



# 2012 Annual Healthcare Indicators Report

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# NDHA

## North Dakota Hospital Association

**Vision**

*The North Dakota Hospital Association will take an active leadership role in major healthcare issues.*

**Mission**

*The North Dakota Hospital Association exists to advance the health status of persons served by the membership.*

The *Annual Healthcare Indicators Report* is compiled by the North Dakota Hospital Association (NDHA) as a means of providing valuable and useful information relating to hospital and health system trends.

The Indicators Report is intended to be used by health care executives, government officials, and business leaders for planning and decision making purposes. Trends identified within the report reflect the ever changing nature of the environment affecting the health care profession and delivery system.

Data contained within the report is obtained from a variety of private and public sources including, but not limited to, the following entities:

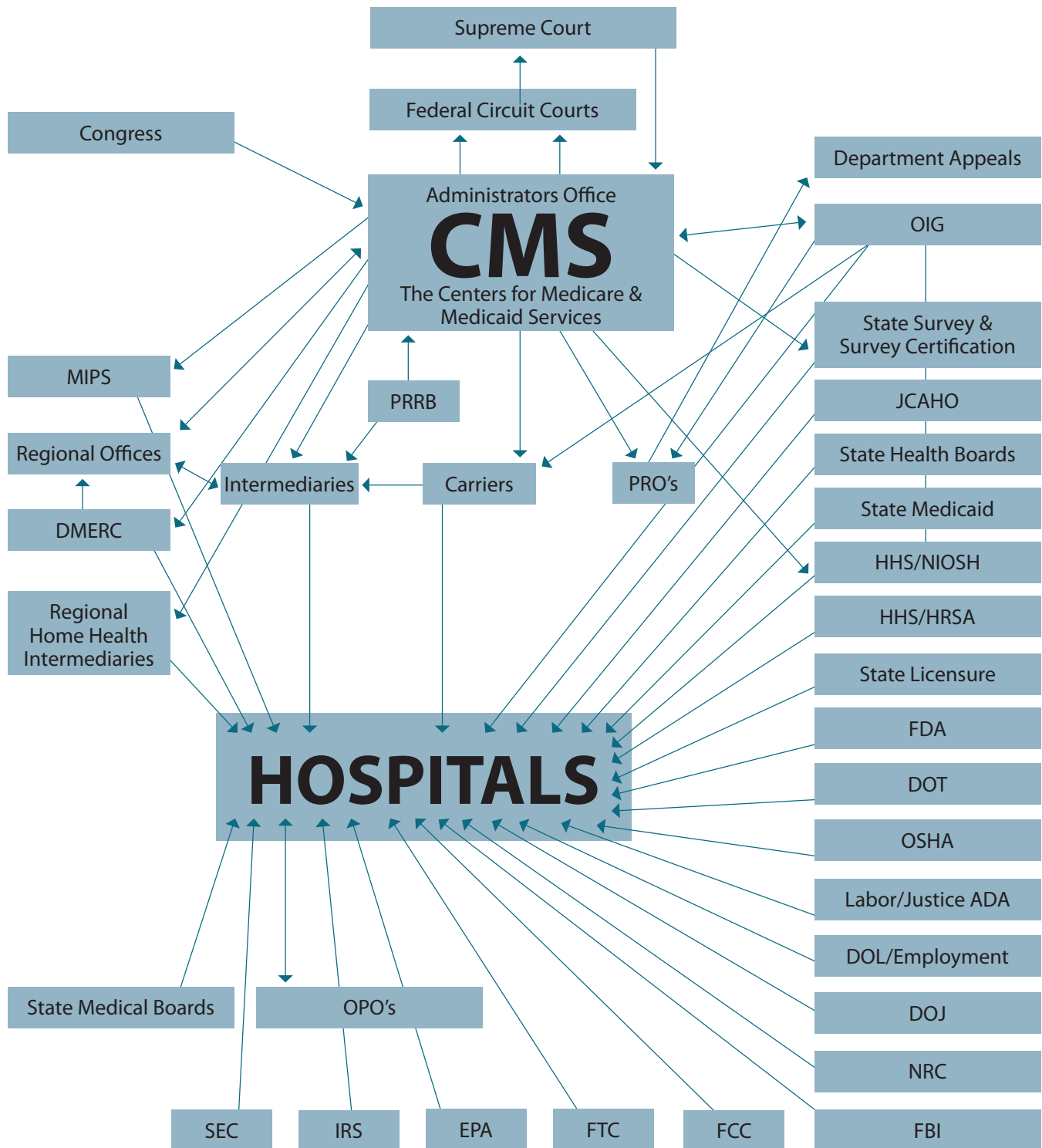
- American Hospital Association (AHA) Hospital Statistics
- U.S. Census Bureau
- U.S. Bureau of Labor Statistics
- U.S. Bureau of Economic Analysis
- U.S. National Center for Health Ratings and Statistics
- U.S. National Highway Safety Traffic Administration
- U.S. Department of Health and Human Services
- National Association of State Budget Officers
- United Health Foundation
- Centers for Medicare and Medicaid Services (CMS)
- Almanac of Hospital Financial and Operating Indicators
- State Health Facts: Henry J. Kaiser Family Foundation
- North Dakota Medical Association
- North Dakota Board of Nursing
- North Dakota Board of Pharmacy

The Indicators Report is supported and funded by the North Dakota Hospital Foundation. For more information or to order additional copies of the report, please contact the NDHA at (701) 224-9732.

Sincerely,



Jerry Jurena  
President, NDHA



## Who Regulates Hospitals

Hospitals, nursing facilities and home health agencies face a number of federal and state regulatory bodies. Reimbursement, reporting, quality of care, professional licensure, wage and hour and taxation are among the regulatory areas health care providers are confronted with on a daily basis. Certainly, North Dakota hospitals' overall regulatory structure is necessary, but overly burdensome regulations divert limited resources from direct patient care to administrative procedures on an increasing basis.

# SECTION 1

Hospital and Health System Utilization

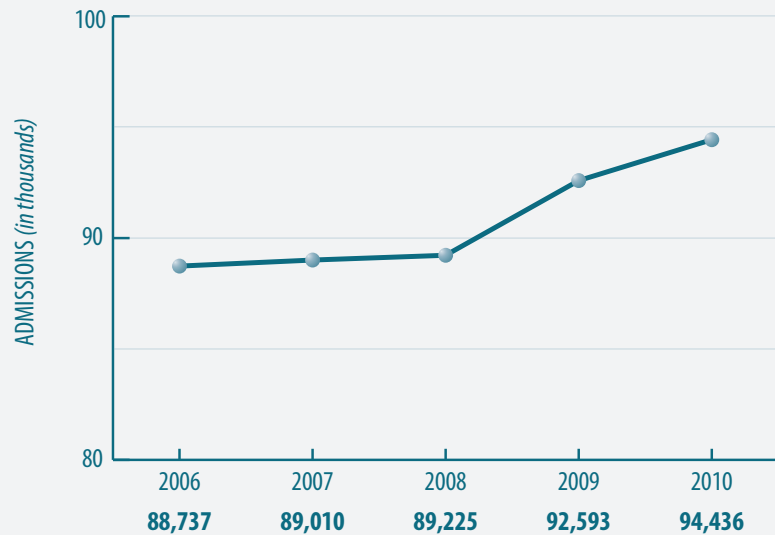


## North Dakota Admissions (Total Facility)

Admissions to North Dakota's community hospitals have risen since 2006. There were 94,436 admissions to North Dakota hospitals in 2010 compared to 88,737 in 2006, approximately a **6.42 percent increase**.

### N.D. Hospital Admissions, 2006-2010

Source: AHA Hospital Statistics



## Admissions - North Dakota, West North Central\* and U.S. (Total Facility)

The percent changes in hospital admissions varied from 2006-2010. From 2008-2010, hospital admissions dropped for both West North Central states and the United States. At the same time, North Dakota hospital admissions increased.

### 2006-2010 Trends

North Dakota:

- **6.42% increase**

West North Central:

- **3.76% decrease**

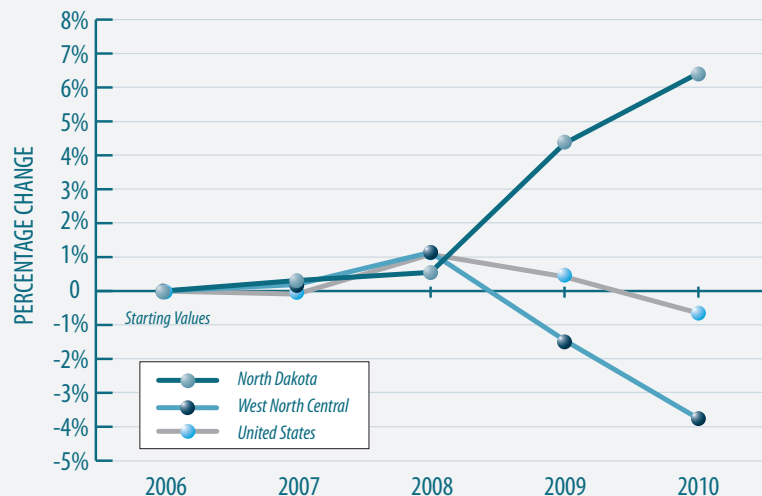
United States:

- **.65% decrease**

\* Includes ND, SD, NE, KS, MO, IA, and MN.

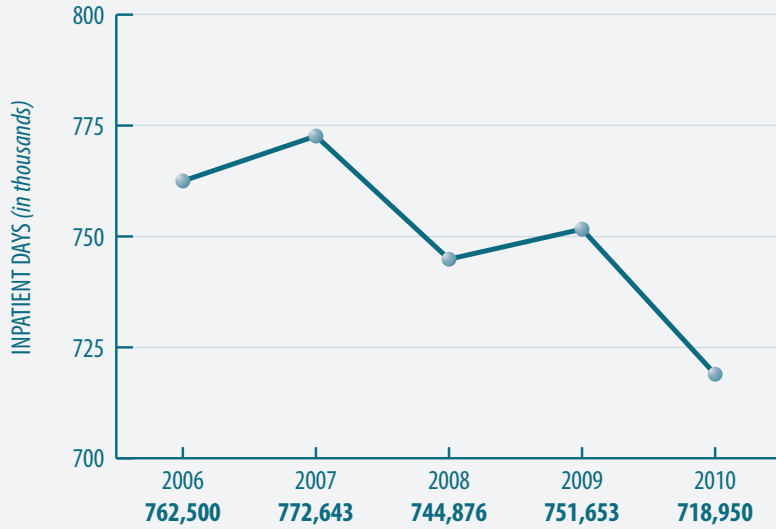
### Hospital Admissions N.D., West North Central and U.S. Treadline of Percent Changes, 2006-2010

Source: AHA Hospital Statistics



### N.D. Hospital Inpatient Days, 2006-2010

Source: AHA Hospital Statistics

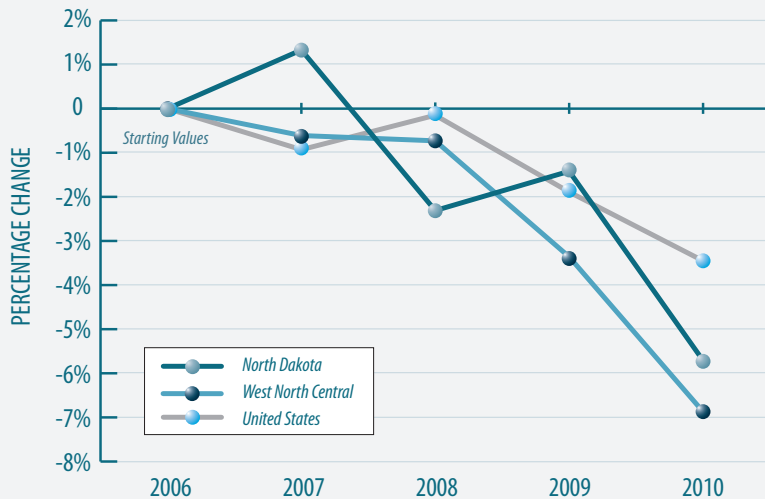


### North Dakota Inpatient Days (Total Facility)

Overall, North Dakota inpatient days declined from 2006 to 2010. There were 762,500 inpatient days in 2006 compared to 718,950 in 2010, a decline of approximately **5.71 percent**.

### Inpatient Days N.D., West North Central and U.S. Treadline of Percent Changes, 2006-2010

Source: AHA Hospital Statistics



### Inpatient Days - North Dakota, West North Central and U.S. (Total Facility)

Comparing the percent changes in inpatient days between North Dakota, West North Central and the United States shows that there was an overall decrease in inpatient days. With a decrease of approximately 3.45 percent, the United States had the smallest decline of inpatient days.

#### 2006-2010 Trends

- North Dakota:
  - **5.71% decrease**
- West North Central:
  - **6.87% decrease**
- United States:
  - **3.45% decrease**



## Total Facility Admissions Per 1000 Population

North Dakota's total facility admissions per 1000 population were higher than West North Central states and the United States from 2006 to 2010. From 2006 to 2010, North Dakota admissions increased, while admissions for the U.S. and the West North Central states both decreased.

### 2006-2010 Trends

North Dakota:

- **3.59% increase**

West North Central:

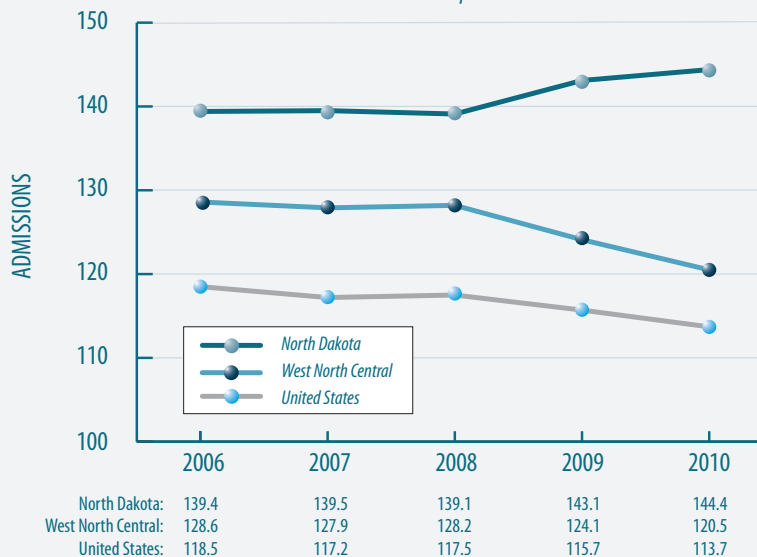
- **6.30% decrease**

United States:

- **4.05% decrease**

## Total Facility Admissions Per 1000 Population 2006-2010

Source: AHA Hospital Statistics



## Total Inpatient Days Per 1000 Population

North Dakota's total inpatient days per 1000 population was higher than West North Central states and the United States. From 2006 to 2010, all three locations have had similar declines in total inpatient days.

### 2006-2010 Trends

North Dakota:

- **8.16% decrease**

West North Central:

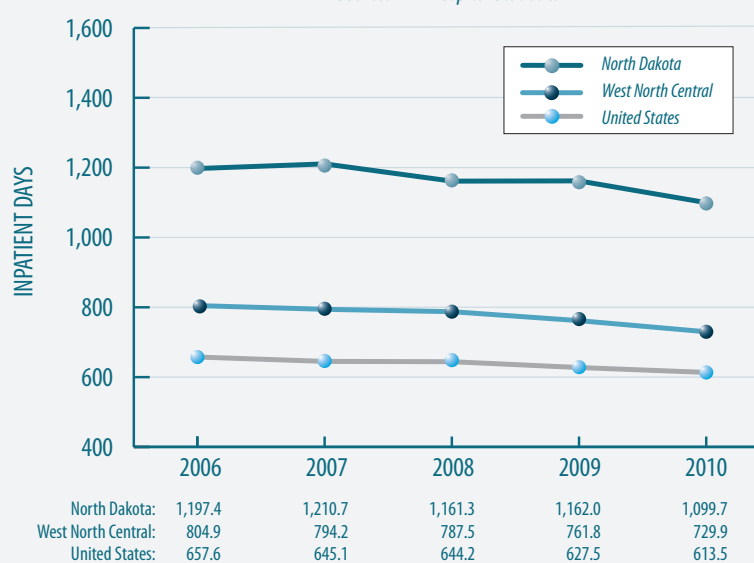
- **9.32% decrease**

United States:

- **6.71% decrease**

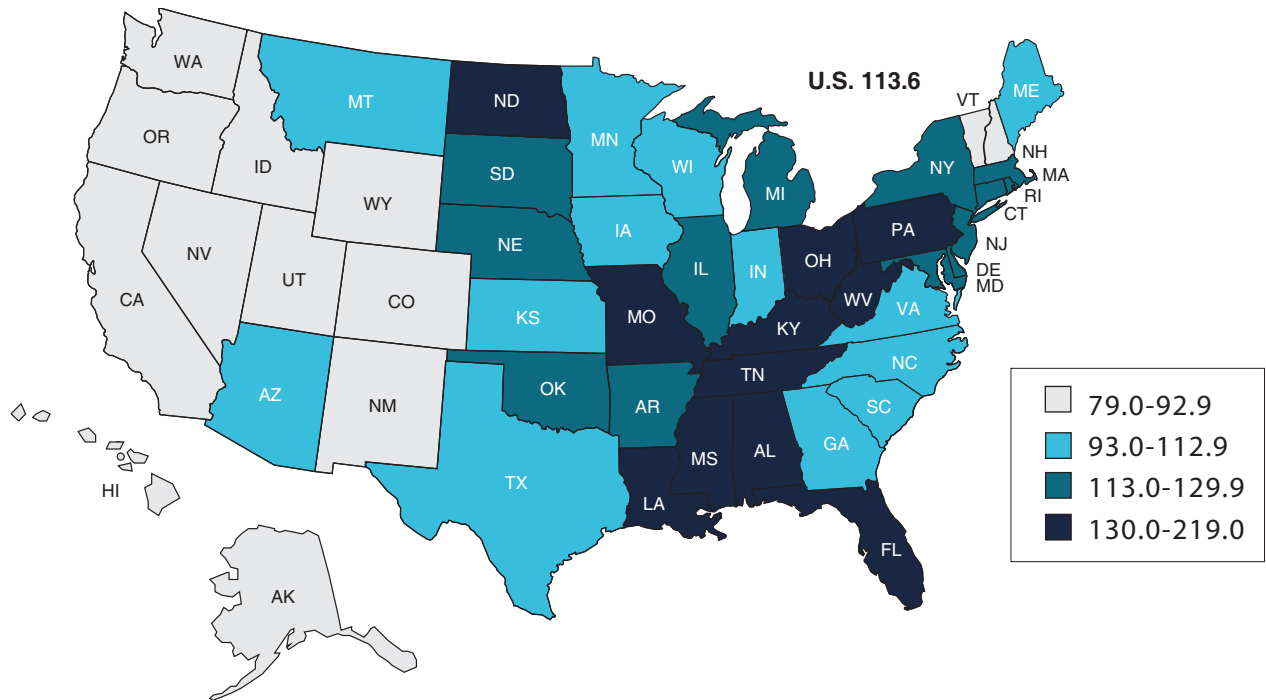
## Total Inpatient Days Per 1000 Population 2006-2010

Source: AHA Hospital Statistics



### Hospital Admissions Per 1000 Population by State, 2010

The North Dakota hospital admissions per 1000 population rate of 140.0 ranked North Dakota 4<sup>th</sup> highest in the United States. The U.S. average per 1000 population was 113.6.



Source: Kaiser Family Foundation State Health Facts (statehealthfacts.org)

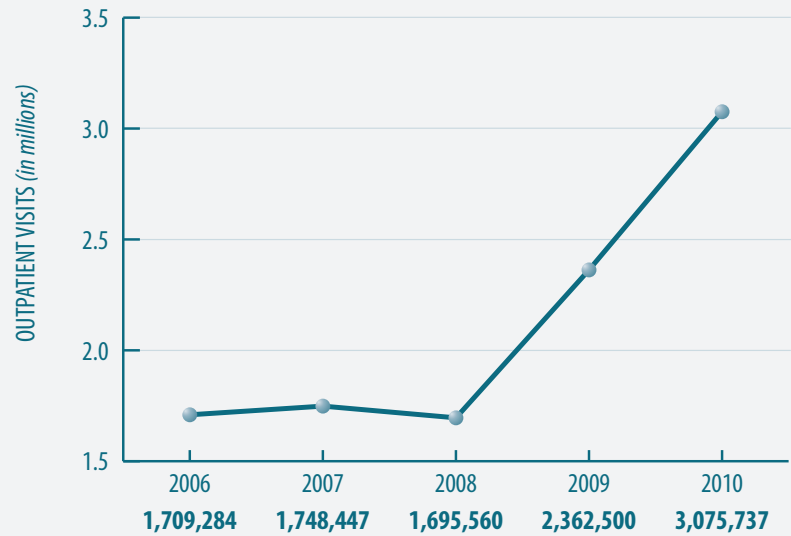
Rank	State	Admissions Per 1000	Rank	State	Admissions Per 1000
	U.S. Average	113.6	26	South Carolina	112.8
1	District of Columbia	218.3	27	Iowa	112.1
2	West Virginia	150.1	28	Minnesota	111.5
3	Pennsylvania	142.4	29	Arizona	111.0
4	Kentucky	140.0	30	Indiana	110.7
<b>4</b>	<b>North Dakota</b>	<b>140.0</b>	31	Maine	109.8
6	Louisiana	137.6	32	North Carolina	108.6
7	Missouri	137.0	33	Kansas	106.6
8	Mississippi	135.7	34	Wisconsin	103.4
9	Alabama	134.2	35	Texas	102.2
10	Ohio	131.5	36	Georgia	99.0
11	Tennessee	131.0	37	Montana	98.3
12	Florida	130.1	38	Virginia	96.8
13	New York	129.4	39	California	91.7
14	Arkansas	126.8	40	New Hampshire	91.1
15	Massachusetts	125.5	41	New Mexico	90.1
16	South Dakota	123.9	42	Nevada	89.2
17	Maryland	122.3	43	Colorado	89.0
17	Michigan	122.3	44	Wyoming	88.1
19	New Jersey	121.3	45	Washington	87.3
20	Illinois	120.1	46	Oregon	83.7
21	Rhode Island	117.0	47	Idaho	83.6
22	Nebraska	114.2	48	Hawaii	81.1
23	Oklahoma	114.1	49	Utah	80.8
24	Connecticut	113.7	50	Alaska	79.8
25	Delaware	113.1	51	Vermont	79.0

## Outpatient Visits

From 2006 to 2010, North Dakota hospital outpatient visits have dramatically increased from 1,709,284 in 2006 to 3,075,737 in 2010, an increase of **79.94 percent**.

