com/action/showPdf?pii=S2155-8256%2821%2900027-2

<sup>(1)</sup> An aggregate measure of workload reflecting the number of inpatient admissions, plus an estimate of the volume of outpatient services, expressed in units equivalent to an inpatient admission in terms of level of effort.

Chart 5.9: Registered Nurse (RN) Employment by Type of Provider, 2020 Physician Offices

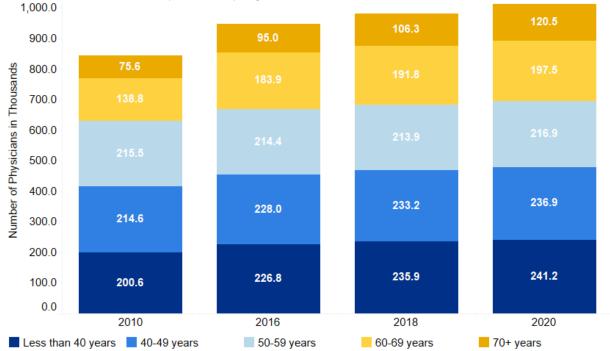


Source: Occupational Employment and Wages, May 2020

29-1141 Registered Nurses. https://www.bls.gov/oes/current/oes291141.htm#top Notes:

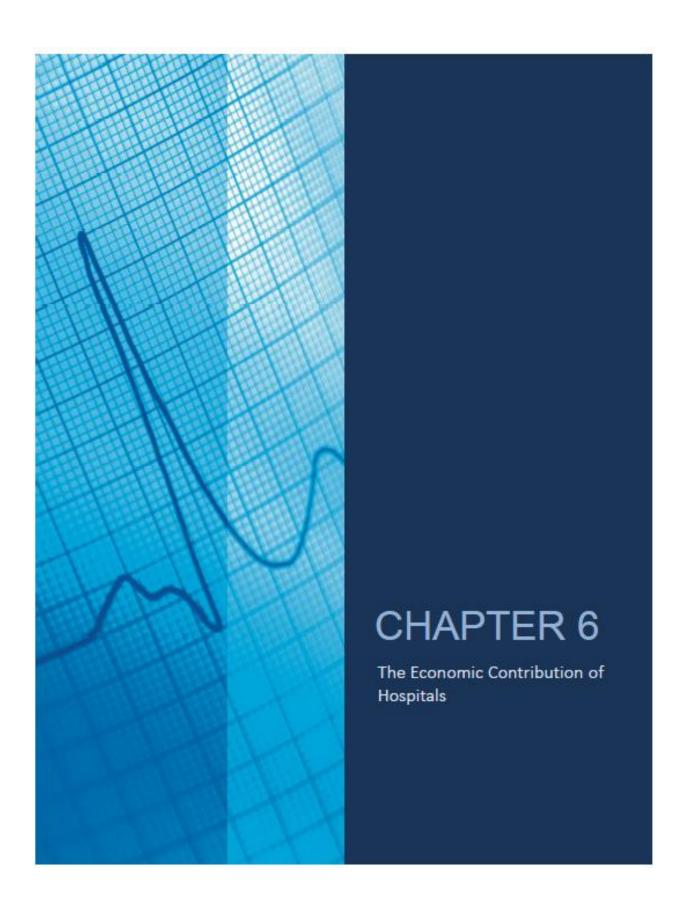
- (1) General Medical and Surgical category includes general medical and surgical hospitals, psychiatric and substance abuse hospitals and specialty hospitals.
- (2) Nursing Home/ Extended category includes nursing care facilities, residential care facilities, continuing care retirement communities and assisted living facilities and other residential care facilities.
- (3) Home Health Care category includes home healthcare services, elementary and secondary schools, individual and family services, community food and housing services and vocational rehabilitation services.
- (4) Other category includes but is not limited to offices of dentists and other health practitioners, state and local government designations, outpatient care centers, educational support services, health and personal care stores, insurance carriers, junior colleges, colleges, universities, professional schools, technical and trade schools and other schools and instruction.

Chart 5.10: Number of Physicians by Age, 2010, 2016, 2018, and 2020



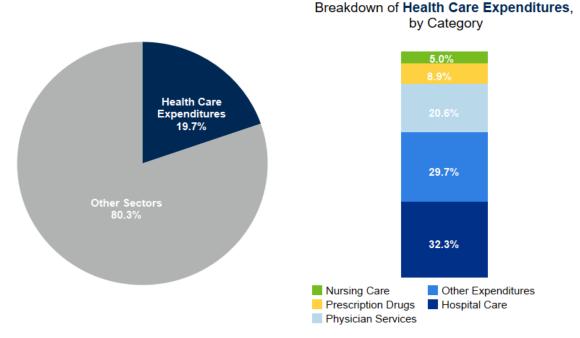
Source: Federation of State Medical Boards (FSMB). 2020 FSMB Census of Licensed Physicians.

