



Acute Care Hospitals

2017

Acute care hospitals are licensed by the Department of State Health Services (DSHS), Division of Licensing and Certification. This report provides information on acute care hospitals based on the 2017 tracking database from DSHS. The revenue data is based on the 2016 hospital survey. Every year, by statute, acute care hospitals must complete the AHA Annual Survey of Hospitals and submit it to DSHS.

Acute Care Hospital Trends

There were 530 acute care hospitals in Texas in 2007 and 565 as of December 2017 (Figure 1). From 2007 through 2017, there was a 7% increase in the number of acute care hospitals in the state. The majority of the for-profit hospitals (91%) and nonprofit hospitals (73%) were located in metropolitan (urban) areas. The majority of public hospitals (71%) were located in non-metropolitan (rural) areas.

Figure 1. Number of Acute Care Hospitals, 2007-2017



Acute Care Hospitals By Location

Figure 2 shows the percentages of hospitals in metropolitan and non-metropolitan areas in the state. In 2017, 421 of the 565 hospitals in (75%) the state were in metropolitan areas. Of the 421 metropolitan area hospitals:

- 66% (278) were for-profit.
- 27% (114) were nonprofit.
- 7% (29) were public.

Of the 144 non-metropolitan area hospitals:

- 51% (74) were public.
- 29% (42) were nonprofit.
- 19% (28) were for-profit.

Metropolitan hospitals operated 91% of the 80,677 beds in the state and non-metropolitan area facilities operated the remaining 9%.

Total Beds (Statewide): 80,677

Table 1 shows the average number of beds based on hospital type.

- 47% (263) of the hospitals had fewer than 50 hospital beds.
- The average number of beds per hospital was 143.
- 44% (35,620) were for-profit.
- 43% (34,319) were nonprofit.
- 13% (10,738) were public.

Table 1. Average Number of Beds by Hospital Type, 2017

Hospital Type	Avg. Number of Beds
Metropolitan	174
Non-Metropolitan	51
Nonprofit	221
For-Profit	116
Public	103

Figure 2. Acute Care Hospitals by Metropolitan Type, 2017

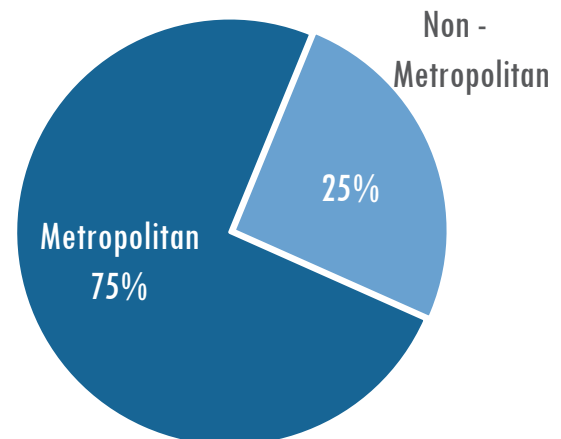


Figure 3. Number of Texas Acute Care Hospitals By County, 2017

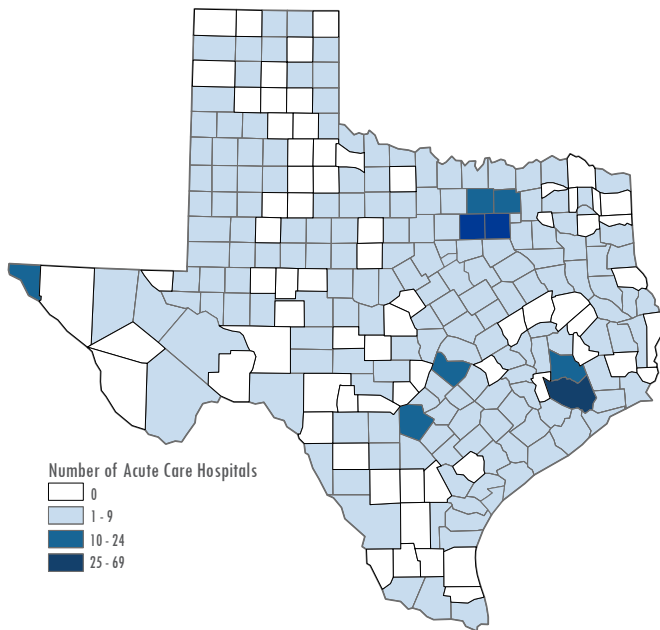


Figure 3 shows counties with or without acute care hospitals in Texas.

- In 2016, 73 counties had no acute care hospitals.
- Harris County had the largest number of acute care hospitals with 69, followed by Tarrant with 44, Dallas with 41, and Bexar with 24.

Outpatient Visits, Inpatient Days, and Emergency Visits

The acute care hospital utilization data indicate increased use of outpatient services (Figure 4).

- Outpatient visits (excluding emergency room visits) increased by 36% and inpatient days increased by 6% between 2007 and 2016.
- Emergency room visits rose 32% during this same period.

Inpatient Utilization, 2016

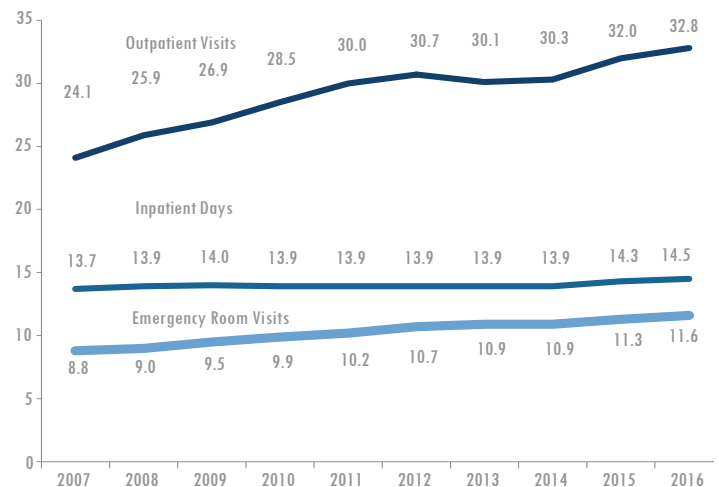
In 2016, there were 2,714,112 acute care admissions and 14,493,399 inpatient days (Table 2).