### N.D. Hospital Outpatient Visits, 2006-2010

Source: AHA Hospital Statistics

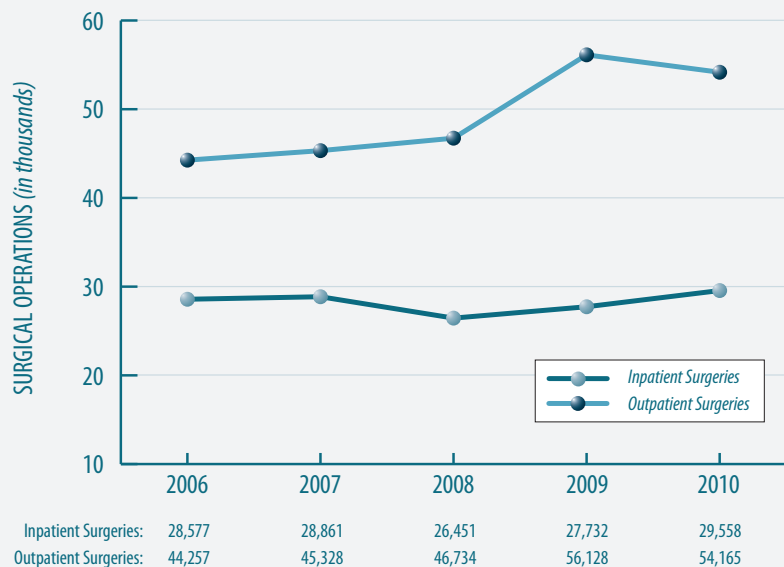


## Surgical Operations

From 2006 to 2010, the number of outpatient surgeries increased by 9,908 or **22.39 percent**. The number of inpatient surgeries increased by 981 or **3.43 percent** from 2006 to 2010. Outpatient surgeries accounted for **64.70 percent** of all surgeries performed in North Dakota hospitals in 2010.

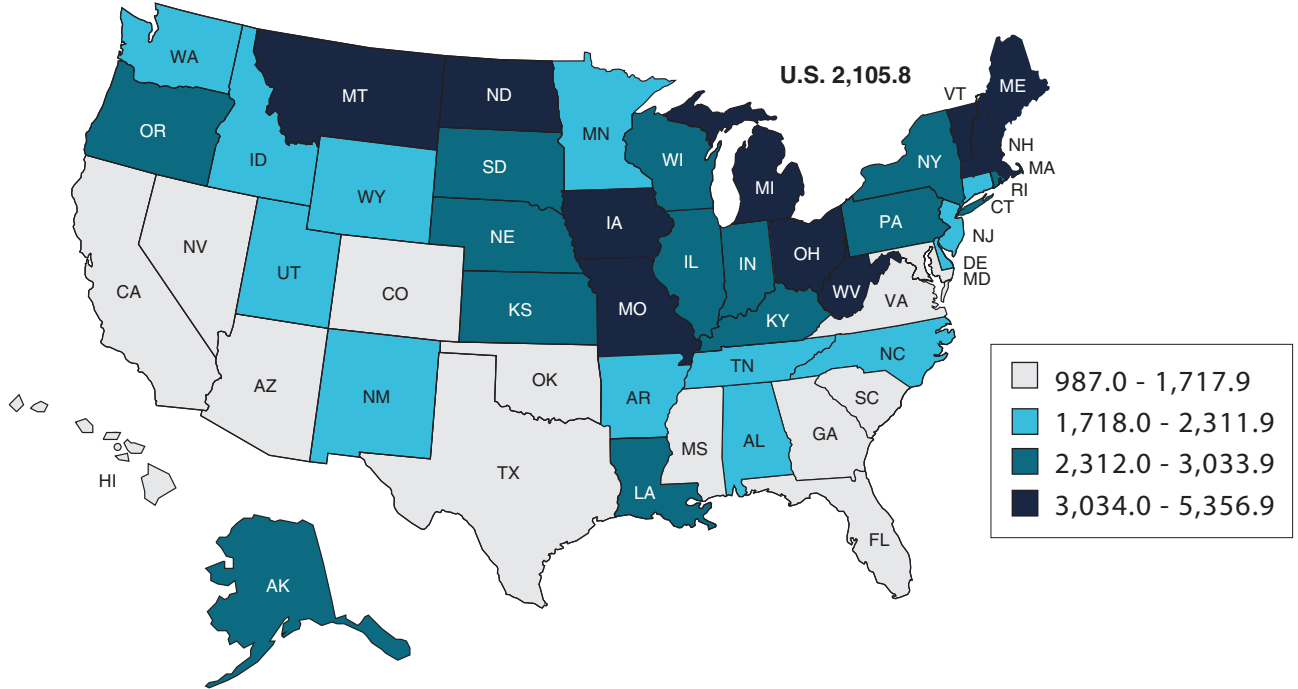
### N.D. Hospital Surgical Operations, 2006-2010

Source: AHA Hospital Statistics



### Outpatient Visits Per 1000 Population by State, 2010

The North Dakota outpatient visits per 1000 population rate of 4,560.0 ranked North Dakota 2<sup>nd</sup> highest. The U.S. average per 1000 population was 2,105.8. The N.D. average outpatient visit per 1000 population increased by 1,916.8 from 2008 to 2010, a 72.52 percent increase.



Source: Kaiser Family Foundation State Health Facts (statehealthfacts.org)

Rank	State	Outpatient Visits per 1000	Rank	State	Outpatient Visits per 1000
	U.S. Average	2,105.8	26	Connecticut	2,311.1
1	Vermont	5,356.0	27	New Mexico	2,246.0
<b>2</b>	<b>North Dakota</b>	<b>4,560.0</b>	28	Minnesota	2,083.6
3	Maine	4,493.3	29	Idaho	2,012.1
4	District of Columbia	3,836.3	30	Delaware	1,986.4
5	New Hampshire	3,628.2	31	Utah	1,972.9
6	Iowa	3,616.1	32	Wyoming	1,945.7
7	West Virginia	3,589.3	33	North Carolina	1,912.4
8	Montana	3,536.6	34	Alabama	1,839.1
9	Massachusetts	3,317.1	35	New Jersey	1,815.6
10	Missouri	3,302.2	36	Tennessee	1,798.1
11	Ohio	3,099.7	37	Washington	1,750.6
12	Michigan	3,062.5	38	Arkansas	1,719.0
13	Pennsylvania	3,033.3	39	Virginia	1,717.5
14	Indiana	2,885.5	40	Colorado	1,634.0
15	New York	2,766.6	41	Hawaii	1,609.0
16	Louisiana	2,718.8	42	Mississippi	1,544.1
17	Wisconsin	2,566.3	43	Texas	1,515.6
18	Illinois	2,535.1	44	Oklahoma	1,504.3
19	South Dakota	2,501.5	45	Georgia	1,471.4
20	Nebraska	2,497.6	46	Maryland	1,447.2
21	Alaska	2,497.2	47	California	1,385.0
22	Rhode Island	2,490.7	48	South Carolina	1,375.3
23	Kentucky	2,401.5	49	Florida	1,286.6
24	Oregon	2,399.7	50	Arizona	1,267.2
25	Kansas	2,336.3	51	Nevada	987.2

## Total Facility Outpatient Visits, Inpatient and Outpatient Surgeries Per 1000 Population, 2006-2010

Source: AHA Hospital Statistics

	2006	2007	2008	2009	2010
<b>Outpatient Visits Per 1000</b>					
North Dakota	2,684.3	2,739.6	2,643.4	3,652.3	4,704.6
West North Central	2,531.7	2,568.2	2,668.6	2,785.1	2,848.9
United States	2,007.9	2,000.5	2,050.4	2,091.0	2,107.8
<b>Inpatient Surgeries Per 1000</b>					
North Dakota	44.9	45.2	41.2	42.9	45.2
West North Central	35.9	36.0	35.8	34.7	33.4
United States	33.8	33.8	33.2	32.9	32.2
<b>Outpatient Surgeries Per 1000</b>					
North Dakota	69.5	71.0	72.9	86.8	82.8
West North Central	71.3	70.5	70.3	67.2	64.7
United States	57.7	56.9	57.0	56.5	56.2

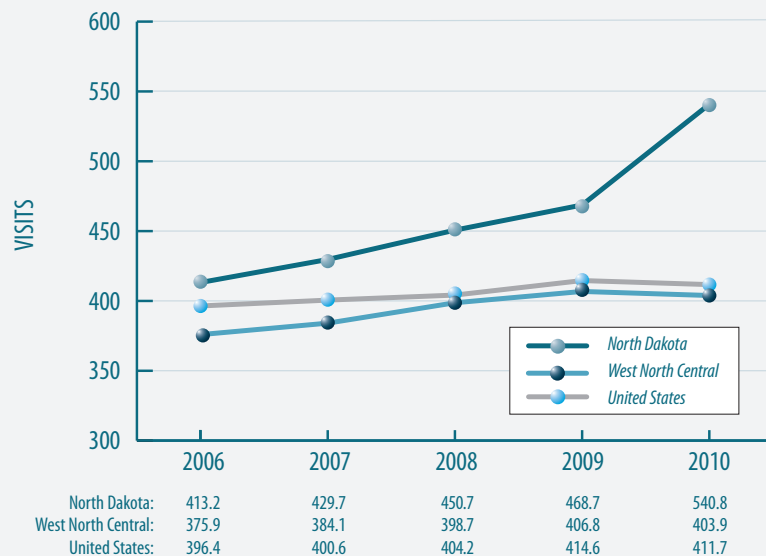
### Emergency Room Visits Per 1000 Population

(map on page 12)

Emergency room visits in North Dakota hospitals peaked in 2010 at 540.8 visits per 1000 population, a **30.88 percent increase**. West North Central states had a **7.45 percent increase** in emergency room visits per 1000 and the United States had a **3.86 percent increase**.

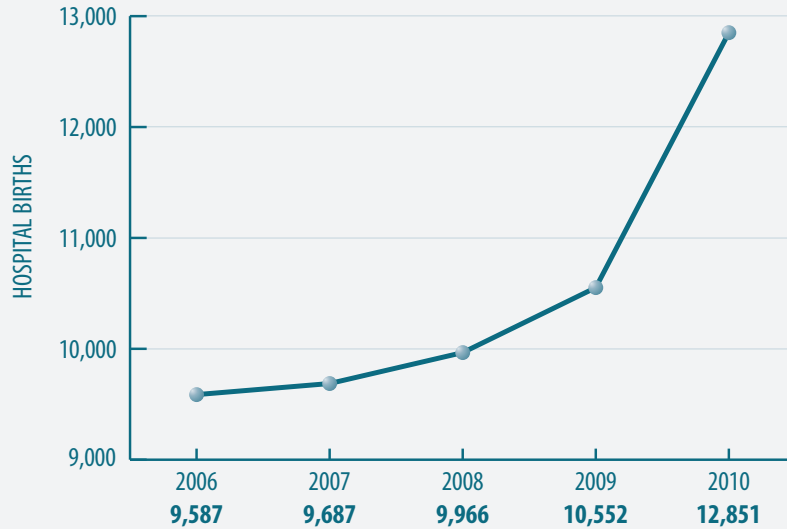
### Emergency Room Visits Per 1000 Population 2006-2010

Source: AHA Hospital Statistics



### N.D. Hospital Births, 2006-2010

Source: AHA Hospital Statistics

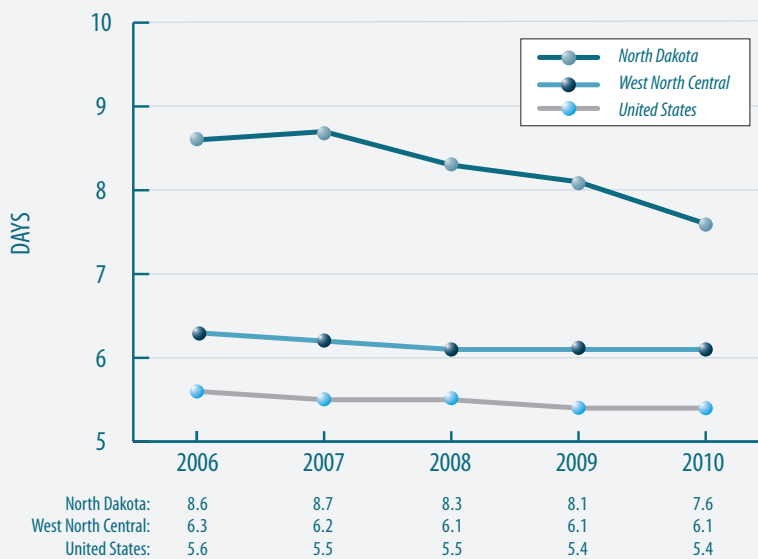


### Births

Births in North Dakota hospitals increased from **9,587** to **12,851** from 2006 to 2010, a **34.05 percent increase**.

### Average Length of Stay in Days 2006-2010

Source: AHA Hospital Statistics



### Average Length of Stay in Days (map on page 14)

Average length of stay in North Dakota hospitals is higher than both West North Central states and the United States. The average length of stay for North Dakota over the four-year period was **8.26 days** versus **6.16 days** for West North Central states and **5.48 days** for the United States.

### 2006-2010 Trends:

North Dakota:

- **11.63% decrease**

West North Central:

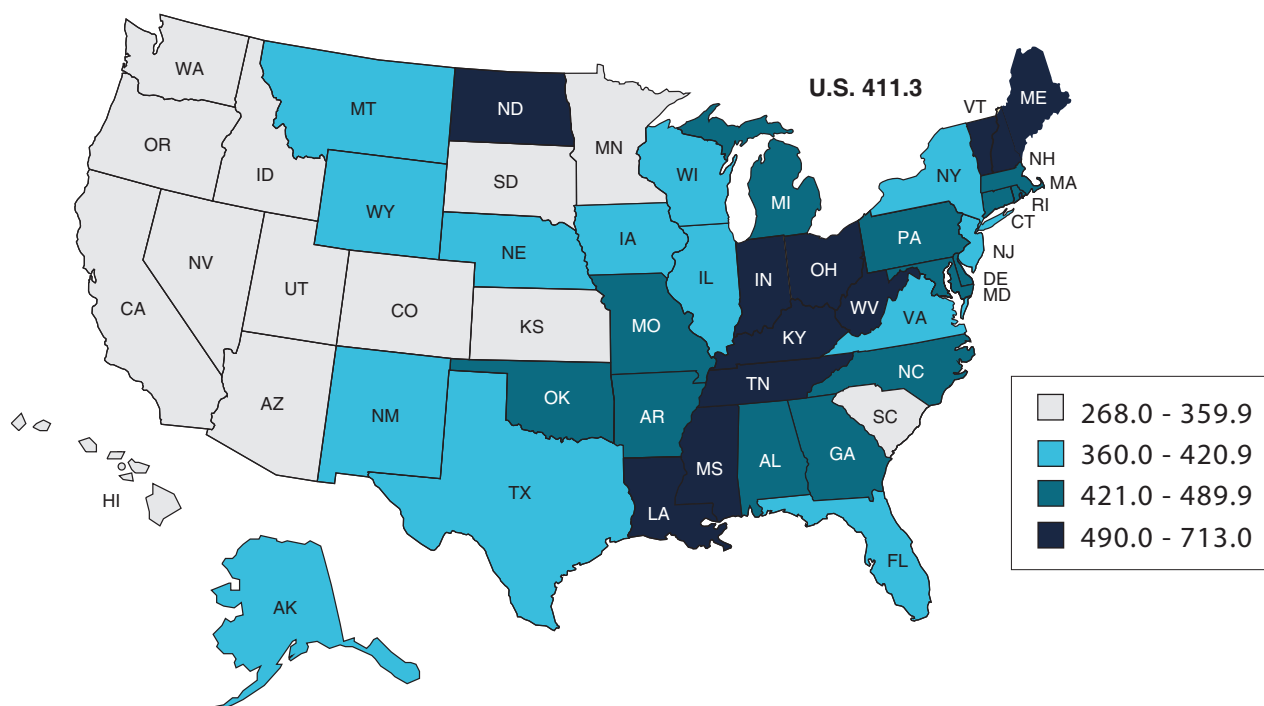
- **3.17% decrease**

United States:

- **3.57% decrease**

## Emergency Room Visits Per 1000 Population by State, 2010

The North Dakota emergency room visits per 1000 population rate of 524.2 ranked North Dakota 9<sup>th</sup> highest. The U.S. average per 1000 population was 411.3.

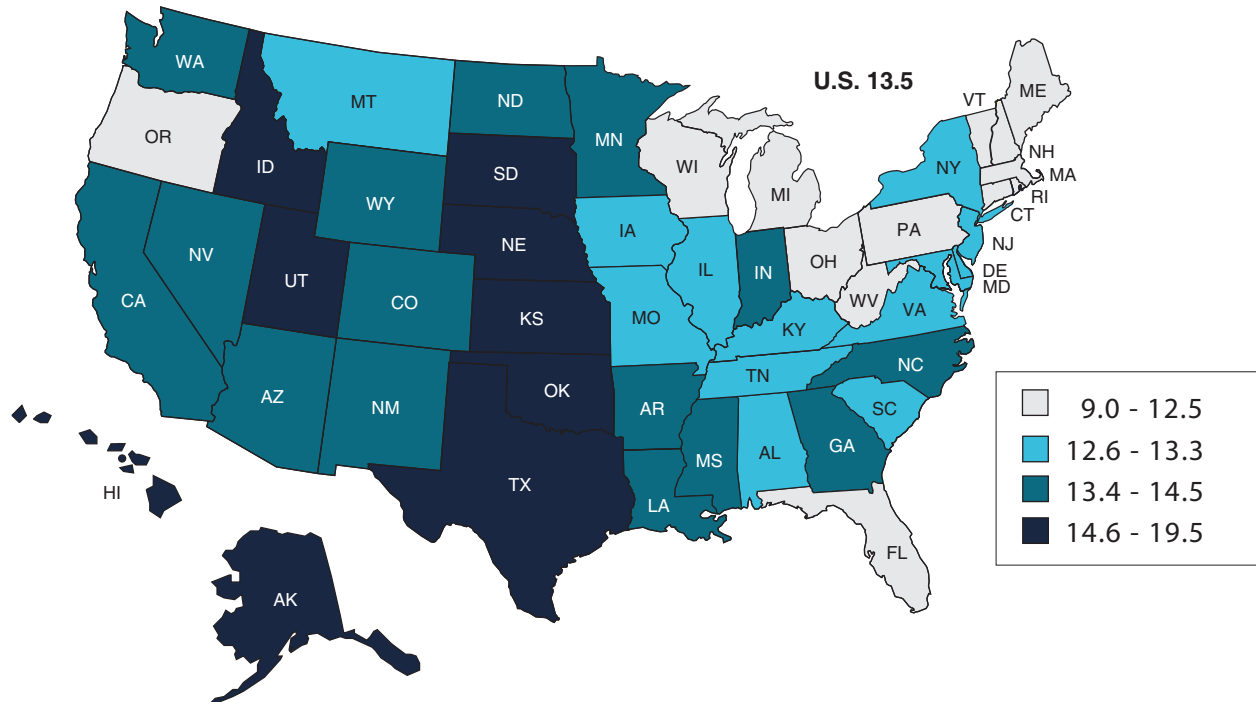


Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	E.R. Visits per 1000	Rank	State	E.R. Visits per 1000
	U.S. Average	411.3	26	Illinois	417.8
1	District of Columbia	712.4	27	New York	415.8
2	West Virginia	651.5	28	Alaska	415.4
3	Maine	595.3	29	Wyoming	409.7
4	Mississippi	574.4	30	New Mexico	408.8
5	Vermont	563.6	31	Virginia	405.9
6	Ohio	553.3	32	Florida	401.2
7	Louisiana	553.2	33	Iowa	401.1
8	Kentucky	549.1	34	Texas	385.6
<b>9</b>	<b>North Dakota</b>	<b>524.2</b>	35	Nebraska	382.9
10	New Hampshire	507.0	36	New Jersey	381.9
11	Tennessee	492.5	37	Wisconsin	379.6
12	Indiana	490.7	38	Montana	360.8
13	Alabama	481.6	39	Kansas	356.6
14	Pennsylvania	481.5	40	Arizona	349.4
15	Massachusetts	480.9	41	Minnesota	345.0
16	Missouri	478.9	42	Washington	339.7
17	Arkansas	471.2	43	Colorado	332.2
18	Rhode Island	470.3	44	Oregon	320.3
19	Oklahoma	468.6	45	South Dakota	317.7
20	Connecticut	464.4	46	South Carolina	313.5
21	Michigan	460.7	47	Idaho	311.6
22	Delaware	452.0	48	Nevada	303.4
23	North Carolina	445.5	49	Utah	300.7
24	Maryland	425.3	50	California	293.1
25	Georgia	421.7	51	Hawaii	268.3

### Number of Births Per 1000 Population by State, 2009

The North Dakota births per 1000 population rate of 13.9 ranked North Dakota 19<sup>th</sup> in in the United States. The U.S. average per 1000 population was 13.5.