Note: Number of physicians include actively licensed physicians. Resident physician licenses were excluded when such licenses could be identified.



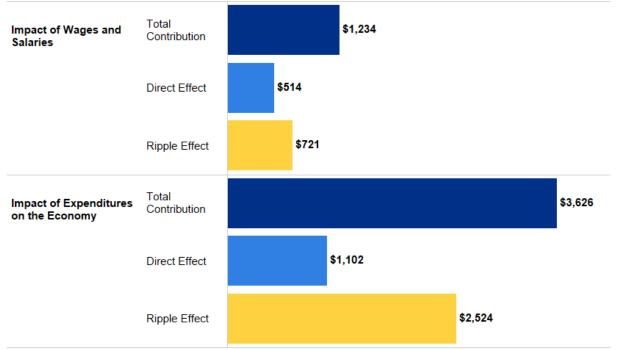
## **CHAPTER 6: The Economic Contribution of Hospitals**

**Chart 6.1:** National Health Expenditures as a Percentage of Gross Domestic Product and Breakdown by Category, 2020



Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data Downloaded November 2021. Note: Percentages were rounded, so they may not sum to 100 percent.

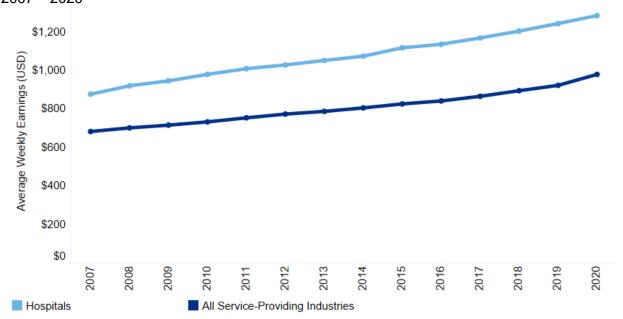
Chart 6.2: Impact of Community Hospitals on U.S. Economy (in Billions, USD), 2020



**Source:** Analysis, using BEA RIMS-II (2012/2019) multipliers, released in 2021, applied to 2020 American Hospital Association Annual Survey data. Note: Multipliers released in 2010 and subsequent years no longer include the national level multipliers needed for this chart. The sum of the direct and ripple effect may be less than or greater than the total contribution due to rounding.

Note: Community hospitals included all non-federal, short-term general and specialty hospitals whose facilities and services are available to the public.

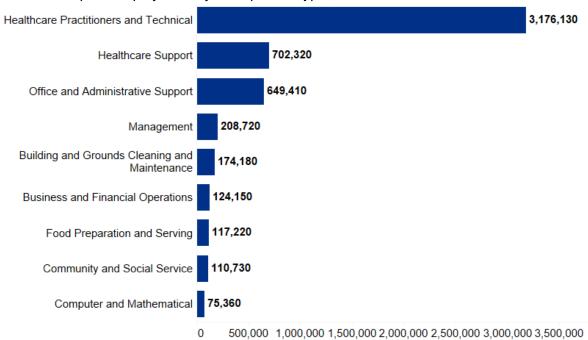
Chart 6.3: Average Weekly Earnings of Workers, Hospitals vs. All Service-Providing Industries, 2007 - 2020



Source: Department of Labor, Bureau of Labor Statistics, Current Employment Statistics (CES) Survey, customized tables. Data downloaded February

- (1) Hospitals category does not include public hospitals.(2) All service-providing industries category Includes physicians employed by hospitals.

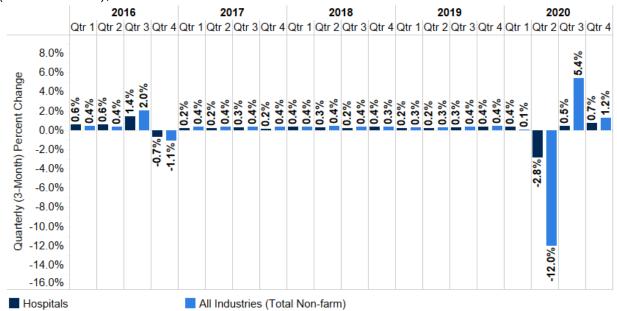
Chart 6.4: Hospital Employment by Occupation Type, 2020



Source: Department of Labor, Bureau of Labor Statistics, National Industry-Specific Occupational Employment and Wage Estimates. Data downloaded December 2021. https://www.bls.gov/oes/current/naics3 622000.htm Note: Hospitals do not include public hospitals.