- The average length of stay for inpatients was 5 days.
- The utilization rate was 513 per 1,000 population, a decrease of 10% since 2007.

Table 2. Texas Acute Care Hospitals Utilization Data, 2007-2016

Year	Admissions Total (in thousands)	Inpatient Days Total (in thousands)	Average Length of Stay (in days)	Utilization Rate per 1,000 Population	Staffed Beds Occupancy Rate (%)	Licensed Bed Occupancy Rate (%)
2007	2.62	13.7	5.2	573	59.9	49.4
2008	2.65	13.9	5.3	572	61.1	50.9
2009	2.65	14.0	5.3	564	60.0	50.0
2010	2.64	13.9	5.2	546	59.2	49.3
2011	2.66	13.9	5.2	537	59.2	49.0
2012	2.66	13.9	5.2	526	58.7	48.5
2013	2.63	13.9	5.3	521	58.2	48.0
2014	2.59	13.9	5.3	510	58.9	48.1
2015	2.66	14.3	5.4	517	60.9	50.8
2016	2.71	14.5	5.3	513	60.4	50.6

Figure 4. Outpatient Visits, Inpatient Days, and Emergency Visits in Millions, 2007-2016



Uncompensated Care Charges as a Percentage of Gross Patient Revenue

Uncompensated care comprises total bad debt and total charity care charges. In 2016, the total uncompensated care charge was \$26 billion.

- One out of every nine dollars billed for care in Texas acute care hospitals was attributed to uncompensated care.
- Uncompensated care as a percentage of gross patient revenue declined 1% between 2007 and 2016 (Figure 5).
- Uncompensated care as a percentage of gross patient revenue was 20% for public hospitals, 9% for nonprofit hospitals, and 6% for for-profit hospitals.

Uncompensated Care Charges

- Uncompensated care increased 124% between 2007 and 2016 for acute care hospitals (Figure 6).
- In 2016, 43% of the total uncompensated care was provided by nonprofit hospitals, 29% was provided by public hospitals, and 28% was provided by for-profit hospitals.
- Charity care accounted for 58% (\$15.2 billion) of the total uncompensated care charges and bad debt accounted for the remaining 42% (\$11 billion).

Gross Patient Revenue by Payor Source

The gross patient revenue or hospital billed charges based on acute care hospitals' reported completed information on payor source was \$295 billion in 2016.

- Government payor sources, including Medicare, Medicaid, and other government, were responsible for more than half (57%) of the gross patient revenue charges (Figure 7).
- Medicare was the largest payor source, accounting for 40% of the gross patient revenue charges. Third-party was the second largest payor source, accounting for 33% of the gross patient revenue charges.
- All other non-government and self-pay, accounted for the remaining 10% of gross patient revenue charges.

Figure 5. Uncompensated Care as a Percentage of of Gross Revenue, 2007-2016

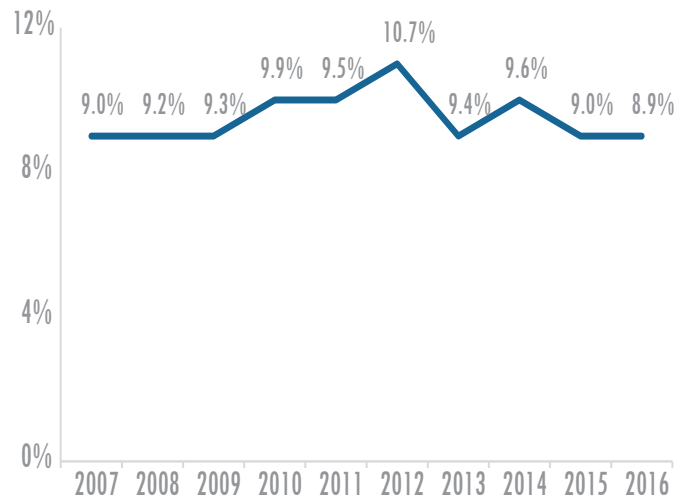


Figure 6. Uncompensated Care Charges in Billions, 2007-2016

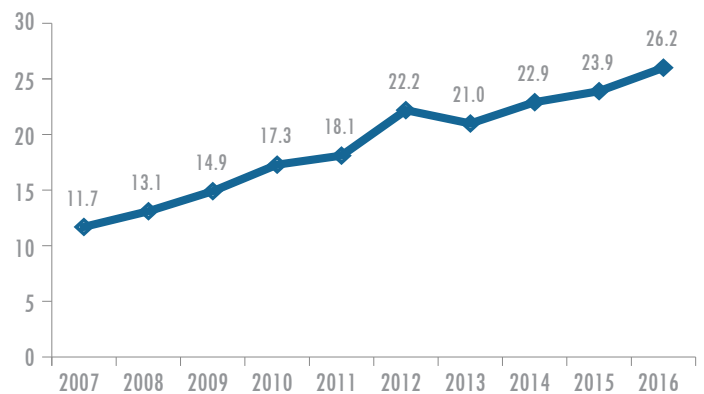


Figure 7. Gross Patient Revenue by Payor Source, 2016