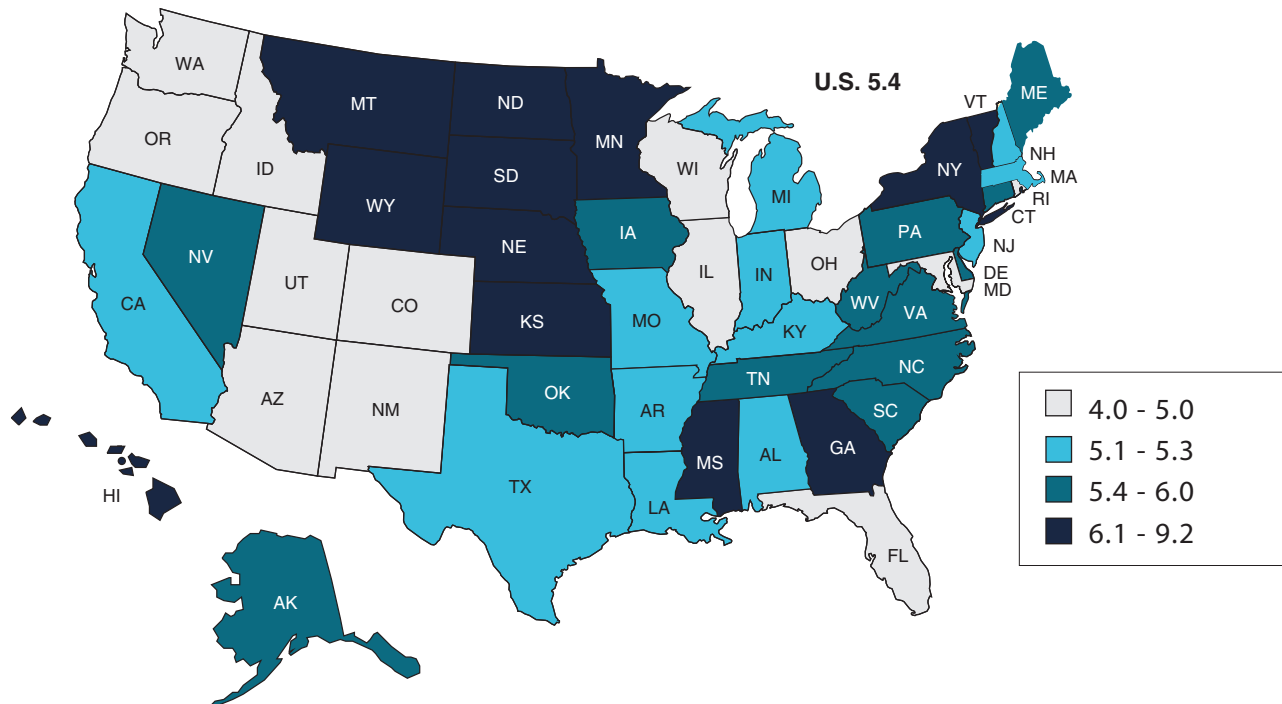
Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	Births per 1000	Rank	State	Births per 1000
	U.S. Average	13.5	26	Alabama	13.3
1	Utah	19.4	26	Illinois	13.3
2	Alaska	16.2	26	Kentucky	13.3
2	Texas	16.2	26	South Carolina	13.3
4	Idaho	15.4	26	Virginia	13.3
5	District of Columbia	15.1	31	Iowa	13.2
6	Nebraska	15.0	31	Maryland	13.2
7	Oklahoma	14.8	31	Missouri	13.2
8	Kansas	14.7	34	Delaware	13.1
8	South Dakota	14.7	34	Tennessee	13.1
10	Hawaii	14.6	36	New Jersey	12.7
11	Louisiana	14.5	36	New York	12.7
11	Mississippi	14.5	38	Montana	12.6
11	Wyoming	14.5	39	Ohio	12.5
14	Georgia	14.4	39	Wisconsin	12.5
14	New Mexico	14.4	41	Oregon	12.3
16	California	14.3	42	Florida	11.9
17	Nevada	14.2	43	Michigan	11.8
18	Arizona	14.1	44	West Virginia	11.7
<b>19</b>	<b>North Dakota</b>	<b>13.9</b>	45	Pennsylvania	11.6
20	Arkansas	13.8	46	Massachusetts	11.4
21	Colorado	13.7	47	Connecticut	11.1
22	Indiana	13.5	48	Rhode Island	10.9
22	North Carolina	13.5	49	Maine	10.2
24	Minnesota	13.4	50	New Hampshire	10.1
24	Washington	13.4	51	Vermont	9.8



## Average Length of Stay by State, 2010

The North Dakota average length of stay of 7.6 days ranked North Dakota 4<sup>th</sup> highest in the United States in 2010. The U.S. average was 5.4 days.



Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	Average Length of Stay in Days	Rank	State	Average Length of Stay in Days
	US Avg	5.4	25	Pennsylvania	5.4
1	South Dakota	9.2	27	Louisiana	5.3
2	Montana	8.7	28	Alabama	5.2
3	Wyoming	8.0	28	Arkansas	5.2
<b>4</b>	<b>North Dakota</b>	<b>7.6</b>	28	Indiana	5.2
5	Hawaii	7.5	28	Kentucky	5.2
6	District of Columbia	7.0	28	New Hampshire	5.2
6	Nebraska	7.0	28	Texas	5.2
8	New York	6.9	34	California	5.1
9	Georgia	6.4	34	Massachusetts	5.1
9	Kansas	6.4	34	Michigan	5.1
11	Mississippi	6.3	34	Missouri	5.1
12	Vermont	6.2	34	New Jersey	5.1
13	Minnesota	6.1	39	Colorado	5.0
14	Alaska	6.0	39	Florida	5.0
14	Iowa	6.0	39	Ohio	5.0
16	West Virginia	5.8	39	Rhode Island	5.0
17	Delaware	5.7	39	Wisconsin	5.0
17	South Carolina	5.7	44	Illinois	4.9
19	Connecticut	5.6	45	Idaho	4.8
19	North Carolina	5.6	46	Maryland	4.5
21	Maine	5.5	46	New Mexico	4.5
21	Oklahoma	5.5	46	Washington	4.5
21	Tennessee	5.5	49	Arizona	4.4
21	Virginia	5.5	49	Utah	4.4
25	Nevada	5.4	51	Oregon	4.3

# SECTION 2

Personnel

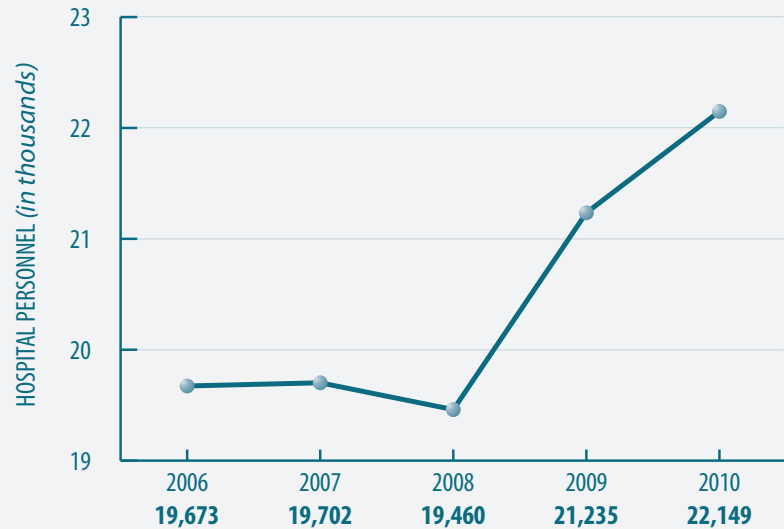


### Total Personnel (Total Facility)

From 2006 to 2010, the number of personnel employed by North Dakota hospitals increased by **12.59 percent**, peaking in 2010 at 22,149.

#### N.D. Hospital Total Personnel, 2006-2010

Source: AHA Hospital Statistics



### Total Personnel - Percent Changes

The graph to the right compares the percent changes in hospital personnel between North Dakota, South Dakota, Minnesota and Montana. The following are overall percent changes in personnel from 2006 to 2010:

North Dakota:

- **12.59% increase**

South Dakota:

- **2.62% increase**

Minnesota:

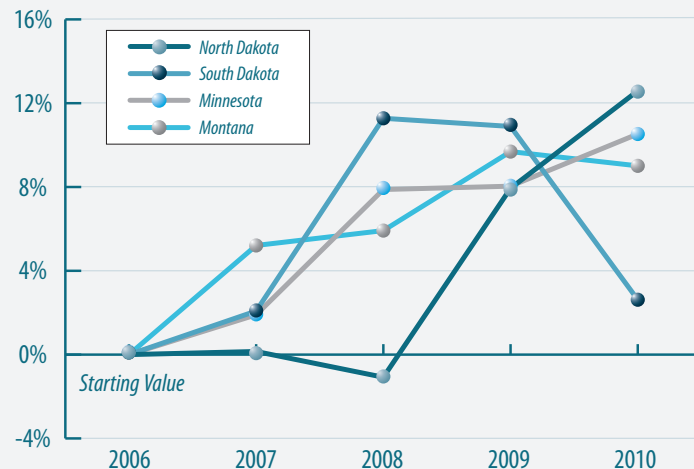
- **10.53% increase**

Montana:

- **9.01% increase**

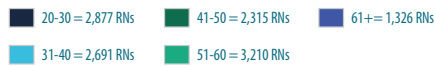
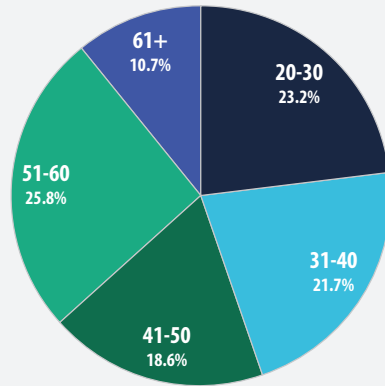
#### Four-State Comparison of Total Hospital Personnel Percent Changes, 2006-2010

Source: AHA Hospital Statistics



### Total N.D. Registered RNs by Age, 2012

Source: N.D. Board of Nursing



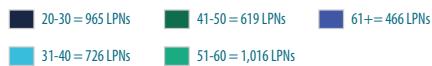
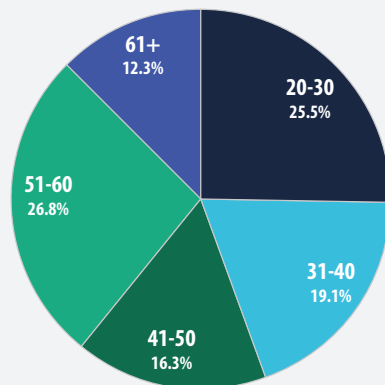
\* Total N.D. registered RNs includes all who are registered, not just those who are active.

### Total N.D. Registered Nurses (RNs) by Age

In 2012, the total number of registered North Dakota RNs was 12,419. This total reflects all registered RNs in North Dakota, not just those who are active. Of that total, **25.8 percent** are from 51-60 years of age.

### Total N.D. Registered LPNs by Age, 2012

Source: N.D. Board of Nursing



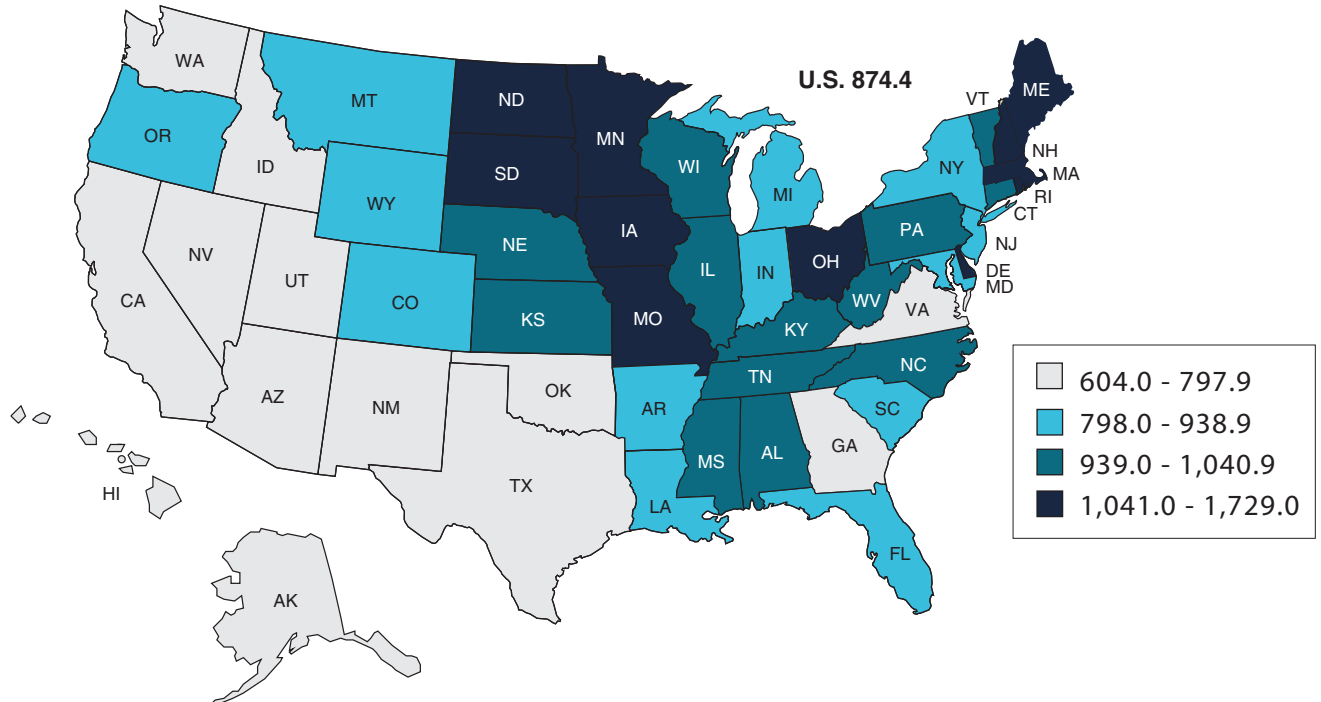
\* Total N.D. registered LPNs includes all who are registered, not just those who are active.

### Total N.D. Licensed Practical Nurses (LPNs) by Age

In 2012, the total number of registered North Dakota LPNs was 3,792. This total reflects all registered LPNs in North Dakota, not just those who are active. Of that total, **26.8 percent** are from 51-60 years of age.

## Hospital-Based Registered Nurses (RN) Per 100,000 Population by State, 2011

The rate of registered nurses employed in hospitals per 100,000 population by state is shown below. The North Dakota registered nurse FTEs per 100,000 population rate of 1,310.1 ranked North Dakota 4<sup>th</sup> highest in 2011, which is higher than the U.S. average of 874.4.

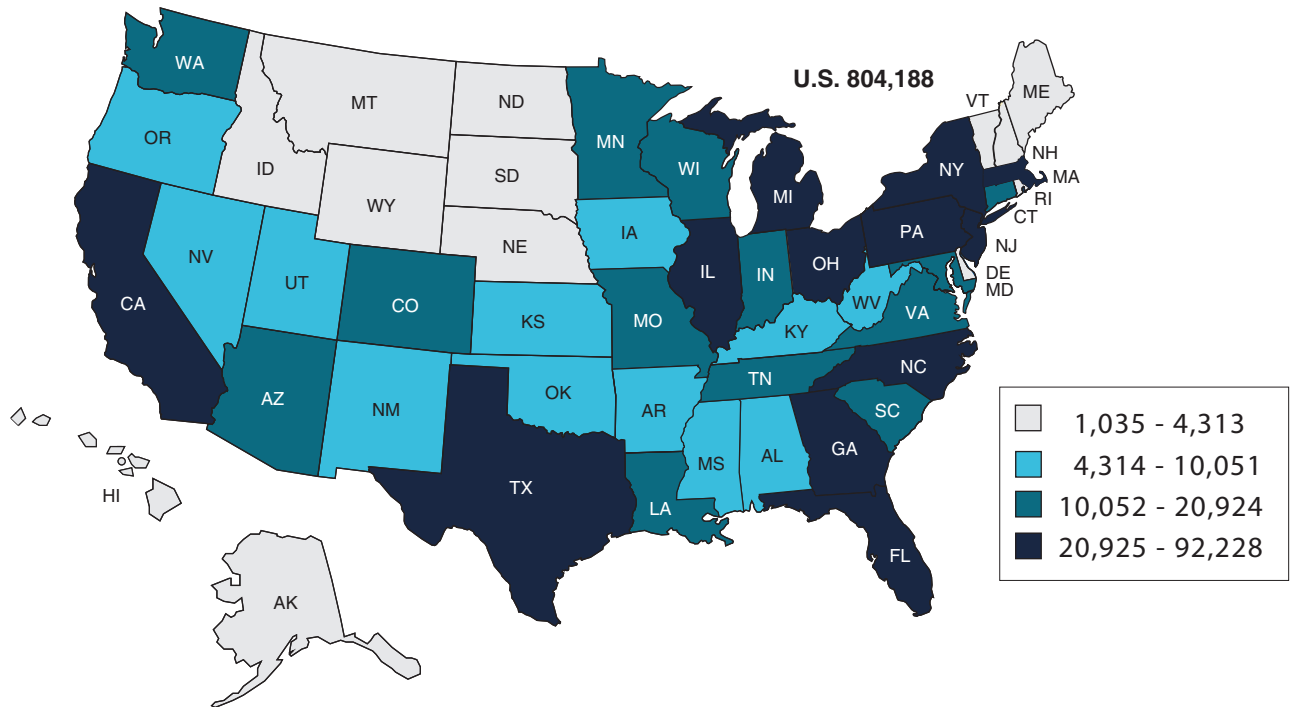


Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	RNs per 100,000	Rank	State	RNs per 100,000
	U.S. Average	874.4	26	Indiana	938.3
1	District of Columbia	1,728.2	27	South Carolina	911.5
2	South Dakota	1,349.4	28	Michigan	907.9
3	Massachusetts	1,321.3	29	New York	905.1
<b>4</b>	<b>North Dakota</b>	<b>1,310.1</b>	29	Louisiana	892.7
5	Rhode Island	1,173.8	31	New Jersey	886.3
6	Delaware	1,158.6	32	Montana	871.6
7	Missouri	1,125.2	33	Florida	864.7
8	Maine	1,115.1	34	Maryland	851.4
9	Iowa	1,085.1	35	Wyoming	844.8
10	Ohio	1,080.9	36	Colorado	830.8
11	Minnesota	1,060.1	37	Arkansas	801.6
12	New Hampshire	1,050.7	38	Oregon	799.6
13	Nebraska	1,040.4	39	Washington	797.8
14	Pennsylvania	1,026.0	40	Virginia	768.3
15	Kentucky	1,025.6	40	Alaska	755.5
16	Vermont	1,016.9	42	Oklahoma	746.1
17	Connecticut	1,014.3	43	Hawaii	742.6
18	Mississippi	995.1	44	New Mexico	739.6
19	Wisconsin	988.0	45	Idaho	735.7
20	West Virginia	985.3	46	Texas	720.1
21	Kansas	981.5	47	Arizona	689.7
22	Illinois	961.7	48	Utah	678.0
23	Tennessee	945.9	49	Georgia	664.7
24	North Carolina	945.5	50	California	663.9
25	Alabama	945.3	51	Nevada	604.8

## Number of Physicians by State, 2012

The 2012 rate of non-federal professional active physicians by state is shown below. North Dakota had 1,586 total physicians. In 2012, there was a total of 804,188 non-federal physicians in the U.S.