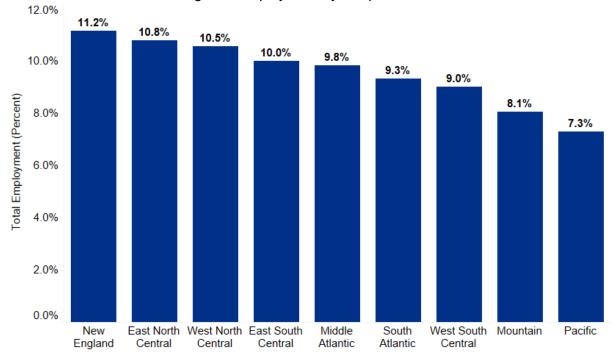
Number of Hospital Employment

**Chart 6.5:** Percent Change in Employment, Seasonally adjusted: Hospital vs. All Industries (Total Non-farm), 2011-2020



Source: Department of Labor, Bureau of Labor Statistics. Data downloaded December 2021. <a href="http://www.bls.gov/ces.">http://www.bls.gov/ces.</a> Note: Hospitals do not include public hospitals.

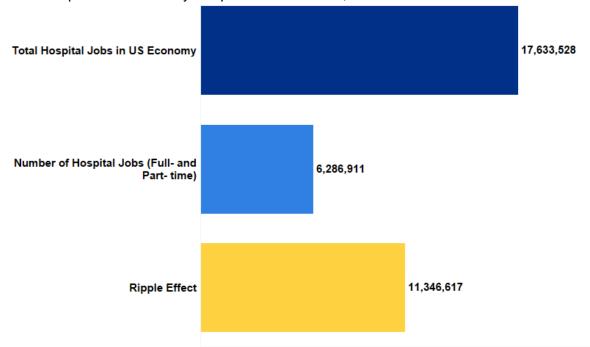
Chart 6.6: Percent of Total Regional Employment by Hospitals, 2020



Source: Analysis, using BEA RIMS-II (2012/2019) multipliers, released in 2021, applied to 2020 American Hospital Association Annual Survey data. Note: Multipliers released in 2010 and subsequent years no longer include the national level multipliers needed for this chart.

Note: US regional categories are based on US Census Bureau Regions and Divisions https://www2.census.gov/qeo/pdfs/maps-data/maps/reference/us regdiv.pdf

Chart 6.7: Impact of Community Hospitals on U.S. Jobs, 2020

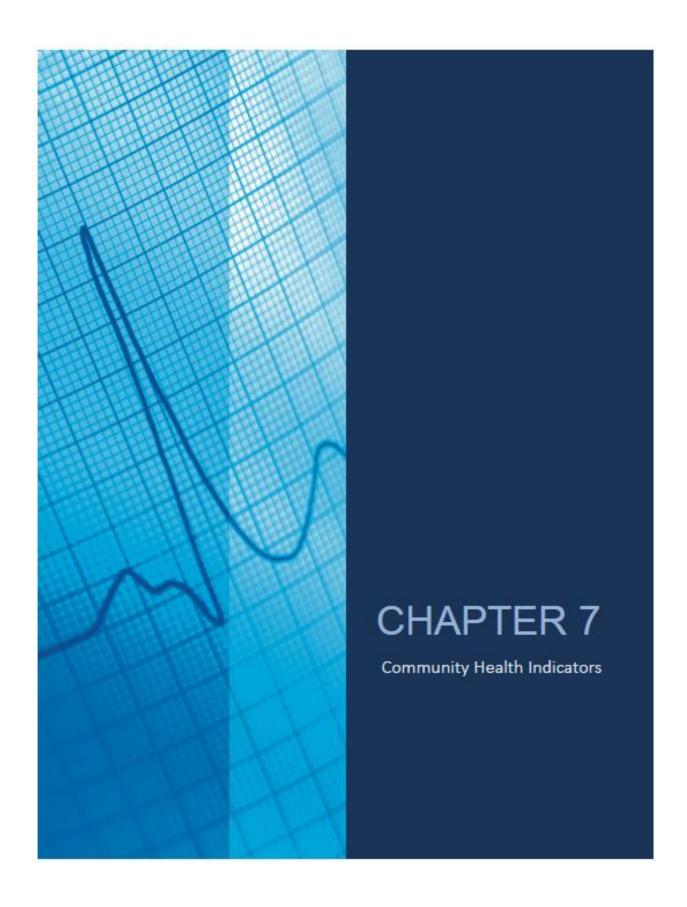


Source: Analysis, using BEA RIMS-II (2012/2019) multipliers, released in 2021, applied to 2020 American Hospital Association Annual Survey data. Note: Multipliers released in 2010 and subsequent years no longer include the national level multipliers needed for this chart. The sum of the direct and ripple effect may be less than or greater than the total contribution due to rounding.

**Chart 6.8:** Impact of Community Hospitals on U.S. Economy; All States, DC, and Total U.S., 2020

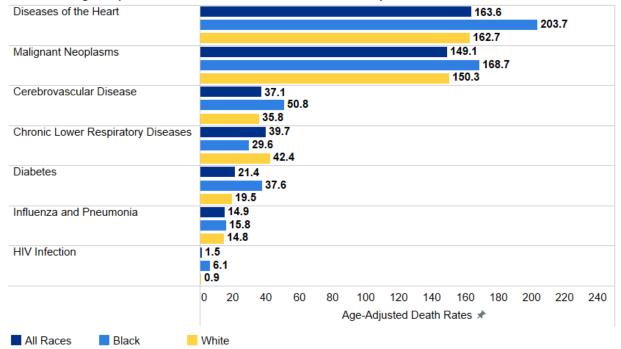
	of ss (FT	for	os on state y	Fotal ent	yroll ts (\$ )	for	yroll s on or (\$	for	spital ss on ut in omy	es (\$
	Number of Hospital Jobs (FT and PT)	Multiplier for Employment	Hospital Jobs on Total Jobs in state Economy	Percent of Total Employment	Hospital Payroll and Benefits (\$ millions)	Multiplier for Eamings	Hospital Payroll and Benefits on Total Labor Expense (\$millions	Multiplier for Output	Effect of Hospital Expenditures on Total Ouput in State Economy	Hospital Expenditures ( millions)
State										
US	6,286,911	2.8048	17,633,528	12.4%	513,517	2.4031	1,234,032	3.2896	3,626,068	1,102,282
Alabama	101,320	2.0737	210,107	10.5%	5,939	1.7205	10,218	1.9438	25,134	12,930
Alaska	13,369	1.7950	23,997	8.0%	1,073	1.4912	1,600	1.6422	3,472	2,114
Arizona	96,039	2.4408	234,412	8.2%	8,074	1.9081	15,406	2.1696	39,804	18,346
Arkansas	58,308	1.9130	111,543	8.9%	3,766	1.6193	6,099	1.8075	14,833	8,206
California	603,932	2.2913	1,383,789	8.6%	63,538	1.9070	121,167	2.1909	283,944	129,602
Colorado	86,414	2.3920	206,702	7.8%	7,330	1.9628	14,386	2.2484	37,253	16,569
Connecticut	71,101	2.0752	147,549	9.3%	6,091	1.7575	10,706	1.9714	28,227	14,318
Delaware	24,082	1.9923	47,979	10.7%	2,244	1.5972	3,584	1.7728	6,933	3,911
DC	29,934	1.4417	43,156	5.8%	2,910	1.3179	3,835	1.3663	7,500	5,489
Florida	344,520	2.4062	828,984	9.8%	25,888	1.9127	49,515	2.1663	127,452	58,834
Georgia	169,099	2.5363	428,886	9.7%	13,188	1.9890	26,231	2.2746	66,560	29,262
Hawaii	19,668	2.1239	41,773	8.0%	2,115	1.6824	3,558	1.9123	8,475	4,432
Idaho	28,979	2.1299	61,722	8.0%	2,011	1.6613	3,341	1.8523	7,828	4,226
Illinois	259,782	2.4350	632,569	11.0%	19,903	2.0498	40,797	2.3959	105,455	44,015
Indiana	139,893	2.1474	300,406	9.9%	10,928	1.8339	20,042	2.1031	54,779	26,047
Iowa	74,225	1.9091	141,703	9.3%	5,111	1.6168	8,264	1.7998	18,974	10,542
Kansas	70,645	2.0143	142,300	10.4%	5,068	1.7281	8,758	1.9974	20,317	10,172
Kentucky	94,671	2.0615	195,164	10.5%	6,748	1.7339	11,700	1.9915	30,337	15,233
Louisiana	105,326	2.0492	215,834	11.8%	6,659	1.7046	11,351	1.8964	30,576	16,123
Maine	39,488	2.1723	85,780	14.1%	3,332	1.7192	5,728	1.9026	12,433	6,535
Maryland	109,549	2.0746	227,270	8.7%	7,917	1.7921	14,188	2.0395	34,890	17,107
Massachusetts	203,088	2.1610	438,873	13.0%	15,054	1.8416	27,724	2.0930	70,809	33,831
Michigan	209,974	2.2546	473,407	11.4%	16,460	1.8426	30,330	2.0906	75,072	35,910
Minnesota	157,364	2.2886	360,143	12.8%	10,741	1.8800	20,193	2.1498	44,137	20,531
Mississippi	60,034	1.9334	116,070	10.3%	4,001	1.5981	6,393	1.7801	14,923	8,383
Missouri	149,562	2.2388	334,839	12.0%	11,135	1.8378	20,464	2.1118	53,102	25,145
Montana	29,181	1.9940	58,187	12.2%	2,153	1.5802	3,402	1.7347	7,512	4,330
Nebraska	47,861	2.0037	95,899	9.6%	3,638	1.7082	6,214	1.9208	14,635	7,619
Nevada	35,778	2.1854	78,189	6.1%	3,008	1.6732	5,033	1.8684	12,270	6,567
New Hampshire	37,916	1.9990	75,794	11.7%	3,183	1.7798	5,666	1.9521	11,930	6,111
New Jersey	154,501	2.2986	355,136	9.1%	13,374	1.9230	25,718	2.2396	61,931	27,653
New Mexico	41,344	2.0462	84,598	10.7%	2,850	1.5964	4,549	1.7846	11,171	6,260
New York	488,410	2.0488	1,000,654	11.3%	51,250	1.7225	88,279	1.9757	188,626	95,473
North Carolina	188,422	2.3371	440,361	9.9%	13,940	1.8955	26,423	2.1671	66,576	30,721
North Dakota	24,618	1.7305	42,601	10.3%	2,305	1.5290	3,525	1.6970	7,474	4,404
Ohio	309,816	2.2903	709,572	13.3%	23,611	1.8832	44,464	2.1604	105,115	48,655
Oklahoma	64,756	2.0956	135,703	8.3%	4,585	1.7437	7,995	1.9515	21,167	10,847
Oregon	68,290	2.2161	151,337	8.2%	6,747	1.7499	11,806	1.9724	27,562	13,974
Pennsylvania	293,376	2.2461	658,952	11.6%	21,014	1.9190	40,326	2.2090	110,433	49,992
Rhode Island	22,707	2.0086	45,609	9.7%	1,886	1.7097	3,224	1.9182	7,495	3,907
South Carolina	77,003	2.3094	177,831	8.5%	6,080	1.8448	11.216	2.1185	28,789	13,589
South Dakota	29,473	1.8223	53,709	12.4%	2,241	1.5523	3,479	1.7076	7,709	4,514
Tennessee	132,511	2.3007	304,868	10.0%	9,630	1.9588	18,864	2.2592	48,045	21,266
Texas	410,211	2.6045	1,068,395	8.7%	33,952	2.0947	71,120	2.4412	190,448	78,014
Utah	52,068	2.3053	120,032	7.7%	3,700	1.8684	6,914	2.1616	19,156	8,862
Vermont	18,498	1.9572	36,204	12.4%	1,591	1.6138	2,568	1.7565	5,058	2,879
Virginia	131,365	2.1259	279,269	7.2%	9,892	1.8025	17,830	2.0515	47,275	23,044
Washington										24,646
_	117,548	2.0382	239,586	7.3%	11,630	1.7086	19,871	1.9532	48,138	
West Virginia	48,517	1.8685	90,654	13.3%	3,389	1.5517	5,259	1.6780	12,534	7,470
Wisconsin	130,843	2.1174	277,047	9.7%	9,781	1.7839	17,448	2.0196	44,271	21,921
Wyoming	11,532	1.7441	20,113	7.3%	863	1.4545	1,255	1.5847	2,770	1,748