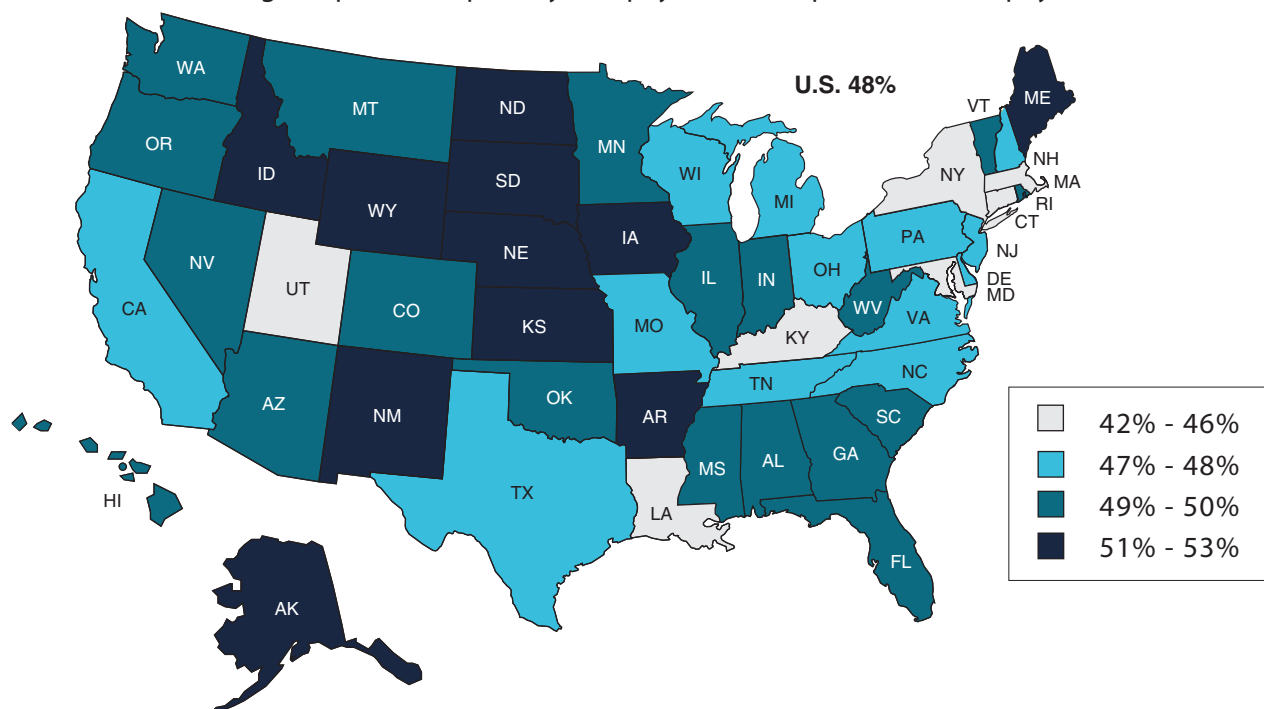


Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	Total Physicians	Rank	State	Total Physicians
	U.S.	804,188	26	Alabama	10,051
1	California	92,228	27	Oregon	9,953
2	New York	65,334	28	Kentucky	9,908
3	Texas	52,275	29	Oklahoma	7,827
4	Florida	45,641	30	Iowa	6,883
5	Pennsylvania	39,481	31	Kansas	6,160
6	Illinois	34,116	32	District of Columbia	5,851
7	Ohio	33,442	33	Utah	5,560
8	Michigan	29,827	34	Arkansas	5,548
9	Massachusetts	28,580	35	Mississippi	5,489
10	New Jersey	24,379	36	Nevada	5,059
11	North Carolina	22,468	37	New Mexico	4,684
12	Georgia	20,925	38	West Virginia	4,528
13	Virginia	20,022	39	Nebraska	4,313
14	Maryland	19,480	40	Maine	3,973
15	Washington	17,964	41	Rhode Island	3,855
16	Tennessee	16,052	42	New Hampshire	3,561
17	Missouri	16,022	43	Hawaii	3,414
18	Minnesota	14,892	44	Idaho	2,664
19	Arizona	14,823	45	Delaware	2,588
20	Wisconsin	14,616	46	Montana	2,049
21	Indiana	14,382	47	Vermont	1,972
22	Colorado	12,621	48	South Dakota	1,832
23	Connecticut	11,770	49	Alaska	1,616
24	Louisiana	10,807	<b>50</b>	<b>North Dakota</b>	<b>1,586</b>
25	South Carolina	10,082	51	Wyoming	1,035

## Non-Federal Primary Care Physicians as a Percent of Total Physicians, 2012

The 2012 rate of non-federal physicians as a percent of total physicians is shown below. 53 percent of physicians in North Dakota are in primary care, which is 5 percent higher than the U.S. average of 48 percent. North Dakota is tied with Alaska for the highest percent of primary care physicians as a percent of total physicians.

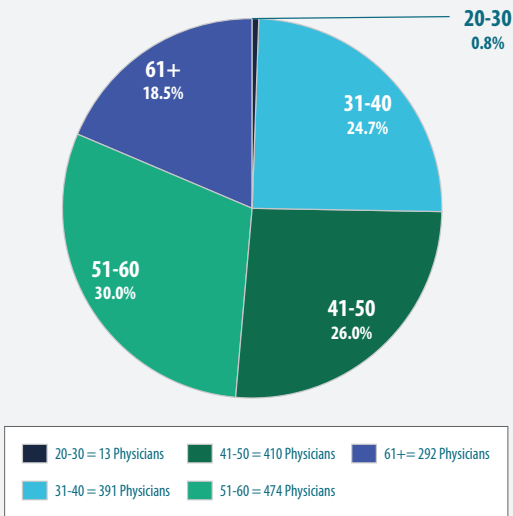


Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	% of Total	Rank	State	% of Total
	U.S. Average	48%	20	Alabama	49%
1	Alaska	53%	20	Vermont	49%
<b>1</b>	<b>North Dakota</b>	<b>53%</b>	20	Florida	49%
3	Iowa	52%	20	Arizona	49%
3	Wyoming	52%	20	Montana	49%
3	Kansas	52%	31	Michigan	48%
3	South Dakota	52%	31	California	48%
7	Maine	51%	31	North Carolina	48%
7	Arkansas	51%	31	Virginia	48%
7	Idaho	51%	31	Texas	48%
7	New Mexico	51%	31	Wisconsin	48%
7	Nebraska	51%	31	New Hampshire	48%
12	Oklahoma	50%	31	New Jersey	48%
12	Hawaii	50%	31	Delaware	48%
12	Illinois	50%	40	Missouri	47%
12	West Virginia	50%	40	Ohio	47%
12	Mississippi	50%	40	Pennsylvania	47%
12	Georgia	50%	40	Tennessee	47%
12	Nevada	50%	44	Kentucky	46%
12	South Carolina	50%	44	Louisiana	46%
20	Colorado	49%	46	Connecticut	45%
20	Minnesota	49%	46	Maryland	45%
20	Washington	49%	46	Utah	45%
20	Oregon	49%	46	Massachusetts	45%
20	Rhode Island	49%	50	New York	44%
20	Indiana	49%	51	District of Columbia	42%

### Total N.D. Active Physicians by Age, 2012

Source: N.D. Medical Association

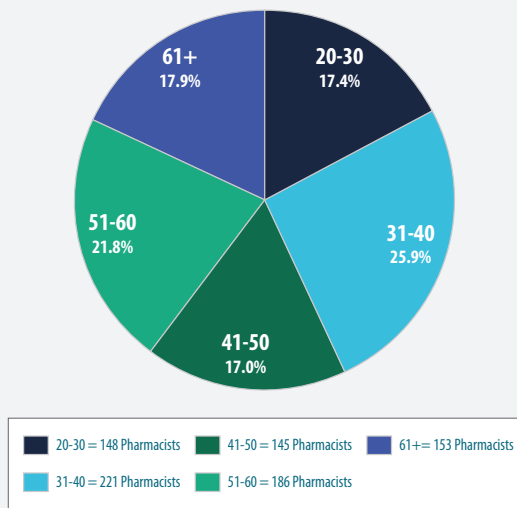


### Total N.D. Active Physicians by Age

In 2012, the total number of active North Dakota physicians was 1,580. Of that total, **30.0 percent** are from 51-60 years of age.

### Total N.D. Licensed Pharmacists by Age, 2012

Source: N.D. Board of Pharmacy



### Total N.D. Licensed Pharmacists by Age

In 2012, the total number of licensed pharmacists in North Dakota was 853. This total reflects all licensed pharmacists in North Dakota, not just those who are active. Of that total, **25.9 percent** are from 31-40 years of age.

\* Total N.D. Licensed Pharmacists includes all who are licensed, not just those who are active.



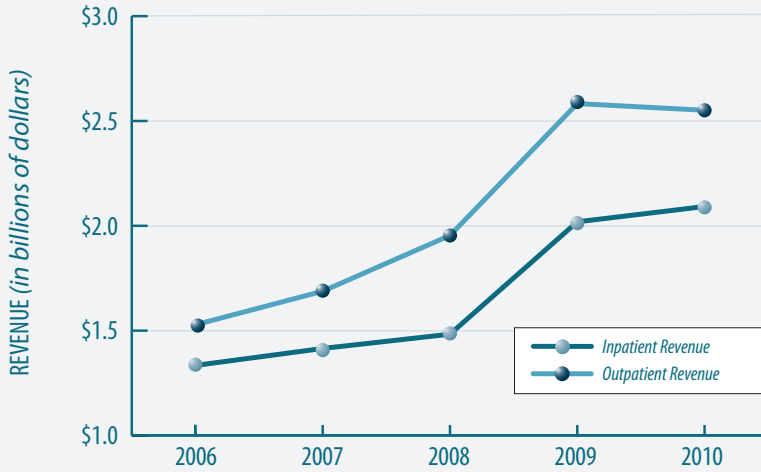
# SECTION 3

Hospital and Health System Finances



### N.D. Hospital Revenue 2006-2010

Source: AHA Hospital Statistics



Inpatient:	\$1,334,432,797	\$1,414,871,895	\$1,483,180,662	\$2,019,340,609	\$2,092,135,268
Outpatient:	\$1,527,971,411	\$1,687,925,226	\$1,953,610,192	\$2,583,127,227	\$2,551,094,052

### Trends In Revenue

Inpatient revenue increased by more than \$757.7 million or **56.78 percent** between 2006 and 2010. There has also been a tremendous growth in outpatient revenue. From 2006 to 2010, outpatient revenue has increased over \$1.0 billion or **66.96 percent** in North Dakota hospitals. In 2010, outpatient revenue accounted for **54.94 percent** of total hospital revenues.

### Current Ratio, 2006-2010

Source: Almanac of Hospital Financial and Operating Indicators



North Dakota:	1.82	1.75	1.75	1.78	2.16
All Hospitals:	2.00	2.02	1.98	2.01	2.06

### Current Ratio

Current ratio is defined as the number of dollars held in current assets per dollar of current liabilities. It is perhaps the most widely used measure of liquidity.

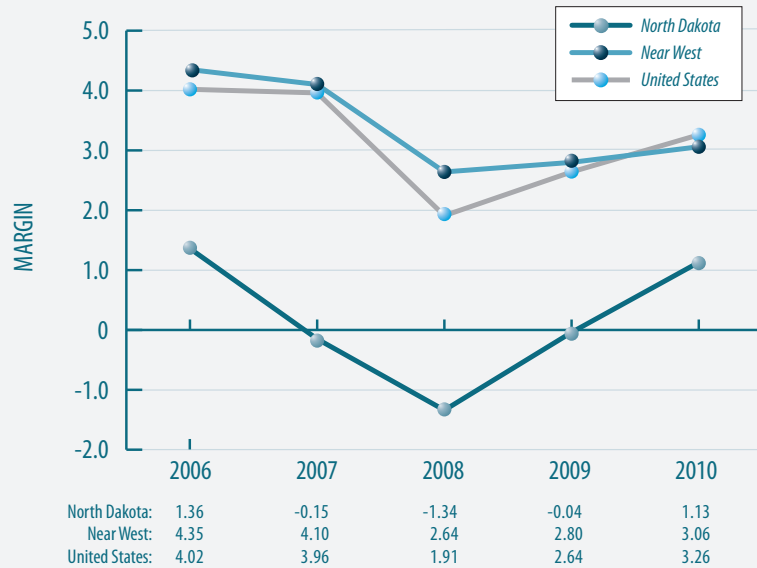
The current ratio of North Dakota hospitals has been less than the nation's average, except in 2010. During the most recent five-year reporting period, North Dakota hospitals averaged a current ratio of **1.85**, whereas the average of all hospitals was **2.01**.

### Total Margin

On average, North Dakota hospitals experience lower margins than Near West hospitals and total U.S. hospitals. From 2006 through 2010, North Dakota hospitals averaged a margin of **positive .19**, whereas U.S. hospitals overall averaged a **positive margin of 3.16** during the same time period. Hospitals in Near West states\* averaged a **positive margin of 3.39** from 2006 to 2010.

### Total Margin, 2006-2010

Source: Almanac of Hospital Financial and Operating Indicators

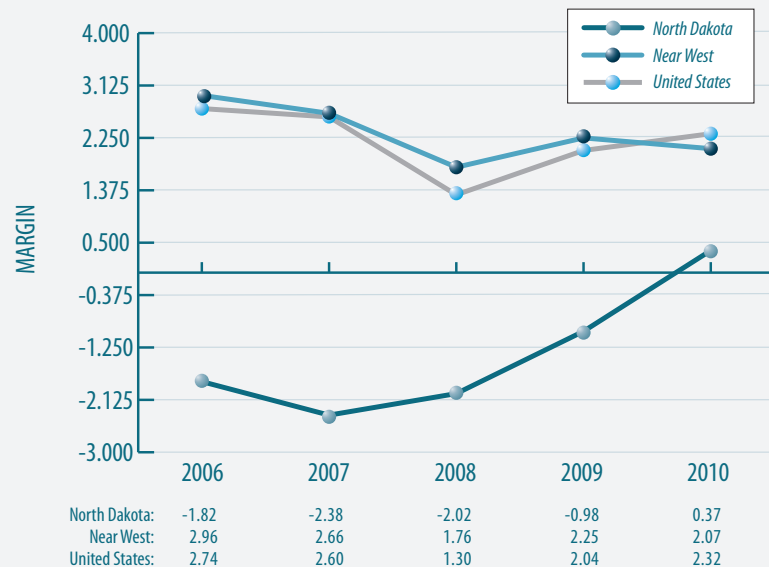


### Operating Margin

On average, North Dakota hospitals experience a lower operating margin than Near West hospitals and total U.S. hospitals. From 2006 through 2010, North Dakota hospitals averaged a margin of **negative 1.37**, whereas U.S. hospitals overall averaged a **positive margin of 2.20** during the same time period. Hospitals in Near West states\* averaged a **positive margin of 2.34** from 2006 to 2010.

### Operating Margin, 2006-2010

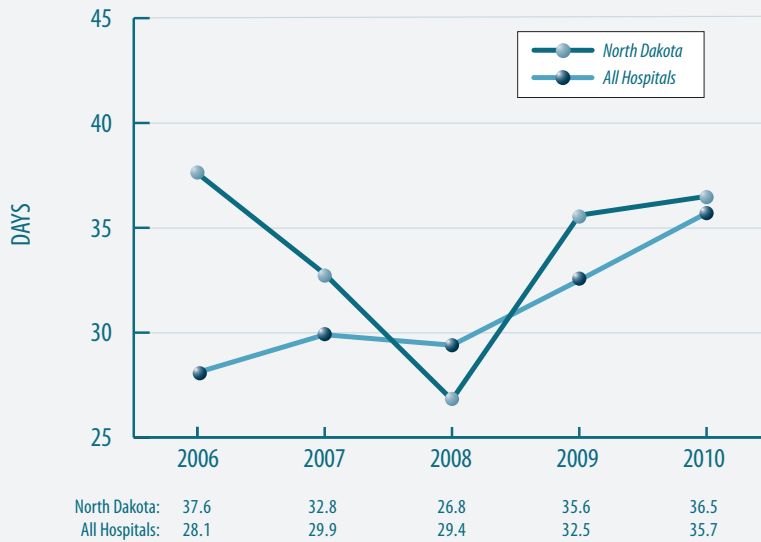
Source: Almanac of Hospital Financial and Operating Indicators



\* Includes ND, SD, NE, KS, OK, TX, LA, AK, MO, IA, MN

### Days Cash on Hand, All Sources 2006-2010

Source: Almanac of Hospital Financial and Operating Indicators



### Days Cash on Hand

North Dakota hospitals averaged a slightly higher days cash on hand when compared to all other U.S. hospitals. Although levels varied from 2006-2010, ND hospitals tended to have an average of **33.9 days** cash on hand. The average cash on hand for all hospitals from 2006-2010 is **31.1 days**.

### Days in Accounts Receivable 2006-2010

Source: Almanac of Hospital Financial and Operating Indicators



### Days in Accounts Receivable

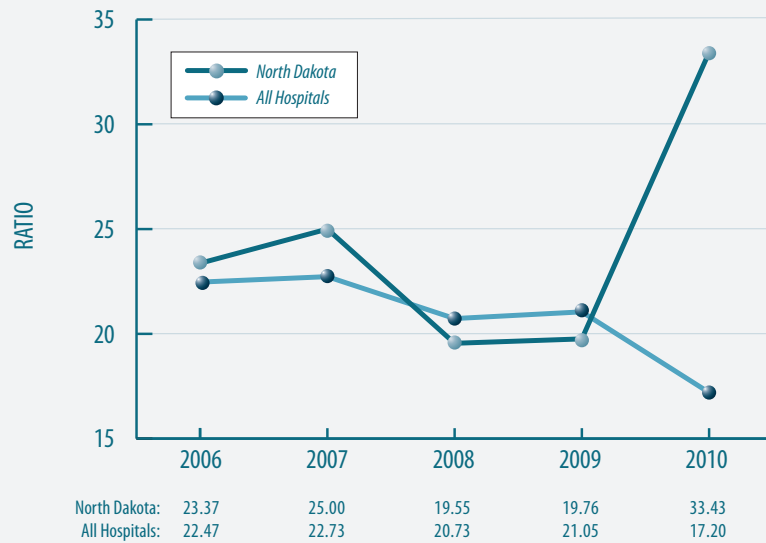
From 2006 to 2010, North Dakota hospitals averaged **61.4 days** in accounts receivable and U.S. hospitals averaged **55.9 days** in accounts receivable. Over the five-year period, days in accounts receivable for U.S. hospitals decreased by **11.24 percent**. During that same period, North Dakota hospitals decreased their days in accounts receivable by **22.02 percent**.

## Long-Term Debt to Equity

Long-term debt to equity is defined as long term debt divided by the fund balance. From 2006 to 2010, the long-term debt to equity ratio of North Dakota increased from 23.37 to 33.43, an increase of **43.05 percent**. From 2006 to 2010, the long-term debt to equity ratio of all hospitals decreased from 22.47 to 17.20, a decrease of **23.45 percent**.

### Long-Term Debt to Equity 2006-2010

Source: Almanac of Hospital Financial and Operating Indicators

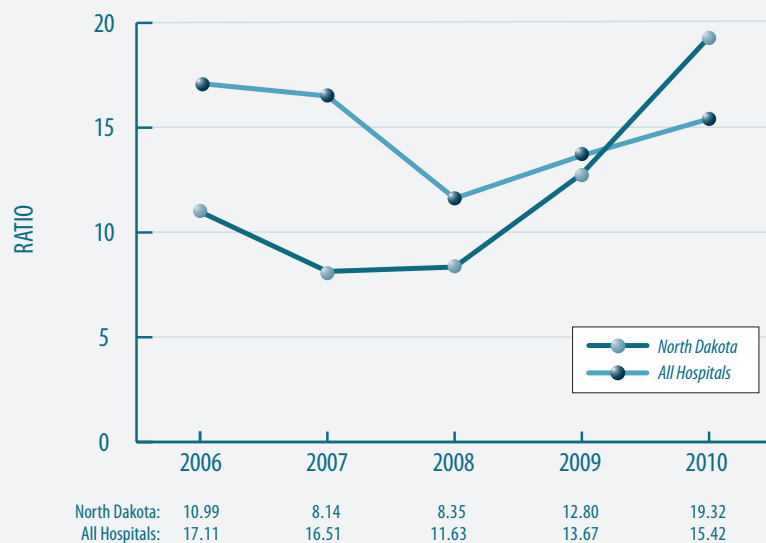


## Cash Flow to Total Debt

The cash flow to total debt ratio has fluctuated among North Dakota and U.S. hospitals from 2006 to 2010. The ND ratio averaged **11.92** during the five-year period, lower than the national average of **14.87** during the same reporting period.

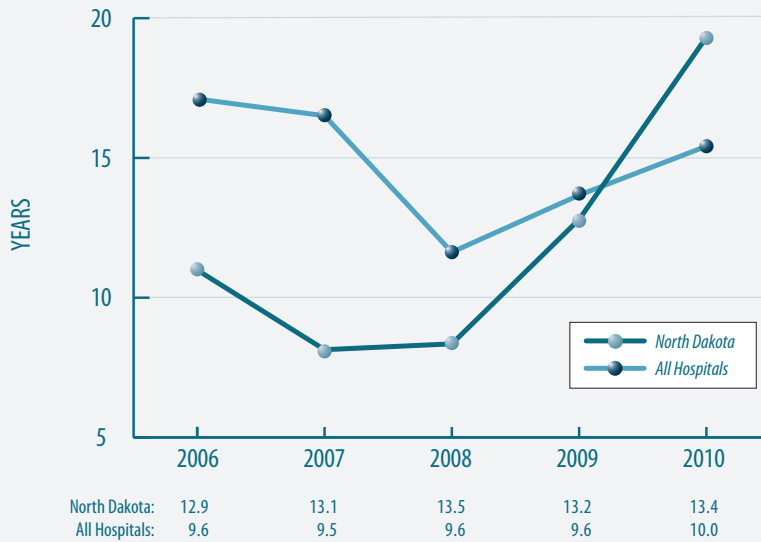
### Cash Flow to Total Debt 2006-2010

Source: Almanac of Hospital Financial and Operating Indicators



### Average Age of Plant 2006-2010

Source: Almanac of Hospital Financial and Operating Indicators



### Average Age of Plant

The average age of plant for North Dakota hospitals runs about 3.5 years higher than that of all other hospitals in the nation. From 2006 to 2010, U.S. hospitals had an average age of plant of **9.7 years**, whereas North Dakota hospitals had an average age of plant of **13.2 years** during the same time period.