**Source**: Analysis, using BEA RIMS-II (2012/2019) multipliers, released in 2021, applied to 2020 American Hospital Association Annual Survey data. Note: Multipliers released in 2010 and subsequent years no longer include the national level multipliers needed for this chart.



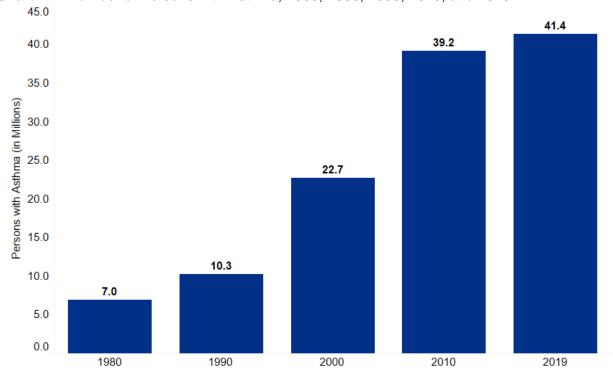
## **CHAPTER 7: Community Health Indicators**

Chart 7.1: Age-adjusted Death Rates, Selected Causes, by Race, 2018



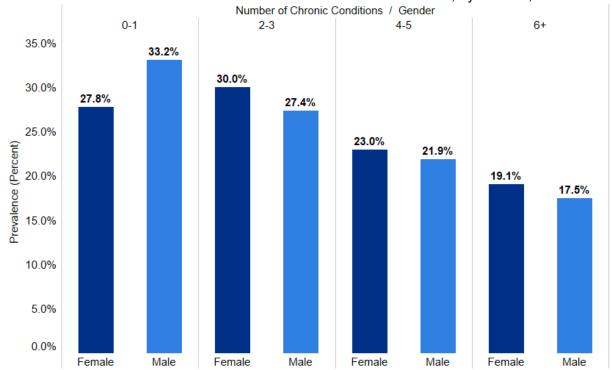
Source: National Center for Health Statistics. (2019). Table 005 Age-adjusted death rates for selected causes of death, by sex, race, and Hispanic origin: United States, selected years 1950–2018. https://www.cdc.gov/nchs/data/hus/2019/005-508.pdf

Chart 7.2: Number of Persons with Asthma, 1980, 1990, 2000, 2010, and 2019



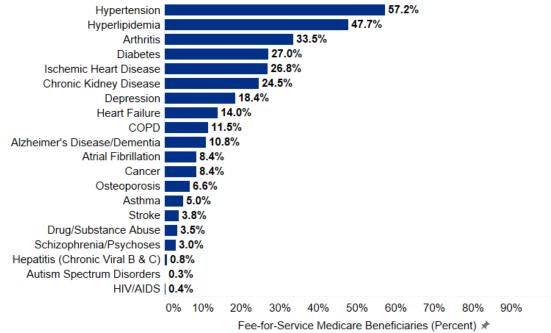
Source: National Health Interview Survey, National Center for Health Statistics, CDC. Table 1-1 Lifetime Asthma Population Estimates –in thousands by Age, United States: National Health Interview Survey, 2019. <a href="https://www.cdc.gov/asthma/nhis/2019/data.htm">https://www.cdc.gov/asthma/nhis/2019/data.htm</a> Data downloaded November 2021.

Chart 7.3: Prevalence of Chronic Conditions in Medicare Beneficiaries, by Gender, 2018



Source: Centers for Medicare & Medicaid Services, Multiple Chronic Conditions, https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/MCC Main

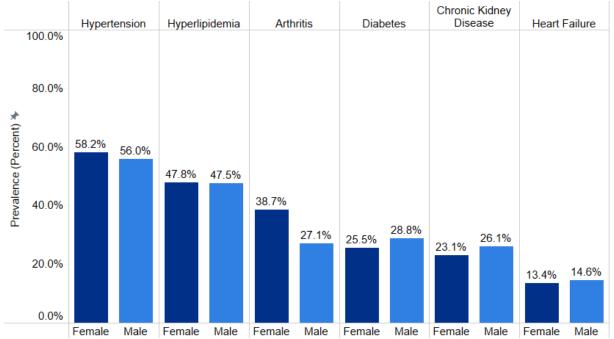
Chart 7.4: Percent of Fee-for-Service Medicare Beneficiaries with Chronic Conditions, 2018



Source: Centers for Medicare & Medicaid Services. Medicare Chronic Condition Dashboard. Available at: <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard">https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard</a>

Note: Chronic obstructive pulmonary disease. Previously Percent of People with Chronic Conditions by Type, 2006. Source: Anderson, G. (2010). Chronic Care: Making the Case for Ongoing Care. Johns Hopkins University and the Robert Wood Johnson Foundation

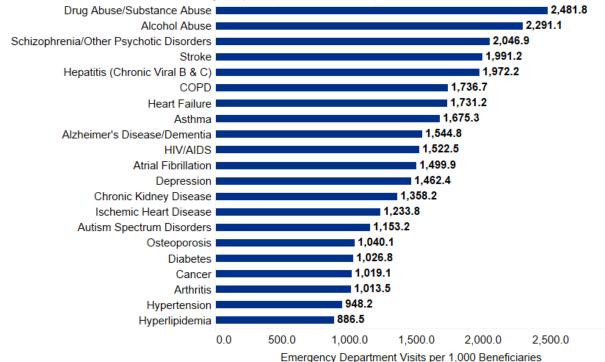
Chart 7.5: Chronic Disease Prevalence by Gender, Medicare Fee-for-Service (FFS), 2018



Source: Centers for Medicare & Medicaid Services. Medicare Chronic Condition Dashboard. Available at: <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard">https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard</a>

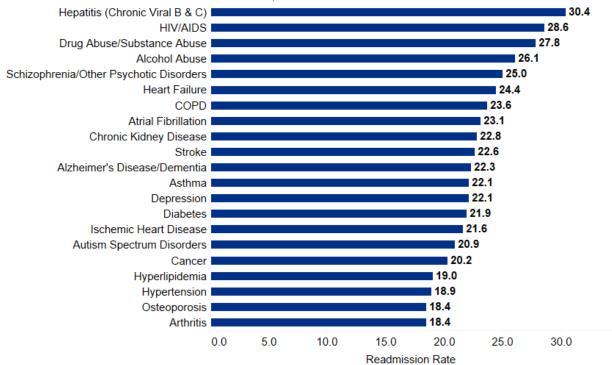
Note: Chronic obstructive pulmonary disease.Previously Percent of People with Chronic Conditions by Type, 2006. Source: Anderson, G. (2010). Chronic Care: Making the Case for Ongoing Care. Johns Hopkins University and the Robert Wood Johnson Foundation

Chart 7.6: Chronic Disease Emergency Department Visits per 1,000 Beneficiaries, 2018