### Payroll and Benefits Expense as a Percent of Total Expenses

Source: AHA Hospital Statistics

<b>North Dakota</b>	<b>54.2%</b>
<b>West North Central</b>	<b>51.1%</b>
<b>U.S. Total</b>	<b>51.3%</b>

### Payroll and Benefits Expense as a Percent of Total Expense

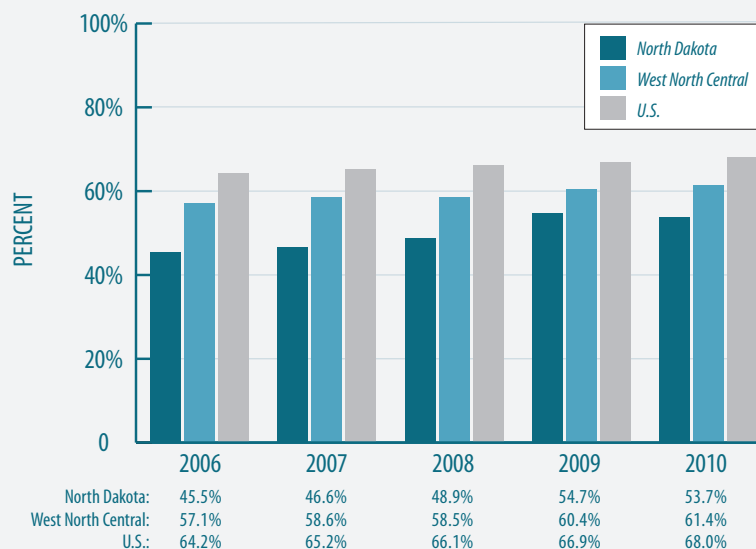
In North Dakota, payroll and benefits account for **54.2 percent** of total hospital expenses. This is higher than in West North Central states and the total U.S., where payroll and benefits are **51.1 percent** and **51.3 percent** of total expenses, respectively.

## Deductions From Revenue

Deductions from revenue include contractual allowances and charity care. In North Dakota, these deductions accounted for **45.5 percent** of gross patient revenue in 2006 and increased to **53.7 percent** of hospital revenues in 2010. The average deductions from revenue as a percentage of gross patient revenue over the 5-year period is **49.9 percent** for North Dakota as opposed to a **59.2 percent** average for West North Central and **66.1 percent** average for the U.S.

### Deductions from Revenue as a Percentage of Gross Revenue, 2006-2010

Source: AHA Hospital Statistics



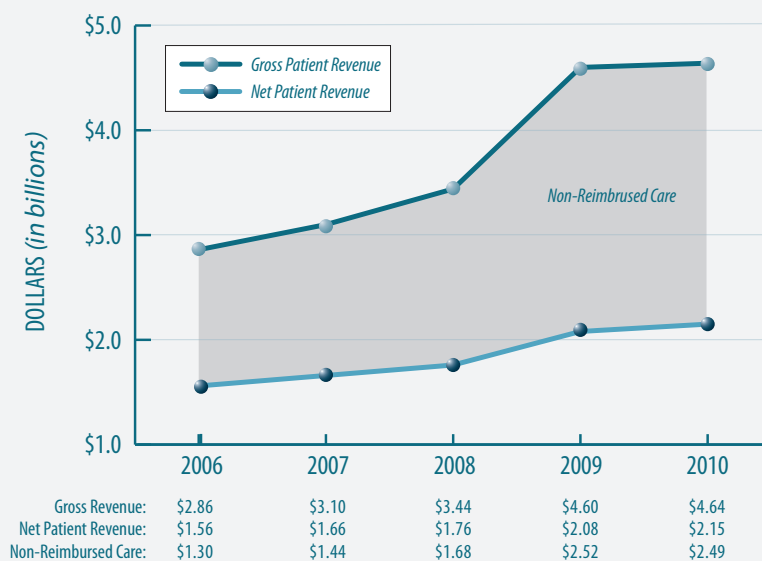
	2006	2007	2008	2009	2010
North Dakota	45.5%	46.6%	48.9%	54.7%	53.7%
West North Central	57.1%	58.6%	58.5%	60.4%	61.4%
U.S.	64.2%	65.2%	66.1%	66.9%	68.0%

## Non-Reimbursed Care

The gap between charges for services rendered and actual payments received has widened over the last five years. In North Dakota, gross patient revenue rose from approximately \$2.86 billion to \$4.64 billion, an increase of **62.24 percent**. Net patient revenue rose from approximately \$1.56 billion to \$2.15 billion, an increase of **37.82 percent**. The result is a **91.54 percent** increase from 2006-2010 in non-reimbursed care.

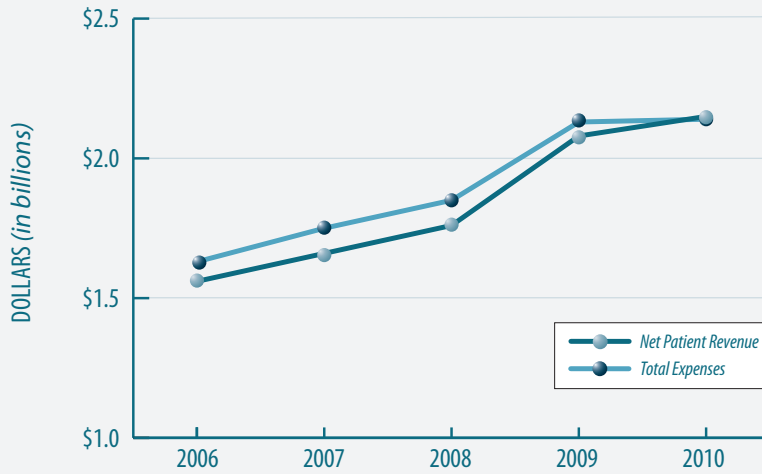
### N.D. Non-Reimbursed Care, 2006-2010

Source: AHA Hospital Statistics



### N.D. Net Patient Revenue & Expenses 2006-2010

Source: AHA Hospital Statistics



Net Patient Revenue:	\$1.56	\$1.66	\$1.76	\$2.08	\$2.15
Total Expenses:	\$1.63	\$1.75	\$1.85	\$2.13	\$2.14

### Net Patient Revenue and Total Expenses

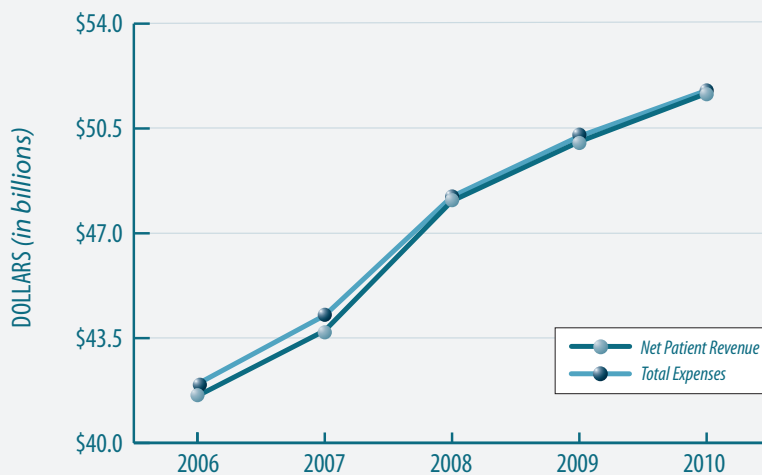
In North Dakota, West North Central states and the U.S., the amount of total patient expenses exceeded that of net patient revenue almost every year from 2006 to 2010. This indicates that hospitals are increasingly unable to rely on reimbursement from providing patient care to pay for the expenses associated with providing that care.

#### North Dakota

In North Dakota, the percent increase of total expenses from 2006 to 2010 was **31.45 percent**. The percent increase of net patient revenue was **37.9 percent**.

### West North Central Net Patient Revenue & Expenses 2006-2010

Source: AHA Hospital Statistics



Net Patient Revenue:	\$41.57	\$43.75	\$48.08	\$50.06	\$51.67
Total Expenses:	\$41.97	\$44.26	\$48.23	\$50.24	\$51.77

#### West North Central

In the West North Central zone, the increase in total expenses from 2006 to 2010 was **23.34 percent**. The increase in net patient revenue was **24.31 percent**.

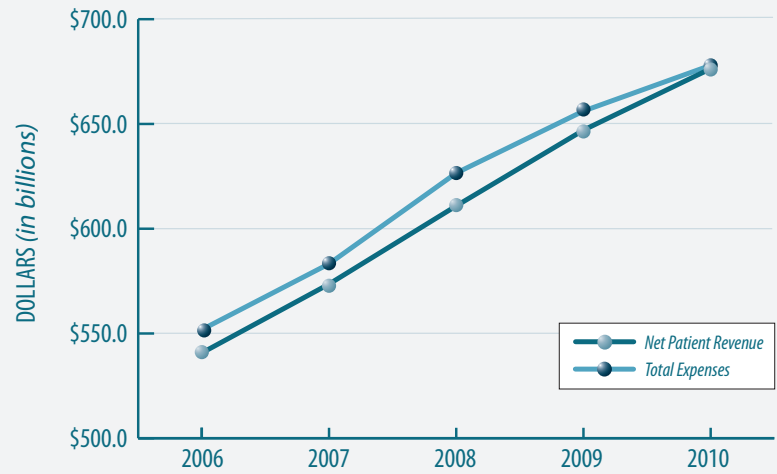


## United States

In the United States, the increase in total expenses from 2006 to 2010 was **22.86 percent**. The increase of net patient revenue was **25.09 percent**.

### U.S. Net Patient Revenue & Expenses 2006-2010

Source: AHA Hospital Statistics



Net Patient Revenue:	\$540.73	\$573.58	\$610.90	\$647.06	\$676.38
Total Expenses:	\$551.84	\$583.25	\$626.58	\$656.16	\$677.97

## Why is income important?

### *THE NEED FOR A MARGIN*

- Hospitals need a positive total income (total margin) to stay in business. Those that have a negative total margin (deficit) are not receiving sufficient revenue to pay all their expenses. Hospitals operating at a deficit must use other sources of funds, such as cash reserves, investment income, or the sale of assets to pay their expenses. Unless these hospitals can alleviate the deficit by increasing revenues and/or cutting expenses, they may be forced to shut down operations.
- Earning a positive total margin alone may not be enough to remain viable. Hospitals need to earn sufficient income to improve the caliber of health care that they provide to their local communities. Excess revenues over costs are necessary to hire well-trained staff, replace worn out or obsolete buildings and equipment, conduct medical research, keep pace with advances in medical technology, and help cover the cost of care for patients who cannot pay.
- Hospitals finance improvements to facilities and equipment by issuing bonds or entering into other debt financing. However, financial institutions and potential bondholders must be convinced that a hospital is capable of repaying its debt, thus making it difficult for hospitals with low or negative income to borrow money.
- It is very important to closely monitor hospital income levels because relatively small changes in revenues or expenses can make a large difference in the financial health of a hospital. For example, a hospital with a four percent operating margin one year can have an operating deficit the next year if revenues fall by two percent and expenses rise at the rate of inflation, two to three percent.

## What is an “appropriate” income level?

- The “appropriate” level of income needed to keep a hospital financially viable will differ for each individual hospital or health system. The exact amount of income a hospital needs depends on multiple factors, including, but not limited to: the condition of its plant and equipment, amount of debt, assets available for capital improvements, the mix of services provided, dependence of government payers (Medicare and Medicaid) for income, and the current and future needs of the market a hospital serves.
- For example, a hospital that has experienced low or negative income levels for a number of years may need to realize an above average income level if it is to make overdue capital improvements, reduce outstanding debt or replenish its capital reserves. Alternatively, a hospital with a history of moderate income levels can likely remain viable with a lower income level if it has kept pace with needed improvements and has not depleted its capital reserves or acquired debt in order to meet expenses.

## Operating Margin vs. Total Margin

- Hospital income is usually expressed as either operating margin or total margin. Operating margin reflects the percent of operating revenue left after all operating expenses are paid. A hospital's operations include functions directly related to patient care as well as other related functions such as medical education, cafeterias, office space, and parking. A positive operating margin indicates a hospital is receiving more revenue for its operations than its costs to run them. Alternatively, a negative operating margin indicates that revenues are not covering costs.
- The calculation of total margin includes both operating income and income from other sources. Examples of non-operating income include investments, trust income, contributions, and county tax appropriations. Total margin reveals the composite financial health of a facility over the course of a given period, for example, one year. If total margin is negative, the hospital is losing money after all sources of revenue and income have been considered.
- Some hospitals have endowments that enable them to continue to provide services beyond the level of operating income they receive. For those hospitals, a negative operating margin may not be that critical as long as their total margin is positive. But income from sources other than hospitals' primary business is not always readily available and is insufficient to ensure survival indefinitely. Other hospitals may not have large endowments or sources of other income. As a result, their operating margin and total margin will be similar. In these situations, a low or negative operating margin and total margin may reveal the hospital is under financial stress.

## Why do hospitals need an operating margin?

- Positive operating margins are needed to maintain the high quality of patient care people deserve. Hospitals have accepted responsibility for the care provided to the medically indigent and uninsured which is largely uncompensated.
- In addition to expenses incurred in providing patient care (medicine, labor, room and board, for instance), hospitals face a constant demand for funds to keep pace with rapid advances in medical care and to replace outdated or worn-out facilities and equipment. Patients expect to be treated with the best technology available at the time. Such equipment gives better diagnostic information and permits less invasive procedures to be performed, leading to more rapid patient recovery. Attendant costs are high, ranging from several thousand dollars for a new drug to millions of dollars for one piece of equipment.
- Maintain and update physical structures.
- Provide new programs and services to meet the community's health care needs.
- Hire and retain highly trained health professionals who are in short supply in North Dakota and across the United States.
- Funds are needed to support hospital-related research and education. In addition to the direct costs incurred in training medical residents, teaching hospitals incur additional costs related to more extensive testing and more complex cases. The indirect costs often exceed federal and private payments provided for these activities.

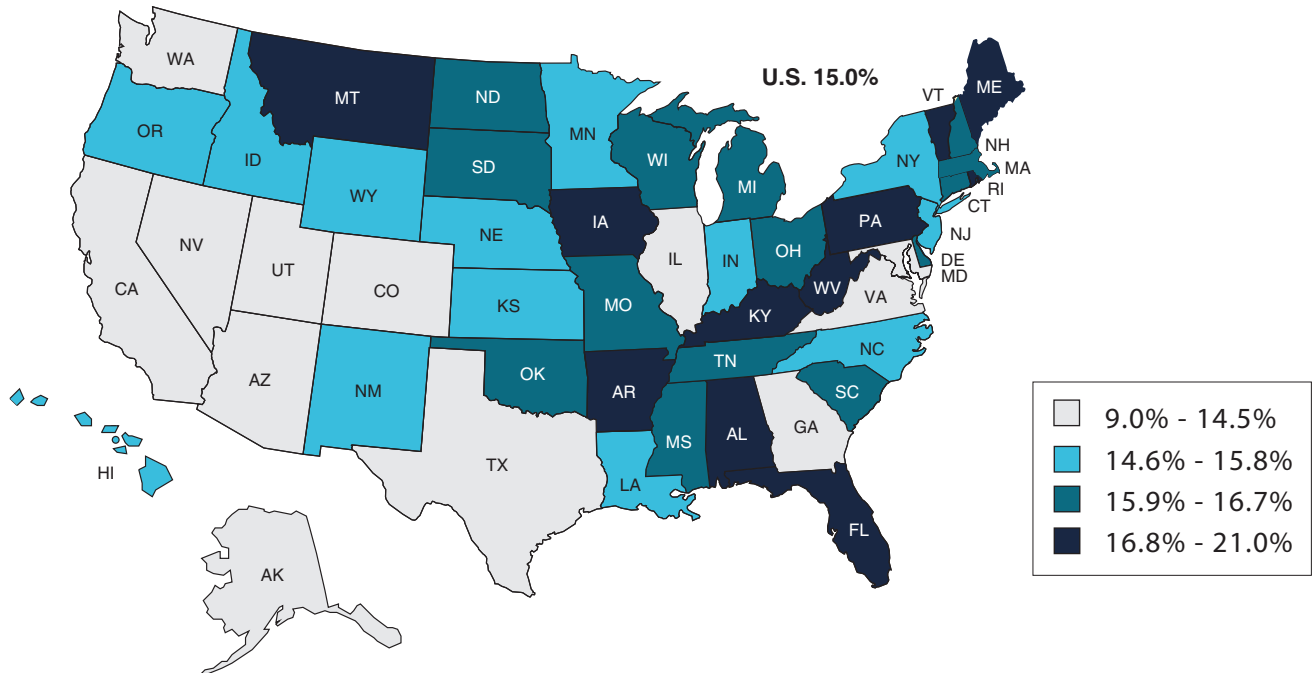
# SECTION 4

Payment for Hospital and  
Health System Care



## Medicare Enrollment as a Percent of Total Population, 2010

The map and information below highlights Medicare beneficiaries as a percent of total population in 2010. North Dakota Medicare beneficiaries account for 16.7% of the total population, tied for 12<sup>th</sup> highest in the nation. Medicare payment equities place an increasing burden on North Dakota hospitals and health systems.

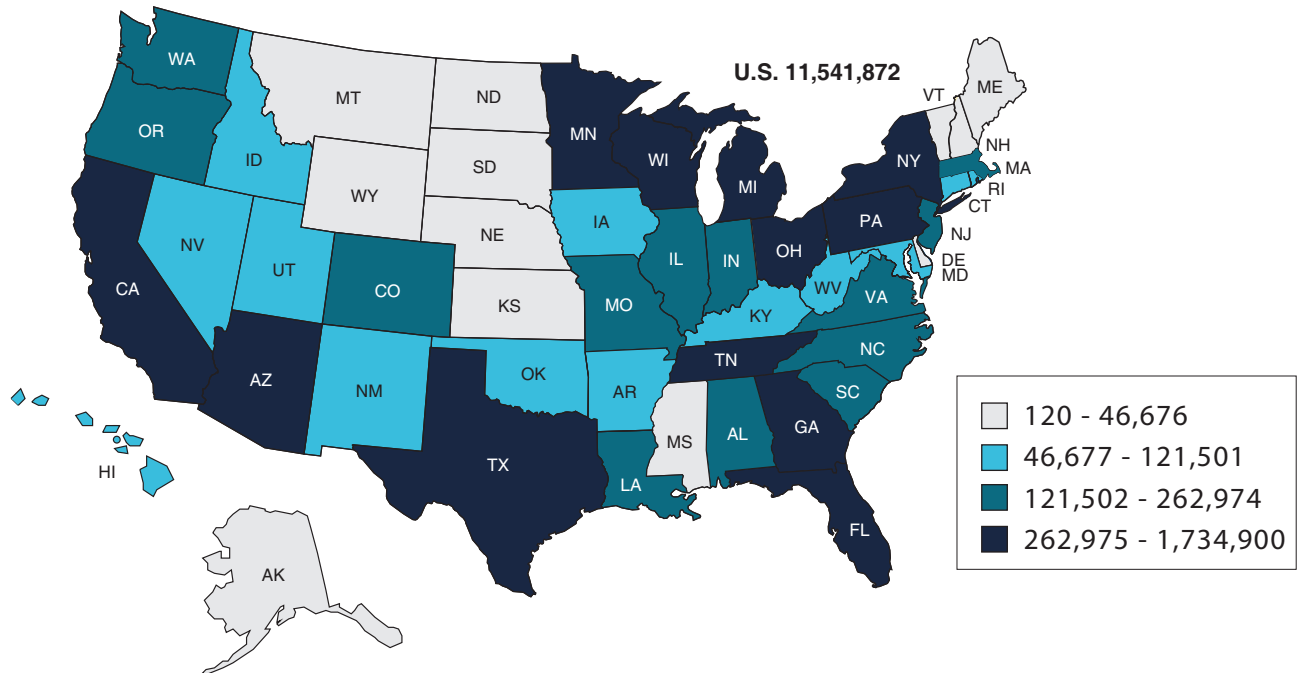


Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	Medicare Enrollment	Rank	State	Medicare Enrollment
	United States	15.0%	26	Hawaii	15.8%
1	West Virginia	20.9%	26	Oregon	15.8%
2	Maine	19.9%	28	North Carolina	15.7%
3	Arkansas	18.2%	29	Indiana	15.5%
4	Pennsylvania	17.9%	30	Nebraska	15.4%
5	Florida	17.8%	30	New Mexico	15.4%
5	Alabama	17.8%	32	Kansas	15.3%
7	Vermont	17.7%	33	New York	15.2%
8	Kentucky	17.4%	34	New Jersey	15.1%
9	Rhode Island	17.2%	34	Louisiana	15.1%
9	Montana	17.2%	36	Minnesota	14.7%
11	Iowa	17.1%	37	Wyoming	14.6%
<b>12</b>	<b>North Dakota</b>	<b>16.7%</b>	37	Idaho	14.6%
12	South Carolina	16.7%	39	Virginia	14.3%
12	South Dakota	16.7%	39	Washington	14.3%
12	Mississippi	16.7%	41	Illinois	14.1%
16	Delaware	16.6%	42	Maryland	13.6%
16	Missouri	16.6%	43	Nevada	13.2%
16	Tennessee	16.6%	44	Arizona	13.0%
19	Michigan	16.4%	45	District of Columbia	12.9%
20	Ohio	16.3%	46	California	12.7%
20	New Hampshire	16.3%	47	Georgia	12.4%
22	Oklahoma	16.2%	48	Colorado	12.1%
23	Connecticut	16.0%	49	Texas	11.9%
24	Wisconsin	15.9%	50	Utah	10.0%
24	Massachusetts	15.9%	51	Alaska	9.3%

## Total Medicare Advantage (MA) Enrollment, 2011

The map and information below highlight Medicare Advantage Enrollment in 2011. North Dakota's Medicare Advantage Enrollment for 2011 was 9,472, which ranked it 6<sup>th</sup> lowest in the United States.



Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	Medicare Advantage Enrollment	Rank	State	Medicare Advantage Enrollment
	United States	11,541,872	26	Kentucky	121,501
1	California	1,734,900	27	Nevada	109,757
2	Florida	1,072,453	28	Connecticut	108,766
3	New York	918,606	29	Oklahoma	89,678
4	Pennsylvania	865,200	30	Hawaii	88,986
5	Ohio	640,245	31	Utah	88,115
6	Texas	600,193	32	New Mexico	81,106
7	Michigan	389,983	33	Arkansas	75,645
8	Minnesota	349,715	34	West Virginia	73,222
9	Arizona	342,978	35	Iowa	64,749
10	Wisconsin	273,527	36	Rhode Island	63,553
11	Georgia	269,574	37	Idaho	63,070
12	Tennessee	265,842	38	Maryland	61,840
13	North Carolina	262,974	39	Mississippi	46,676
14	Oregon	254,056	40	Kansas	45,560
15	Washington	247,229	41	Maine	35,414
16	Missouri	213,298	42	Nebraska	28,771
17	Colorado	206,116	43	Montana	24,349
18	Massachusetts	185,692	44	New Hampshire	12,593
19	Alabama	174,202	45	South Dakota	11,663
20	Indiana	172,124	<b>46</b>	<b>North Dakota</b>	<b>9,472</b>
21	New Jersey	169,125	47	District of Columbia	7,567
22	Louisiana	164,979	48	Vermont	5,407
23	Illinois	163,256	49	Delaware	5,149
24	Virginia	155,941	50	Wyoming	3,360
25	South Carolina	123,989	51	Alaska	120

## Federal Government Poverty Guidelines, 2012

Source: Federal Register, Vol. 77, No. 17, January 26, 2012, pp. 4034-4035  
U.S. Department of Health & Human Services

<u>Size of Family Unit</u>	<u>48 Contiguous States and D.C.</u>	<u>Alaska</u>	<u>Hawaii</u>
1	\$11,170	\$13,970	\$12,860
2	15,130	18,920	17,410
3	19,090	23,870	21,960
4	23,050	28,820	26,510
5	27,010	33,770	31,060
6	30,970	38,720	35,610
7	34,930	43,670	40,160
8	38,890	48,620	44,710
For each additional person add	3,960	4,950	4,550

## Total Medicaid Expenditures as a Percent of Total State Expenditures, FY 2010

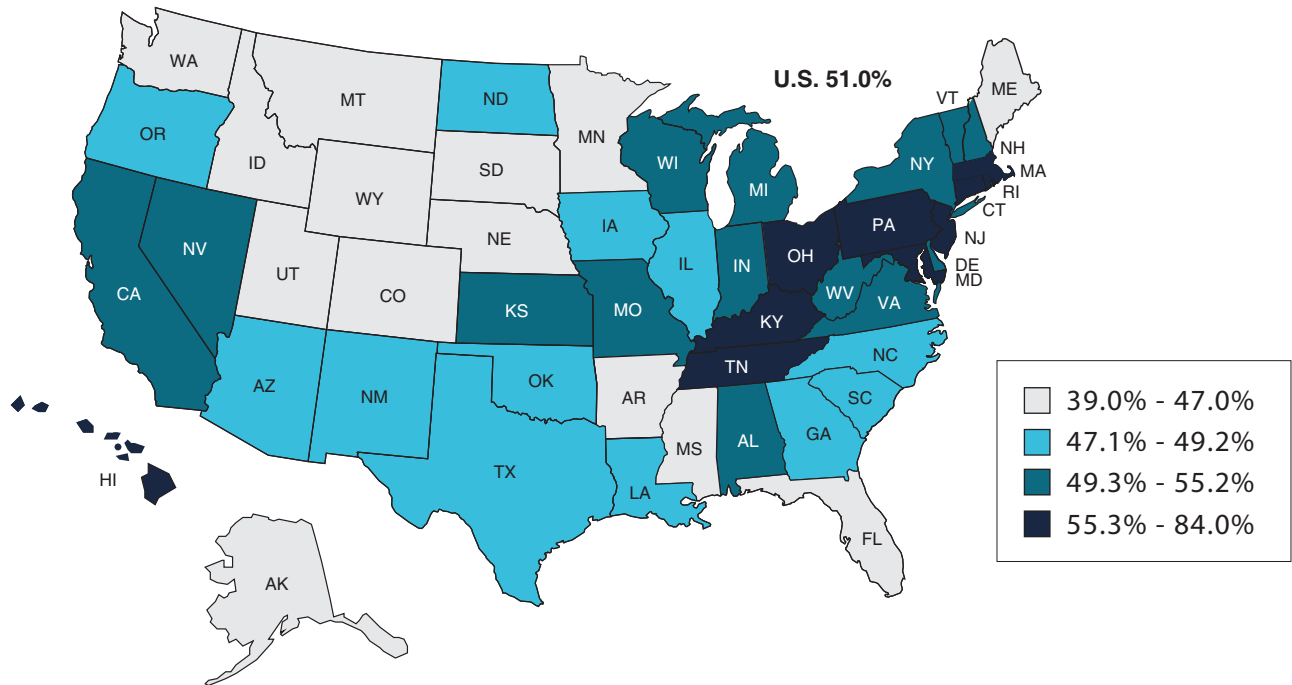
Source: National Association of State Budget Officers, "2010 State Expenditure Report"

Missouri	34.4%
Florida	30.0%
Pennsylvania	29.6%
Tennessee	28.8%
New York	28.7%
Maine	28.6%
Arizona	27.7%
Vermont	25.9%
Alabama	25.8%
Connecticut	25.4%
ALL STATES	22.3%
North Dakota	13.7%

A national analysis of Medicaid expenditures by State Budget Officers shows North Dakota's Medicaid expenditures were 13.7 percent of North Dakota's total state expenditures in fiscal year 2010. This was lower than the U.S. average of 22.3 percent. The ten states with the highest percent of Medicaid expenditures are also listed, with Missouri being the highest at 34.4 percent.

### Private Sector Employer Sponsored Health Insurance, 2011

The percent of employers that offer health insurance to employees by state is shown below. 47.3 percent of North Dakota private sector employers offer health insurance, which is 3.7 percent below the U.S. average of 51.0 percent. North Dakota ranks 35<sup>th</sup> nationally.



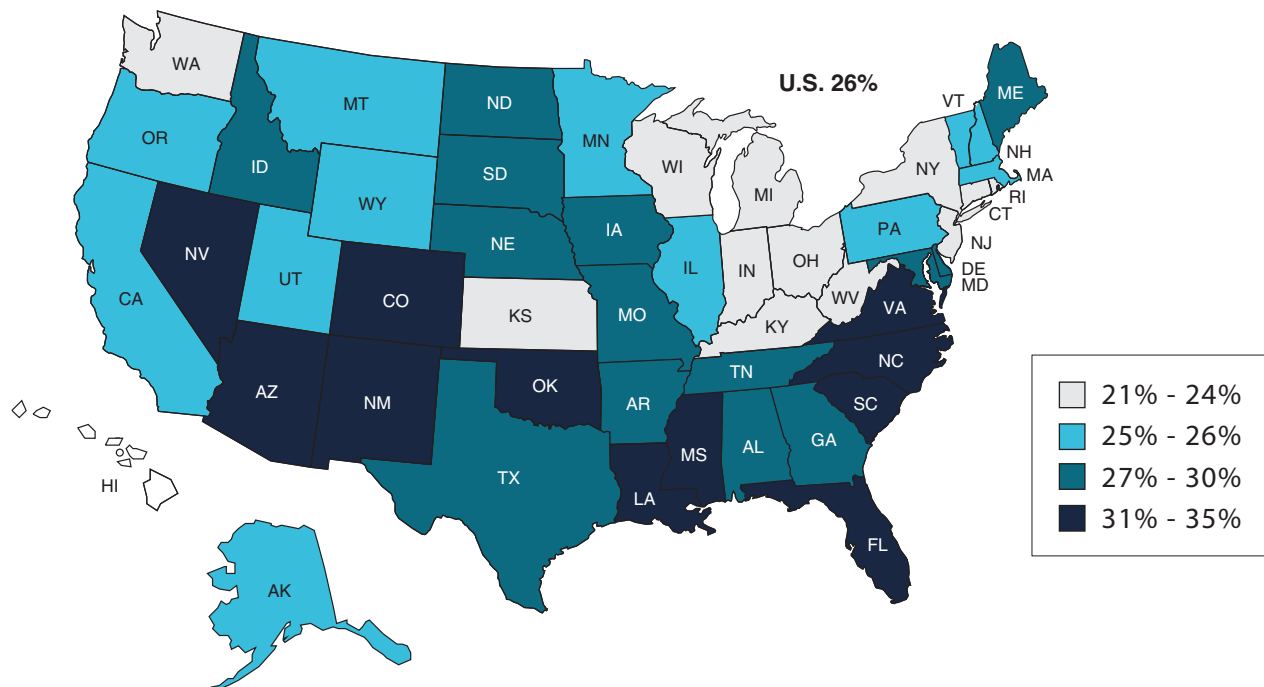
Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	% Employer Sponsored Health Insurance	Rank	State	% Employer Sponsored Health Insurance
	United States	51.0%	26	South Carolina	49.2%
1	Hawaii	83.5%	27	Arizona	49.1%
2	District of Columbia	66.3%	28	Louisiana	49.0%
3	Massachusetts	64.6%	29	Illinois	48.8%
4	Pennsylvania	61.1%	30	Georgia	48.2%
5	Rhode Island	60.0%	31	North Carolina	48.1%
6	Connecticut	56.8%	32	Oklahoma	47.8%
6	New Jersey	56.8%	32	Oregon	47.8%
8	Ohio	56.6%	34	Iowa	47.4%
8	Tennessee	56.6%	<b>35</b>	<b>North Dakota</b>	<b>47.3%</b>
10	Kentucky	56.0%	36	New Mexico	47.1%
11	Maryland	55.4%	36	Texas	47.1%
12	Kansas	55.2%	38	Minnesota	46.9%
12	Nevada	55.2%	38	Washington	46.9%
14	Alabama	55.1%	40	Colorado	46.8%
14	Virginia	55.1%	41	Mississippi	46.6%
16	New York	54.4%	42	South Dakota	45.1%
17	New Hampshire	53.9%	43	Maine	44.9%
18	Vermont	52.4%	44	Utah	44.0%
19	Delaware	52.3%	45	Wyoming	42.8%
20	Michigan	52.1%	46	Arkansas	42.5%
21	West Virginia	52.0%	47	Florida	42.0%
22	Missouri	51.9%	47	Nebraska	42.0%
23	California	50.5%	49	Idaho	41.3%
23	Indiana	50.5%	50	Montana	41.1%
25	Wisconsin	49.3%	51	Alaska	39.2%



## Employee Contribution to Employer Sponsored Health Insurance (Family Coverage) by State, 2011

The percent of employee and employer contribution to employment-based family health insurance by state is shown below. Employees contribute 29 percent in North Dakota, which is 3 percent above the U.S. average.

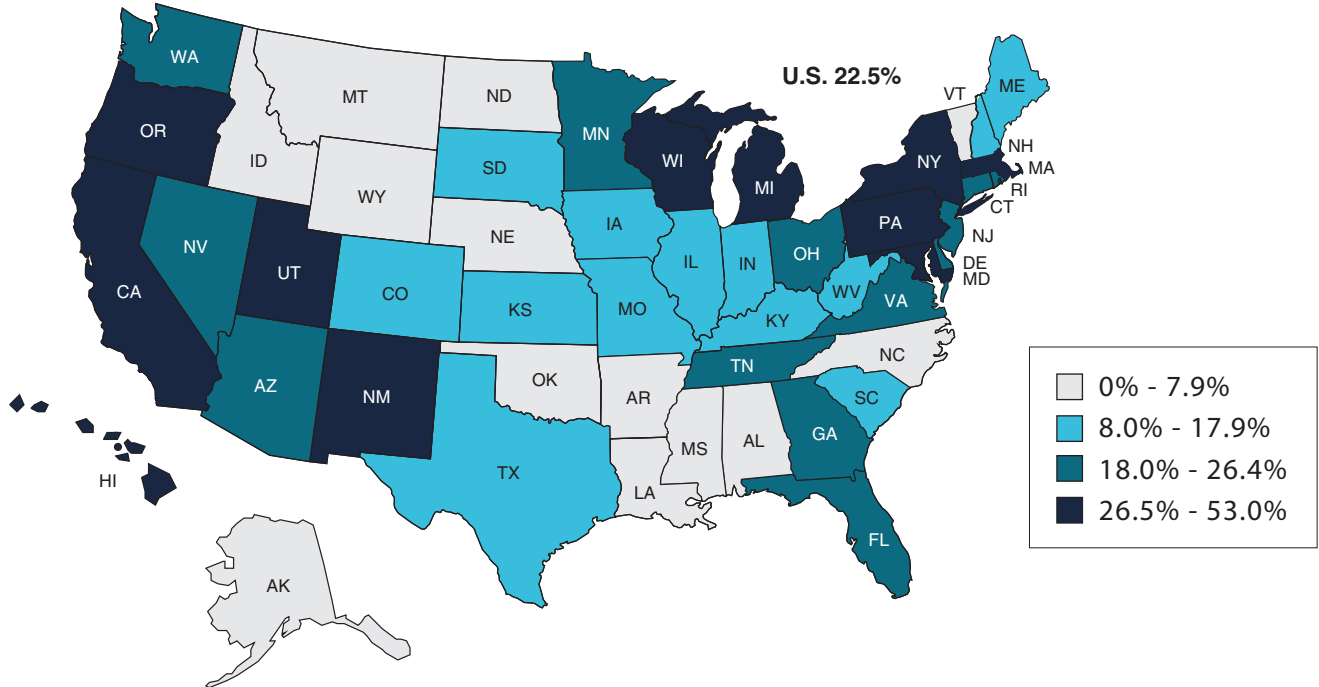


Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	Employee Contribution	Employer Contribution	Rank	State	Employee Contribution	Employer Contribution
	United States	26%	74%	26	Alaska	26%	74%
1	Mississippi	35%	65%	26	District of Columbia	26%	74%
2	Louisiana	33%	68%	26	Massachusetts	26%	74%
3	Arizona	32%	68%	26	Minnesota	26%	74%
3	North Carolina	32%	68%	26	Montana	26%	74%
3	Oklahoma	32%	68%	26	Oregon	26%	74%
6	Colorado	31%	69%	26	Utah	26%	74%
6	Florida	31%	69%	26	Vermont	26%	74%
6	Nevada	31%	69%	26	Wyoming	26%	74%
6	New Mexico	31%	69%	35	California	25%	75%
6	South Carolina	31%	69%	35	Illinois	25%	75%
6	Virginia	31%	69%	35	New Hampshire	25%	75%
12	Georgia	30%	70%	35	Pennsylvania	25%	75%
12	Idaho	30%	70%	39	Hawaii	24%	76%
12	Tennessee	30%	70%	39	Kansas	24%	76%
15	Arkansas	29%	71%	39	Michigan	24%	76%
15	Maine	29%	71%	39	Washington	24%	76%
15	Maryland	29%	72%	43	Connecticut	23%	77%
15	Missouri	29%	71%	43	Kentucky	23%	77%
15	Nebraska	29%	71%	43	New York	23%	77%
<b>15</b>	<b>North Dakota</b>	<b>29%</b>	<b>71%</b>	43	Ohio	23%	77%
15	South Dakota	29%	72%	43	Rhode Island	23%	77%
15	Texas	29%	71%	48	Indiana	22%	78%
23	Alabama	28%	73%	48	New Jersey	22%	78%
23	Iowa	28%	72%	50	West Virginia	21%	79%
25	Delaware	27%	73%	50	Wisconsin	21%	79%

## State HMO Penetration Rate, 2011

The map and information below highlights the percentage of persons enrolled in HMOs by state in 2011. North Dakotans had only 2.5 percent of total persons enrolled in HMOs, compared to the national 22.5 percent. North Dakota has the third least amount of people enrolled in HMOs in the United States.

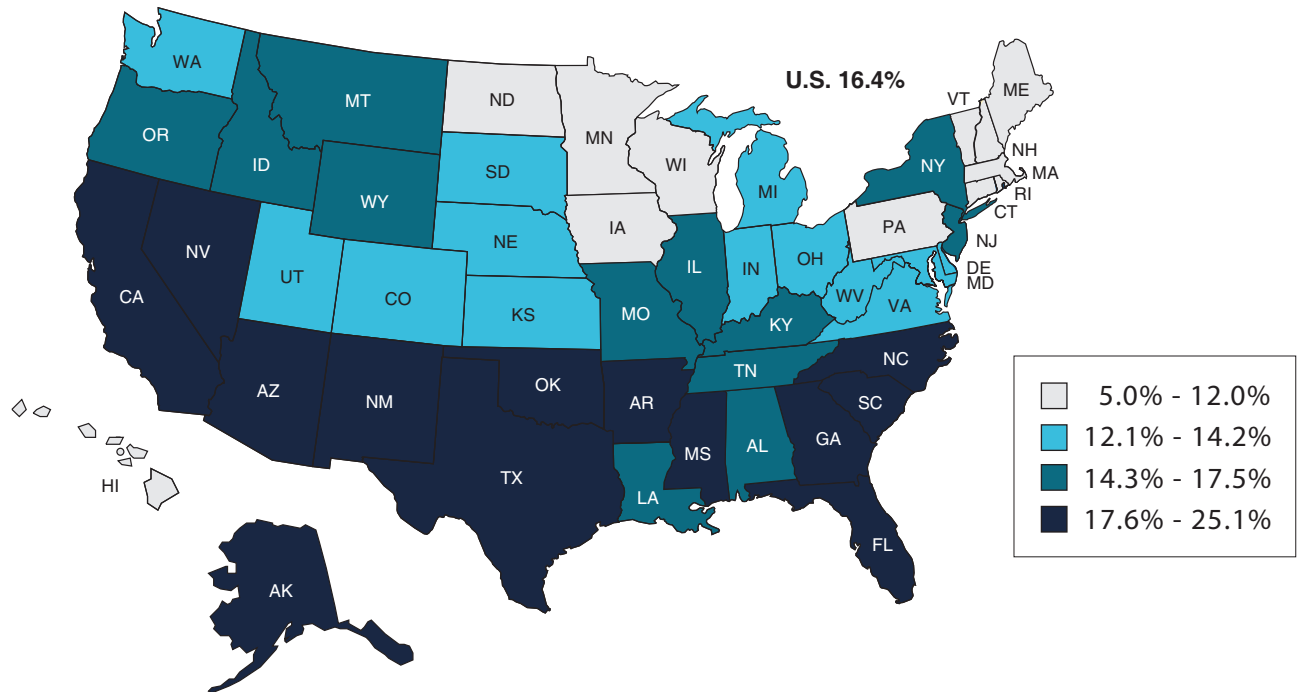


Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	HMO Enrollment	Rank	State	HMO Enrollment
	United States	22.5%	26	Indiana	16.7%
1	Hawaii	53.0%	27	Colorado	16.6%
2	District of Columbia	43.5%	28	West Virginia	15.8%
3	California	42.9%	29	Texas	13.1%
4	Massachusetts	34.5%	30	Missouri	12.6%
5	New York	31.3%	30	South Carolina	12.6%
5	Oregon	31.3%	32	Kansas	11.6%
7	Maryland	30.2%	33	New Hampshire	11.5%
8	Wisconsin	29.9%	34	Illinois	11.2%
9	Michigan	29.5%	35	South Dakota	10.2%
10	New Mexico	27.7%	36	Iowa	8.4%
11	Pennsylvania	26.7%	37	Maine	8.3%
12	Utah	26.5%	37	Kentucky	8.3%
13	Arizona	25.9%	39	Vermont	7.8%
14	Tennessee	24.3%	40	Nebraska	7.4%
15	Delaware	22.7%	41	Louisiana	7.0%
16	Nevada	22.4%	42	Oklahoma	6.7%
17	New Jersey	22.1%	43	Idaho	5.4%
18	Connecticut	22.0%	44	Alabama	4.5%
18	Ohio	22.0%	45	Mississippi	3.8%
20	Florida	21.0%	46	Montana	3.7%
21	Georgia	19.6%	47	North Carolina	3.5%
22	Washington	19.4%	48	Arkansas	3.4%
23	Minnesota	19.2%	<b>49</b>	<b>North Dakota</b>	<b>2.5%</b>
24	Rhode Island	18.7%	50	Wyoming	1.1%
25	Virginia	18.1%	51	Alaska	0.1%

### Health Insurance Coverage, Uninsured, 2010

In 2010, 11.8 percent of North Dakota's population was not covered by health insurance. North Dakota ranked 12<sup>th</sup> lowest nationally. This is lower than the U.S. average of 16.4 percent of uninsured.



Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	Uninsured	Rank	State	Uninsured
	United States	16.4%	26	Utah	13.9%
1	Texas	25.1%	27	Colorado	13.8%
2	New Mexico	21.4%	28	Ohio	13.7%
3	Florida	21.3%	29	West Virginia	13.6%
4	Nevada	21.0%	29	Indiana	13.6%
5	Georgia	20.1%	31	Virginia	13.5%
6	California	19.4%	32	Washington	13.3%
7	Mississippi	19.3%	33	Maryland	13.2%
8	Arizona	19.1%	34	South Dakota	13.1%
9	Arkansas	18.9%	35	Michigan	13.0%
10	South Carolina	18.7%	36	Kansas	12.9%
11	Alaska	18.0%	37	District of Columbia	12.4%
12	Oklahoma	17.6%	38	Nebraska	12.2%
12	North Carolina	17.6%	38	Delaware	12.2%
14	Louisiana	17.3%	<b>40</b>	<b>North Dakota</b>	<b>11.8%</b>
15	Idaho	17.2%	41	Rhode Island	11.7%
16	Oregon	16.8%	42	Iowa	11.6%
17	Montana	16.7%	43	Connecticut	11.1%
18	Wyoming	16.4%	44	Pennsylvania	11.0%
19	Alabama	16.0%	45	New Hampshire	10.1%
20	Kentucky	15.4%	46	Maine	9.7%
21	New Jersey	15.0%	47	Vermont	9.5%
21	Tennessee	15.0%	48	Wisconsin	9.2%
23	New York	14.6%	49	Minnesota	8.9%
24	Illinois	14.5%	50	Hawaii	7.7%
25	Missouri	14.3%	51	Massachusetts	5.0%

# SECTION 5

Economic Trends



### National Health and Hospital Expenditures as a percent of Gross Domestic Product (GDP)

During calendar year 2010, \$2,593.6 billion was spent on health care in the United States, up **7.9 percent** from 2008. The \$2,593.6 billion spent on national health expenditures accounts for **17.9 percent** of the Gross Domestic Product (GDP). Of this, \$814.0 billion was projected to be spent on hospital care, which amounts to **5.6 percent** of GDP. All other health care expenditures were projected to amount to 12.3 percent of GDP in 2010.

#### National Health Expenditures as a Percent of Gross Domestic Product (GDP)

*Source: Centers for Medicare & Medicaid Services (CMS)*

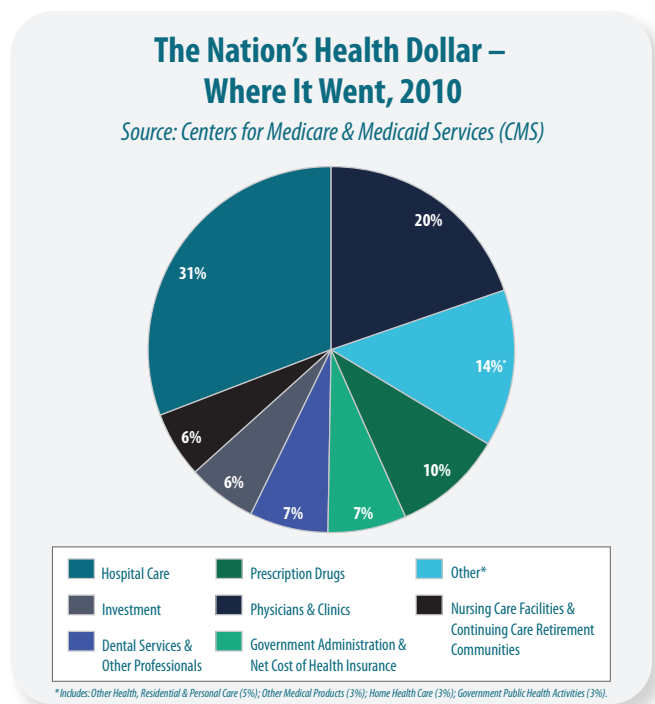
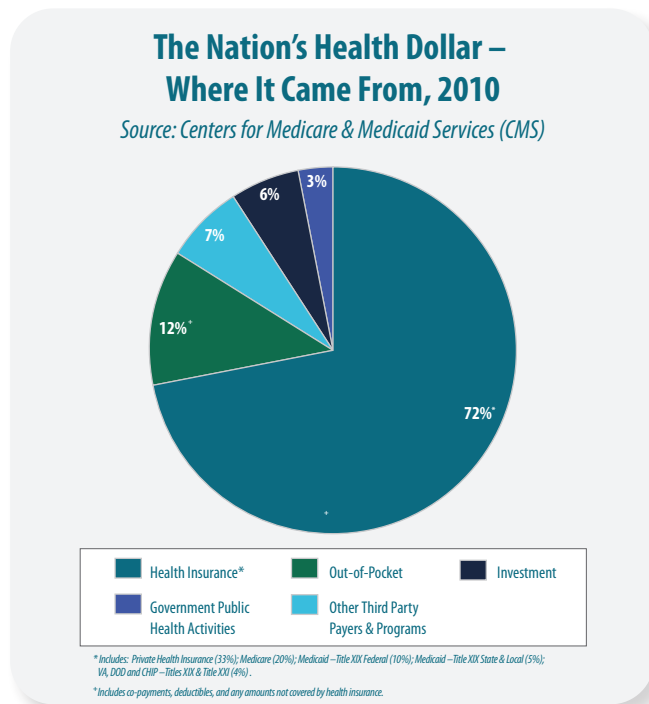
	National Health Expenditures % of GDP	Hospital Expenditures % of GDP	All Other Health Care Expenditures % of GDP*
1999	13.8%	4.2%	9.6%
2000	13.8%	4.2%	9.6%
2001	14.5%	4.4%	10.1%
2002	15.4%	4.6%	10.8%
2003	15.9%	4.7%	11.2%
2004	16.0%	4.8%	11.2%
2005	16.1%	4.8%	11.3%
2006	16.2%	4.9%	11.3%
2007	16.4%	4.9%	11.5%
2008	16.8%	5.1%	11.7%
2009	17.9%	5.6%	12.3%
2010	17.9%	5.6%	12.3%

GDP-1999-2010

\* All other = physicians, dentists, home health care, drugs, medical nondurables, vision products, medical durables, nursing home, other personal health care, research and construction, public health activities, and administrative costs of private health insurance.

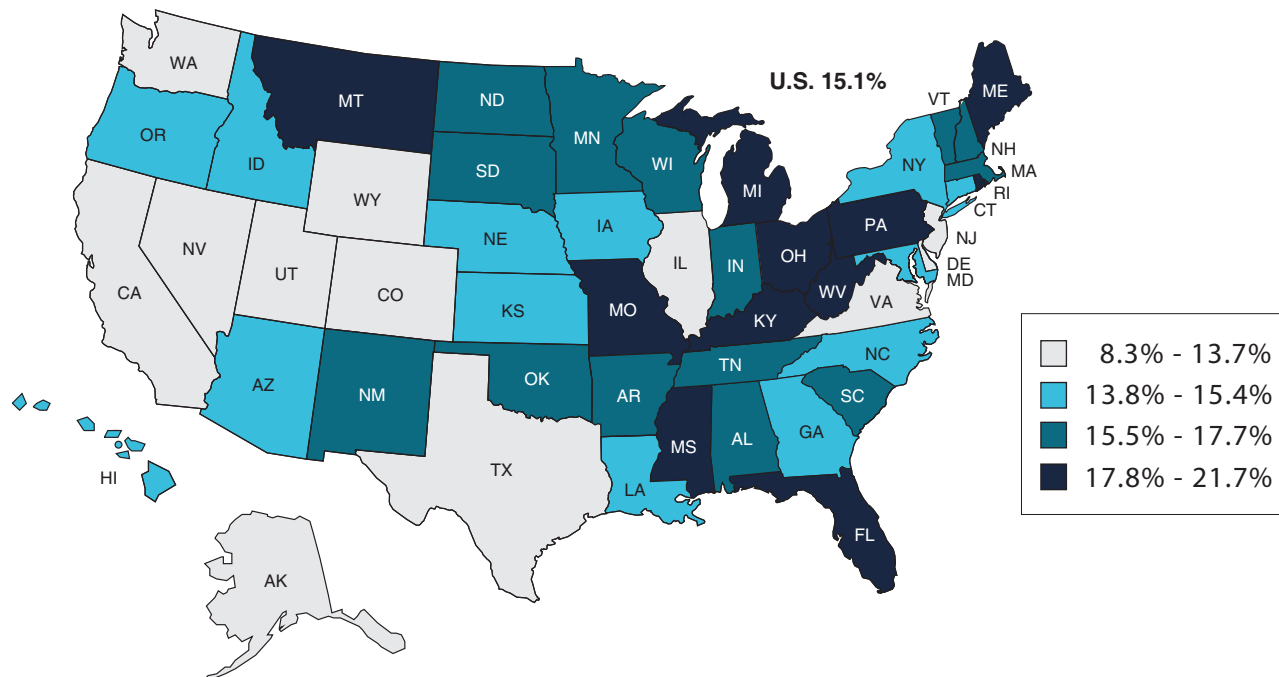
### Distribution of the Nation's Health Dollar

A summary of where the nation's health care providers' health dollar came from in 2010 is detailed in the figure below. 72 percent of each dollar came from health insurance payments. Out-of-pocket payments to health care providers by patients accounted for 12 percent of every dollar received. The nation's hospitals received approximately 31 percent of the health care dollar expended in 2010. Physicians and clinics received 20 percent of each dollar.



## Health Care Expenditures as a Percent of Gross State Product (GSP), 2009

In 2009, North Dakota state-funded health care expenditures accounted for 16.9 percent of the gross state product. Health care expenditures included Medicaid, the State Children's Health Insurance Program, state employee health benefits, corrections, higher education, insurance and access expansion, public health related expenditures, etc. North Dakota tied for 21<sup>st</sup> highest nationally.



Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	Percent of GSP	Rank	State	Percent of GSP
	United States	15.1%	26	Kansas	15.4%
1	Maine	21.7%	27	Idaho	15.3%
1	West Virginia	21.7%	28	New York	15.2%
3	Mississippi	20.1%	29	Louisiana	15.1%
4	Rhode Island	18.7%	30	Nebraska	15.0%
5	Kentucky	18.5%	31	Iowa	14.9%
5	Pennsylvania	18.5%	32	Arizona	14.8%
7	Michigan	18.3%	32	Maryland	14.8%
8	Florida	18.2%	34	North Carolina	14.7%
8	Montana	18.2%	34	Oregon	14.7%
10	Ohio	18.1%	36	Connecticut	14.2%
11	Missouri	18.0%	37	Georgia	13.9%
12	Alabama	17.7%	37	Hawaii	13.9%
12	South Carolina	17.7%	39	Alaska	13.7%
12	Vermont	17.7%	39	Washington	13.7%
15	Massachusetts	17.4%	41	Illinois	13.5%
16	Tennessee	17.3%	41	New Jersey	13.5%
16	Arkansas	17.3%	43	Texas	13.3%
18	Indiana	17.2%	44	Utah	13.0%
18	Wisconsin	17.2%	45	California	12.6%
20	New Hampshire	17.0%	45	Colorado	12.6%
21	New Mexico	16.9%	47	Nevada	12.3%
<b>21</b>	<b>North Dakota</b>	<b>16.9%</b>	48	Virginia	12.1%
23	Oklahoma	16.4%	49	Delaware	12.0%
24	South Dakota	16.1%	50	Wyoming	9.5%
25	Minnesota	15.7%	51	District of Columbia	8.3%

## Consumer Price Index

The most common indicator of inflationary pressure on consumers is the Consumer Price Index (CPI).

### CPI - Percent Changes

The graph to the left shows the trend of annual percent changes in CPI from 2006 to 2011. The following are the percent changes for each year from the previous year:

2006 = **3.2% increase**

2007 = **2.8% increase**

2008 = **3.8% increase**

2009 = **0.4% decrease**

2010 = **1.6% increase**

2011 = **3.2% increase**

The total percent increase from 2006 to 2011 is **14.2 percent**.

### United States Consumer Price Index (CPI) Percent Changes, 2006-2011

Source: U.S. Department of Labor, Bureau of Labor Statistics



### Medical Care CPI - Percent Changes

The graph to the left illustrates the trend of annual medical care CPI changes from 2006 to 2011. The following are percent changes for each year from the previous year:

2006 = **3.6% increase**

2007 = **5.2% increase**

2008 = **2.6% increase**

2009 = **3.4% increase**

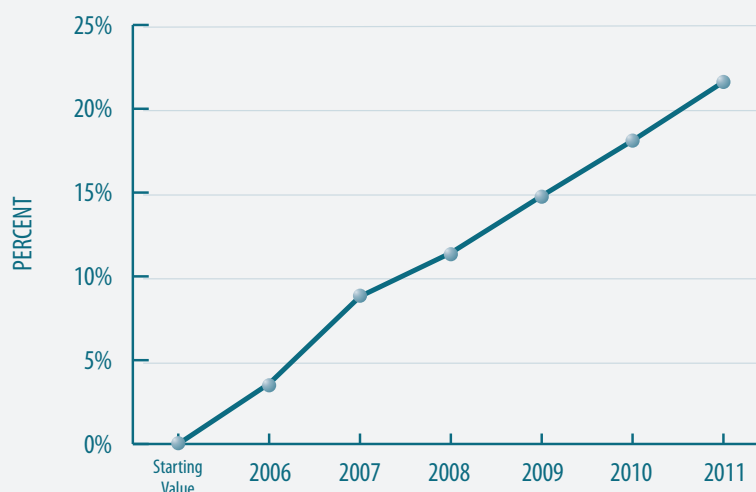
2010 = **3.3% increase**

2011 = **3.5% increase**

The total percent increase from 2006 to 2011 is **21.6 percent**.

### United States Medical Care Consumer Price Index (CPI) Percent Changes, 2006-2011

Source: U.S. Department of Labor, Bureau of Labor Statistics

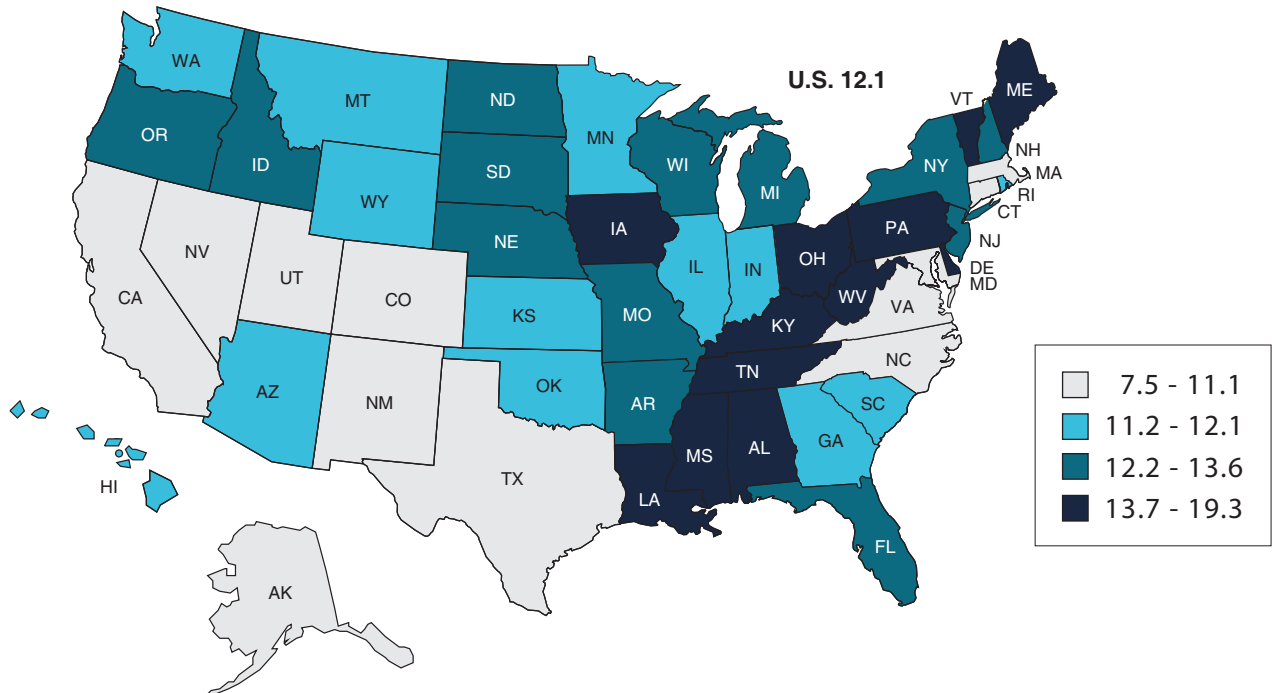


### Other Prices - Changes from 2010 to 2011

- The hospital services price component of medical care increased **5.8 percent**.
- Outpatient hospital services increased **5.0 percent**.
- Inpatient hospital services increased **6.2 percent increase**.

## Retail Prescription Drugs Filled (Per Capita) by State, 2011

Increases in prescription drugs are a key contributor to rises in medical inflation in the United States. The chart and table below highlights retail prescription drugs filled at pharmacies (per capita) in 2011. North Dakota is 15<sup>th</sup> nationally, at 13.5 percent, 1.4 percent above the U.S. average of 12.1 percent.



Source: Kaiser Family Foundation State Health Facts ([statehealthfacts.org](http://statehealthfacts.org))

Rank	State	Retail Rx Drugs per Capita	Rank	State	Retail Rx Drugs per Capita
	U.S. Average	12.1	26	Hawaii	12.1
1	Kentucky	19.3	27	Illinois	12.0
1	West Virginia	19.3	27	Kansas	12.0
3	Tennessee	17.6	29	Georgia	11.9
4	Vermont	17.4	30	Minnesota	11.8
5	Alabama	16.5	31	Rhode Island	11.6
6	Mississippi	16.2	31	Montana	11.6
7	Iowa	16.0	33	South Carolina	11.5
8	Maine	15.5	34	Wyoming	11.4
9	Delaware	14.9	34	Washington	11.4
10	Ohio	14.7	36	Arizona	11.3
11	Louisiana	14.1	37	Oklahoma	11.2
12	Pennsylvania	13.8	37	Indiana	11.2
13	Arkansas	13.6	39	Virginia	11.0
13	Nebraska	13.6	39	Connecticut	11.0
<b>15</b>	<b>North Dakota</b>	<b>13.5</b>	41	Massachusetts	10.9
15	New Hampshire	13.5	42	Nevada	10.5
17	Oregon	13.3	42	California	10.5
18	New York	13.0	44	Maryland	10.3
19	Wisconsin	12.9	45	New Mexico	9.9
20	Missouri	12.7	46	Utah	9.8
20	South Dakota	12.7	46	North Carolina	9.8
22	Florida	12.3	48	Colorado	9.7
22	New Jersey	12.3	49	Texas	9.1
22	Idaho	12.3	50	District of Columbia	8.1
25	Michigan	12.2	51	Alaska	7.5



## Healthiest States Rankings, 2010-2011

Source: United Health Foundation State Health Ratings, 2011

State	2011 Rank	2010 Rank	State	2011 Rank	2010 Rank
Vermont	1	1	Kansas	26	23
New Hampshire	2	3	Pennsylvania	26	27
Connecticut	3	4	Illinois	28	29
Hawaii	4	5	Arizona	29	31
Massachusetts	5	2	Delaware	30	32
Minnesota	6	6	Michigan	30	28
Utah	7	7	North Carolina	32	35
Maine	8	8	Florida	33	36
Colorado	9	13	New Mexico	34	34
Rhode Island	10	10	Alaska	35	30
New Jersey	11	17	Ohio	36	33
<b>North Dakota</b>	12	16	Georgia	37	37
Wisconsin	13	18	Indiana	38	38
Oregon	14	14	Tennessee	39	42
Washington	15	11	Missouri	40	39
Nebraska	16	12	West Virginia	41	43
Iowa	17	15	Nevada	42	47
New York	18	24	Kentucky	43	44
Idaho	19	9	Texas	44	40
Virginia	20	22	South Carolina	45	41
Wyoming	21	19	Alabama	46	45
Maryland	22	21	Arkansas	47	48
South Dakota	23	20	Oklahoma	48	46
California	24	26	Louisiana	49	49
Montana	25	25	Mississippi	50	50

The 22 measures that comprise Americas Health Ranking are of two types - health determinants and health outcomes. Health determinants represent those actions that can affect the future health of the population, whereas health outcomes represent the result of what has already occurred, either through death or missed days due to illness.