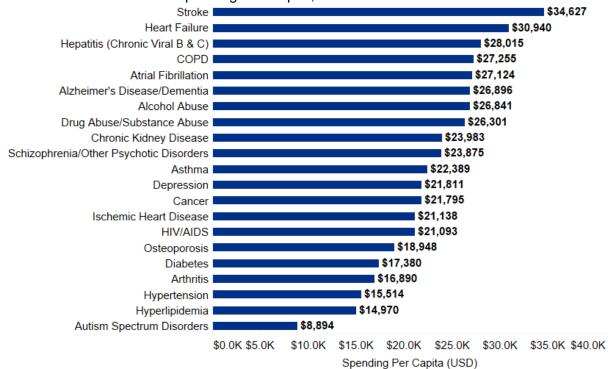
Source: Centers for Medicare & Medicaid Services: <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CC Main.">https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CC Main.</a>

Chart 7.7: Chronic Disease Readmissions, 2018



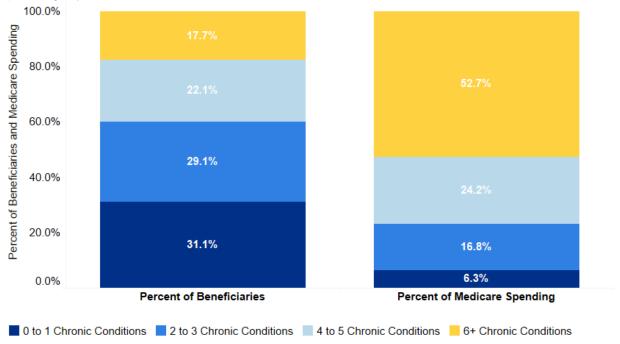
Source: Centers for Medicare & Medicaid Services: <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CC Main...">https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CC Main...</a>

Chart 7.8: Chronic Disease Spending Per Capita, 2018



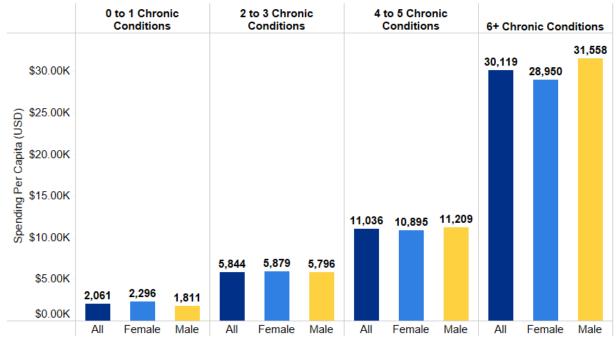
Source: Centers for Medicare & Medicaid Services: <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CC">https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CC</a> Main..

**Chart 7.9:** Percent of Medicare Fee-for-Service Beneficiaries vs. Percent of Medicare Spending, by Number of Chronic Conditions, 2018



Source: Centers for Medicare & Medicaid Services. Medicare Chronic Condition Dashboard. Available at: <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard">https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard</a>

**Chart 7.10:** Per Capita Spending on Chronic Conditions in Medicare Beneficiaries, by Gender, 2018



Source: Centers for Medicare & Medicaid Services. Medicare Chronic Condition Dashboard. Available at: <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard">https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard</a>

40.0% Percent Uninsured 30.0% 20.0% 10.0% 0.0% 2010 2011 2012 2013 2014 2015 2016 2017 2018

Chart 7.11: Percent Uninsured by Race, 2010-2018

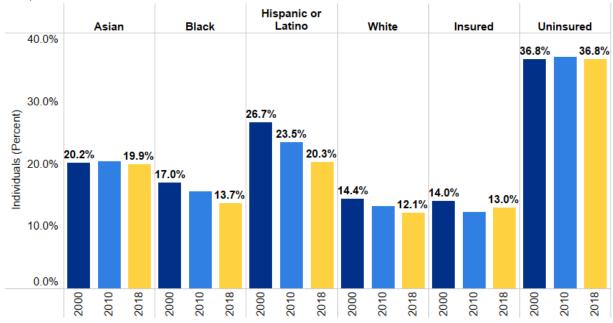
Source: National Center for Health Statistics. (2018). Health, United States, 2017. Hyattsville, MD. Table 49. No health insurance coverage among persons under age 65, by selected characteristics: United States, selected years 1984–2018. https://www.cdc.gov/nchs/data/hus/2019/049-508.pdf
Note: Race categories for Black and White include individuals of Hispanic and non-Hispanic origin. Race category for Asian includes individuals of non-Hispanic origin only

White

2 or more races

Native Hawaiian and Other Pacific Islander

Chart 7.12: Percent of Individuals with No Health Care Visits by Race, Insurance Status, 2000, 2010, and 2018



Source: National Center for Health Statistics. (2019). Health, United States, 2019

American Indian and Alaska Native

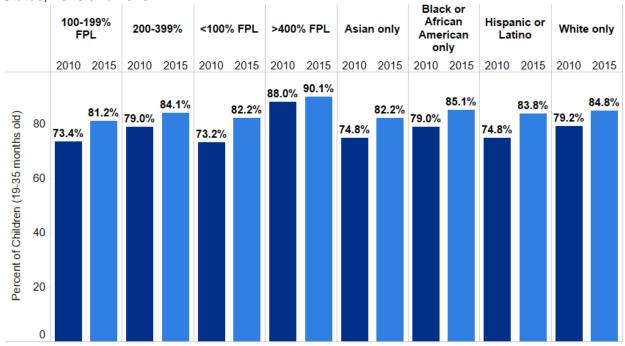
Asian

Black

Hispanic (any race)

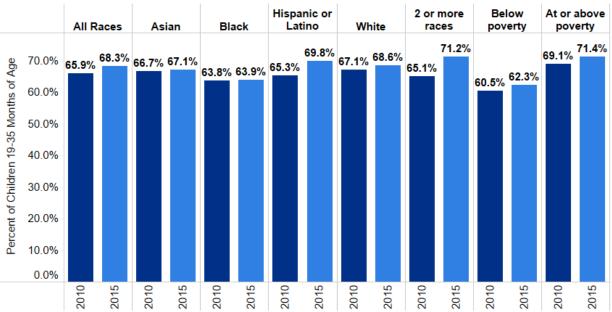
Note: Race categories for Black and White include individuals of Hispanic and non-Hispanic origin. Race category for Asian includes individuals of non-Hispanic origin only.

**Chart 7.13:** Percent of Children (19-35 months old) with No Dental Visits by Race, Poverty Status, 2010 and 2015



Source: National Center for Health Statistics. (2019). Health, United States, 2018: With special feature on mortality. Table 38. Dental visits in the past year, by selected characteristics: United States, selected years 1997–2018. https://www.cdc.gov/nchs/data/hus/2019/038-508.pdf
Note: Race categories for Black and White include individuals of Hispanic and non-Hispanic origin. Race category for Asian includes individuals of non-Hispanic origin only.

**Chart 7.14:** Percent of Children (19-35 months old) Vaccinated by Race, Poverty Status, by Birth Years 2010 and 2015

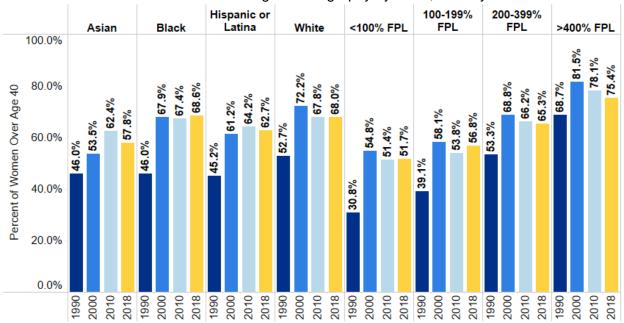


Source: National Center for Health Statistics. (2019). Health, United States, 2015: With special feature on mortality. Vaccination coverage for selected diseases by age 24 months, by race and Hispanic origin, poverty level, and location of residence: United States, birth years 2010–2015. <a href="https://www.cdc.gov/nchs/data/hus/2019/031-508.pdf">https://www.cdc.gov/nchs/data/hus/2019/031-508.pdf</a>

<sup>(1)</sup> Vaccinations include DTP, DT, polio, MCV, Hib, Hep B, varicella, and PCV.

<sup>(2)</sup> Race categories for Black and White include individuals of Hispanic and non-Hispanic origin. Race category for Asian includes individuals of non-Hispanic origin only.

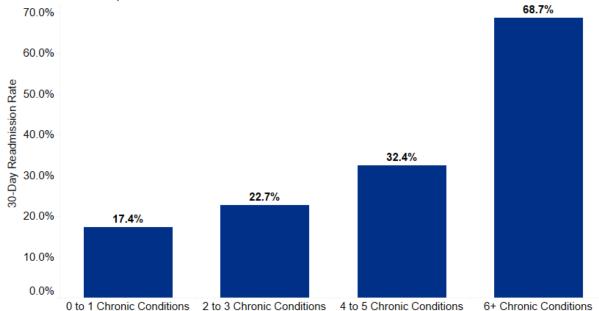
Chart 7.15: Percent of Women Receiving Mammography by Race, Poverty Status



Source: National Center for Health Statistics. (2019). Health, United States, 2018: With special feature on mortality. https://www.cdc.gov/nchs/hus/index.htm Notes:
(1) Percent of women are over 40 years of age.

(3) FPL = federal poverty level.

Chart 7.16: 30-Day Readmission Rate for Medicare Fee-for-Service Beneficiaries by Number of Chronic Conditions, 2018



Source: Centers for Medicare & Medicaid Services. Medicare Chronic Condition Dashboard. Data downloaded February 2022. https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard.html Note: Number of chronic conditions includes the 15 CMS identified chronic conditions.

<sup>(2)</sup> Race categories for Black and White include individuals of Hispanic and non-Hispanic origin. Race category for Asian includes individuals of non-Hispanic origin only.