For a state to improve the health of its population, efforts must focus on changing the determinants of health. If a state is significantly better in its ranking for health determinants than its ranking for health outcomes, it will be more likely to improve its overall health ranking in the future. Conversely, if a state is worse in its ranking for health determinants than its ranking for health outcomes, its overall health ranking will be more likely to decline over time.

Table 2 presents the overall rankings for the health determinants, health outcomes and implications for the future. If the current trend is positive, the future overall ranking is more likely to increase; if it is neutral, the future overall ranking will probably stay the same; or if it is negative, the future overall ranking is more likely to decline.

## National Comparisons, 2010-2011

Source: AHA Hospital Statistics, 2012 Edition & U.S. Bureau of Economic Analysis

- North Dakota ranks 2<sup>nd</sup> in the nation for beds per 1,000 with an average of 5.1. The national average is 2.6.
- North Dakota ranks 3<sup>rd</sup> in the nation with 144.4 admissions per 1,000. The national average is 113.7.
- North Dakota ranks 3<sup>rd</sup> in the nation with 1,099.7 inpatient days per 1,000. The national average is 613.5.
- North Dakota ranks 2<sup>nd</sup> in the nation with 4,704.6 outpatient visits per 1,000. The national average is 2,107.8.
- North Dakota ranks 10<sup>th</sup> in the nation for personal income per capita with \$45,747. The national average is \$41,663.

Rank	Beds per 1,000		Rank	Admits per 1,000		Rank	Inpatient Days per 1,000		Rank	Outpatient Visits per 1,000		Rank	Personal Income per Capita	
	U.S. AVG	2.6		U.S. AVG	113.7		U.S. AVG	613.5		U.S. AVG	2,107.8		U.S. AVG	\$41,663
1	DC	5.7	1	DC	216.1	1	DC	1,517.0	1	VT	5,386.3	1	DC	\$73,105
<b>2</b>	<b>ND</b>	<b>5.1</b>	2	WV	152.4	2	SD	1,140.6	<b>2</b>	<b>ND</b>	<b>4,704.6</b>	2	CT	\$56,889
3	SD	5.0	<b>3</b>	<b>ND</b>	<b>144.4</b>	<b>3</b>	<b>ND</b>	<b>1,099.7</b>	3	ME	4,543.4	3	MA	\$53,621
4	MS	4.4	4	PA	143.3	4	WV	883.5	4	DC	3,797.8	4	NJ	\$53,181
5	NE	4.0	5	KY	140.3	5	NY	879.9	5	IA	3,648.1	5	MD	\$51,038
5	WV	4.0	6	LA	138.1	6	MT	865.5	6	WV	3,645.2	6	NY	\$50,545
7	MT	3.8	7	MO	136.6	7	MS	864.0	7	NH	3,609.7	7	WY	\$47,301
8	WY	3.6	8	MS	136.1	8	NE	807.0	8	MT	3,575.3	8	VA	\$45,920
9	KS	3.5	9	AL	135.8	9	PA	773.4	9	MO	3,293.7	9	NH	\$45,787
10	LA	3.4	10	OH	131.5	10	LA	737.7	10	MA	3,280.1	<b>10</b>	<b>ND</b>	<b>\$45,747</b>
11	IA	3.3	11	TN	131.4	11	WY	728.3	11	OH	3,100.8	11	AK	\$45,529
11	KY	3.3	12	FL	131.3	12	KY	723.9	12	PA	3,051.8	12	MN	\$44,672
11	TN	3.3	13	NY	128.2	13	TN	722.5	13	MI	3,046.0	13	CA	\$44,481
14	AL	3.2	14	AR	127.3	14	AL	705.4	14	IN	2,905.8	14	WA	\$44,294
14	AR	3.2	15	MA	124.1	15	MO	698.1	15	NY	2,740.4	15	IL	\$44,140
14	PA	3.2	16	MD	123.3	16	KS	690.0	16	LA	2,727.7	16	CO	\$44,088
17	MO	3.1	16	SD	123.3	17	IA	680.9	17	WI	2,576.5	17	RI	\$43,992
18	NY	3.0	18	NJ	122.2	18	MN	679.9	18	NE	2,524.3	18	HI	\$43,053
18	OH	3.0	19	MI	121.6	19	OH	658.9	19	AK	2,515.2	19	PA	\$42,478
18	OK	3.0	20	IL	119.2	20	AR	655.9	20	IL	2,515.2	20	VT	\$41,832
21	FL	2.9	21	RI	116.6	21	SC	653.2	21	SD	2,490.4	21	DE	\$41,635
21	MN	2.9	22	NE	115.4	22	FL	652.7	22	RI	2,481.3	22	SD	\$41,590
23	IN	2.8	23	CT	115.3	23	DE	650.9	23	KY	2,405.3	23	NE	\$41,584
24	ME	2.7	24	OK	115.2	24	CT	649.4	24	OR	2,389.4	24	KS	\$40,481
24	SC	2.7	25	DE	114.1	25	HI	636.9	25	KS	2,351.1	25	IA	\$40,470
26	GA	2.6	26	SC	113.7	26	OK	628.5	26	CT	2,343.9	26	WI	\$40,073
26	IL	2.6	27	IA	113.0	27	MA	627.9	27	NM	2,281.4	27	TX	\$39,593
26	MI	2.6	28	MN	111.9	28	MI	625.8	28	MN	2,091.5	28	FL	\$39,563
29	DE	2.4	29	IN	111.5	29	NJ	622.2	29	ID	2,027.2	29	LA	\$38,578
29	HI	2.4	30	ME	111.1	30	GA	619.6	30	WY	2,005.4	30	MO	\$38,248
29	MA	2.4	31	NC	109.8	31	NC	618.8	31	DE	2,004.9	31	NV	\$38,173
29	NC	2.4	32	KS	107.3	32	ME	615.5	32	UT	1,935.1	32	ME	\$37,973
29	NJ	2.4	33	AZ	106.6	33	RI	588.2	33	AL	1,860.8	33	OR	\$37,909
29	TX	2.4	34	WI	103.8	34	IL	583.5	34	NJ	1,830.0	34	OH	\$37,791
29	WI	2.4	35	TX	102.3	35	IN	582.8	35	TN	1,803.4	35	OK	\$37,277
36	CT	2.3	36	MT	99.4	36	MD	550.8	36	WA	1,750.1	36	MT	\$36,573
36	RI	2.3	37	VA	97.7	37	VA	542.0	37	VA	1,733.1	37	MI	\$36,533
38	AK	2.2	38	GA	97.0	38	TX	528.6	38	AR	1,725.7	37	TN	\$36,533
38	ID	2.2	39	CA	91.9	39	WI	523.4	39	HI	1,687.6	39	NC	\$36,164
38	NH	2.2	40	NM	91.5	40	VT	490.5	40	CO	1,619.2	40	GA	\$36,104
38	VT	2.2	41	NV	90.9	41	NV	488.5	41	MS	1,549.1	41	AZ	\$35,875
42	VA	2.1	42	WY	90.8	42	AK	483.8	42	OK	1,519.3	42	IN	\$35,550
43	AZ	2.0	43	NH	90.6	43	AZ	473.3	43	TX	1,518.3	43	AL	\$34,650
43	CO	2.0	44	CO	88.2	44	NH	471.8	44	NC	1,482.8	44	NM	\$34,575
43	MD	2.0	45	WA	87.3	45	CA	468.1	45	MD	1,459.5	45	AR	\$34,014
43	NM	2.0	46	HI	85.1	46	CO	438.6	46	GA	1,442.4	46	UT	\$33,790
43	NV	2.0	47	ID	84.2	47	NM	408.8	47	CA	1,388.1	47	SC	\$33,673
48	CA	1.9	48	OR	83.3	48	ID	403.2	48	SC	1,387.1	48	KY	\$33,667
49	UT	1.8	49	AK	80.4	49	WA	391.2	49	FL	1,297.9	49	WV	\$33,513
50	OR	1.7	50	VT	79.4	50	OR	359.8	50	AZ	1,217.3	50	ID	\$33,326
50	WA	1.7	51	UT	79.2	51	UT	346.2	51	NV	1,005.7	51	MS	\$32,176

## 2010 U.S. Hospital Inpatient Charges per Day and Outpatient Charges per Visit

Source: AHA Hospital Statistics, 2012 Edition

### Hospital Unit Charges

- Charges per day is defined as billing for services rendered at full established rates.
- In 2010, North Dakota's hospital charges per inpatient day of \$2,910 was 61.1 percent of the West North Central average of \$4,761 and 45.0 percent of the U.S. average of \$6,460. North Dakota hospitals are the 3<sup>rd</sup> lowest in the nation for charges per inpatient day.
- In 2010, outpatient charges per outpatient visit were \$829 in North Dakota hospitals, which is 23.0 percent lower than the West North Central average of \$1,076 and 39.1 percent lower than the U.S. average of \$1,362. North Dakota ranks 45<sup>th</sup> nationally.

Rank	State	Inpatient Charges Per Day	Rank	State	Outpatient Charges Per Visit
	U.S. AVG	\$6,460		U.S. AVG	\$1,362
	West North Central	\$4,761		West North Central	\$1,076
1	CA	\$10,104	1	FL	\$2,428
2	NJ	\$9,879	2	NV	\$2,182
3	CO	\$8,507	3	SC	\$1,986
4	AZ	\$8,463	4	AZ	\$1,929
5	NV	\$8,180	5	CA	\$1,802
6	WA	\$8,154	6	CO	\$1,790
7	FL	\$8,075	7	MS	\$1,768
8	PA	\$7,959	8	TX	\$1,728
9	TX	\$7,537	9	AL	\$1,717
10	AK	\$6,824	10	TN	\$1,686
11	NM	\$6,733	11	OK	\$1,630
12	UT	\$6,716	12	NJ	\$1,624
13	IL	\$6,703	13	GA	\$1,588
14	DC	\$6,496	14	WA	\$1,575
15	OH	\$6,458	15	VA	\$1,539
16	NH	\$6,231	16	DC	\$1,499
17	SC	\$6,119	17	AR	\$1,411
18	AL	\$6,109	18	MN	\$1,392
19	OR	\$6,015	19	KY	\$1,371
20	TN	\$5,862	20	PA	\$1,363
21	MO	\$5,856	21	RI	\$1,358
22	RI	\$5,829	22	NC	\$1,350
23	IN	\$5,828	23	IL	\$1,286
24	CT	\$5,805	24	HI	\$1,285
25	VA	\$5,655	25	CT	\$1,275
26	MA	\$5,485	26	AK	\$1,270
27	OK	\$5,450	27	OH	\$1,238
28	LA	\$5,231	28	MA	\$1,201
29	MI	\$5,199	29	SD	\$1,178
30	WI	\$5,176	30	KS	\$1,168
31	MN	\$5,118	31	NE	\$1,167
32	KY	\$4,935	32	NH	\$1,150
33	NY	\$4,844	33	NM	\$1,140
34	AR	\$4,826	34	DE	\$1,134
35	NC	\$4,818	35	WI	\$1,128
36	GA	\$4,686	36	IN	\$1,110
37	KS	\$4,672	37	LA	\$1,068
38	ID	\$4,611	38	MO	\$1,040
39	DE	\$4,604	39	WY	\$1,005
40	NE	\$4,502	40	MI	\$998
41	MS	\$4,150	41	ID	\$985
42	HI	\$4,147	42	NY	\$980
43	ME	\$3,940	43	UT	\$968
44	VT	\$3,780	44	OR	\$832
45	IA	\$3,633	<b>45</b>	<b>ND</b>	<b>\$829</b>
46	WV	\$3,471	46	WV	\$818
47	MD	\$2,989	47	IA	\$781
48	SD	\$2,971	48	VT	\$757
<b>49</b>	<b>ND</b>	<b>\$2,910</b>	49	ME	\$715
50	WY	\$2,689	50	MD	\$710
51	MT	\$2,416	51	MT	\$700

# SECTION 6

Population, Demographics and  
Elderly Services



## Profile of General Demographic Characteristics North Dakota, 2010

	Number	Percent
Total Population	672,591	100.0%
<b>Sex and age</b>		
Male	339,864	50.5%
Female	332,727	49.5%
Under 5 years	44,595	6.6%
5 to 9 years	40,076	6.0%
10 to 14 years	39,790	5.9%
15 to 19 years	47,474	7.1%
20 to 24 years	58,956	8.8%
25 to 34 years	90,485	13.5%
35 to 44 years	75,262	11.2%
45 to 54 years	96,657	14.4%
55 to 59 years	45,946	6.8%
60 to 64 years	35,873	5.3%
65 to 74 years	46,873	7.0%
75 to 84 years	33,916	5.0%
85 years and over	16,688	2.5%
Median age (years)	37.0	(X)
18 years and over	522,720	77.7%
Male	263,076	39.1%
Female	259,644	38.6%
65 years and over	97,477	14.5%
Male	42,427	6.3%
Female	55,050	8.2%

Source: U.S. Census Bureau, 2010 Census.

**Population by North Dakota County  
Annual Estimates of Population  
July 1, 2007 to July 1, 2011**

County	Population Estimates					Estimates Base	Census 2010
	1-Jul-11	1-Jul-10	1-Jul-09	1-Jul-08	1-Jul-07	1-Apr-10	1-Apr-10
North Dakota	683,932	674,629	646,844	641,421	638,202	672,591	672,591
Adams County	2,307	2,347	2,236	2,270	2,293	2,343	2,343
Barnes County	11,056	11,072	10,753	10,753	10,807	11,066	11,066
Benson County	6,723	6,690	6,910	6,864	6,878	6,660	6,660
Billings County	816	773	827	798	785	783	783
Bottineau County	6,443	6,431	6,352	6,319	6,377	6,429	6,429
Bowman County	3,134	3,145	3,028	3,038	2,938	3,151	3,151
Burke County	2,033	1,964	1,839	1,796	1,839	1,968	1,968
Burleigh County	83,145	81,706	79,822	78,445	77,178	81,308	81,308
Cass County	152,368	150,263	143,339	140,216	137,717	149,778	149,778
Cavalier County	3,939	3,990	3,699	3,767	3,838	3,993	3,993
Dickey County	5,317	5,290	5,217	5,262	5,380	5,289	5,289
Divide County	2,125	2,081	1,961	1,998	2,009	2,071	2,071
Dunn County	3,720	3,542	3,365	3,315	3,290	3,536	3,536
Eddy County	2,380	2,386	2,288	2,375	2,419	2,385	2,385
Emmons County	3,546	3,546	3,398	3,445	3,509	3,550	3,550
Foster County	3,341	3,350	3,259	3,376	3,444	3,343	3,343
Golden Valley County	1,752	1,685	1,621	1,638	1,652	1,680	1,680
Grand Forks County	66,598	66,945	66,414	66,703	66,064	66,861	66,861
Grant County	2,337	2,390	2,337	2,381	2,434	2,394	2,394
Griggs County	2,372	2,414	2,346	2,340	2,373	2,420	2,420
Hettinger County	2,515	2,477	2,343	2,342	2,395	2,477	2,477
Kidder County	2,414	2,443	2,201	2,265	2,316	2,435	2,435
LaMoure County	4,105	4,133	3,908	3,972	4,096	4,139	4,139
Logan County	1,985	2,000	1,886	1,925	1,952	1,990	1,990
McHenry County	5,505	5,397	5,173	5,193	5,214	5,395	5,395
McIntosh County	2,769	2,800	2,582	2,647	2,723	2,809	2,809

**Population by North Dakota County**  
**Annual Estimates of Population**  
**July 1, 2007 to July 1, 2011**

County	Population Estimates					Estimates Base	Census 2010
	1-Jul-11	1-Jul-10	1-Jul-09	1-Jul-08	1-Jul-07	1-Apr-10	1-Apr-10
McKenzie County	7,019	6,412	5,799	5,610	5,540	6,360	6,360
McLean County	9,068	8,991	8,310	8,363	8,342	8,962	8,962
Mercer County	8,449	8,427	7,873	7,866	7,967	8,424	8,424
Morton County	27,734	27,599	26,464	26,184	25,845	27,471	27,471
Mountrail County	8,097	7,730	6,791	6,569	6,482	7,673	7,673
Nelson County	3,057	3,120	3,129	3,171	3,224	3,126	3,126
Oliver County	1,830	1,836	1,643	1,668	1,705	1,846	1,846
Pembina County	7,342	7,416	7,392	7,455	7,580	7,413	7,413
Pierce County	4,375	4,361	3,990	4,072	4,095	4,357	4,357
Ramsey County	11,452	11,468	11,240	11,288	11,223	11,451	11,451
Ransom County	5,403	5,430	5,500	5,659	5,745	5,457	5,457
Renville County	2,490	2,476	2,227	2,207	2,260	2,470	2,470
Richland County	16,245	16,342	16,067	16,356	16,501	16,321	16,321
Rolette County	14,206	13,999	13,797	13,706	13,643	13,937	13,937
Sargent County	3,798	3,809	3,951	4,009	4,079	3,829	3,829
Sheridan County	1,309	1,313	1,228	1,247	1,310	1,321	1,321
Sioux County	4,280	4,164	4,203	4,134	4,140	4,153	4,153
Slope County	718	728	649	667	652	727	727
Stark County	25,177	24,350	22,847	22,517	22,404	24,199	24,199
Steele County	1,950	1,985	1,747	1,805	1,842	1,975	1,975
Stutsman County	21,062	21,106	20,463	20,340	20,449	21,100	21,100
Towner County	2,264	2,242	2,209	2,223	2,300	2,246	2,246
Traill County	8,147	8,117	7,868	7,912	8,071	8,121	8,121
Walsh County	11,032	11,104	10,798	10,899	11,007	11,119	11,119
Ward County	64,072	62,081	57,012	56,104	56,092	61,675	61,675
Wells County	4,237	4,203	4,092	4,150	4,218	4,207	4,207
Williams County	24,374	22,560	20,451	19,797	19,566	22,398	22,398

Source: Population Division, U.S. Census Bureau

### North Dakota QuickFacts

<i>People QuickFacts</i>	<i>North Dakota</i>	<i>USA</i>
Population, 2011 estimate	683,932	311,591,917
Population, percent change, April 1, 2010 to July 1, 2011	1.7%	0.9%
Population, 2010	672,591	308,745,538
Persons under 5 years old, percent, 2011	6.6%	6.5%
Persons under 18 years old, percent, 2011	22.1%	23.7%
Persons 65 years old and over, percent, 2011	14.4%	13.3%
Female persons, percent, 2011	49.4%	50.8%
White persons, percent, 2011 (a)	90.4%	78.1%
Black or African American persons, percent, 2011 (a)	1.3%	13.1%
American Indian and Alaska Native persons, percent, 2011 (a)	5.5%	1.2%
Asian persons, percent, 2011 (a)	1.1%	5.0%
Native Hawaiian and Other Pacific Islander, percent, 2011 (a)	0.1%	0.2%
Persons reporting two or more races, percent, 2011	1.7%	2.3%
White persons, not of Hispanic/Latino origin, percent, 2011	88.6%	63.4%
Persons of Hispanic or Latino origin, percent, 2011 (b)	2.2%	16.7%
Living in same house in the same house 1 year & over, 2006-2010	82.9%	84.2%
Foreign born persons, percent, 2006-2010	2.4%	12.7%
Language other than English spoken at home, pct age 5+, 2006-2010	5.4%	20.1%
High school graduates, percent of persons age 25+, 2006-2010	89.4%	85.0%
Bachelor's degree or higher, pct of persons age 25+, 2006-2010	26.3%	27.9%
Mean travel time to work (minutes), workers age 16+, 2006-2010	16.0	25.2
Housing units, 2010	317,498	131,704,730
Homeownership rate, 2006-2010	66.6%	66.6%
Housing units in multi-unit structures, percent, 2006-2010	25.9%	25.9%
Median value of owner-occupied housing units, 2006-2010	\$111,300	\$188,400
Households, 2006-2010	276,642	114,235,996
Persons per household, 2006-2010	2.29	2.59
Median household income, 2006-2010	\$46,781	\$51,914
Per capita money income in past 12 months, (2010 dollars) 2006-2010	\$25,803	\$27,334
Persons below poverty level, percent, 2006-2010	12.3%	13.8%



### North Dakota QuickFacts (continued)

<b>Business QuickFacts</b>	<b>North Dakota</b>	<b>USA</b>
Private nonfarm establishments, 2009	21,445	7,433,465
Private nonfarm employment, 2009	296,083	114,509,626
Private nonfarm employment, percent change 2000-2009	16.0%	0.4%
Nonemployer establishments, 2009	44,623	21,090,761
Manufacturers shipments, 2007 (\$1000)	11,349,799	5,338,306,501
Retail sales, 2007 (\$1000)	10,527,300	3,917,663,456
Retail sales per capita, 2007	\$16,495	\$12,990
Minority-owned firms, percent of total, 2007	3.1%	22.1%
Women-owned firms, percent of total, 2007	24.8%	28.8%
Building permits, 2011	6,201	624,061
Federal spending, 2010	8,696,484	3,251,308,509
<b>Geography QuickFacts</b>	<b>North Dakota</b>	<b>USA</b>
Land area, 2010 (square miles)	69,000.80	3,531,905.43
Persons per square mile, 2010	9.7	87.4
FIPS Code	38	--

(a) Includes persons reporting only one race.

(b) Hispanics may be of any race, so also are included in applicable race categories.

FN: Footnote on this item for this area in place of data

NA: Not available

D: Suppressed to avoid disclosure of confidential information

X: Not applicable

S: Suppressed; does not meet publication standards

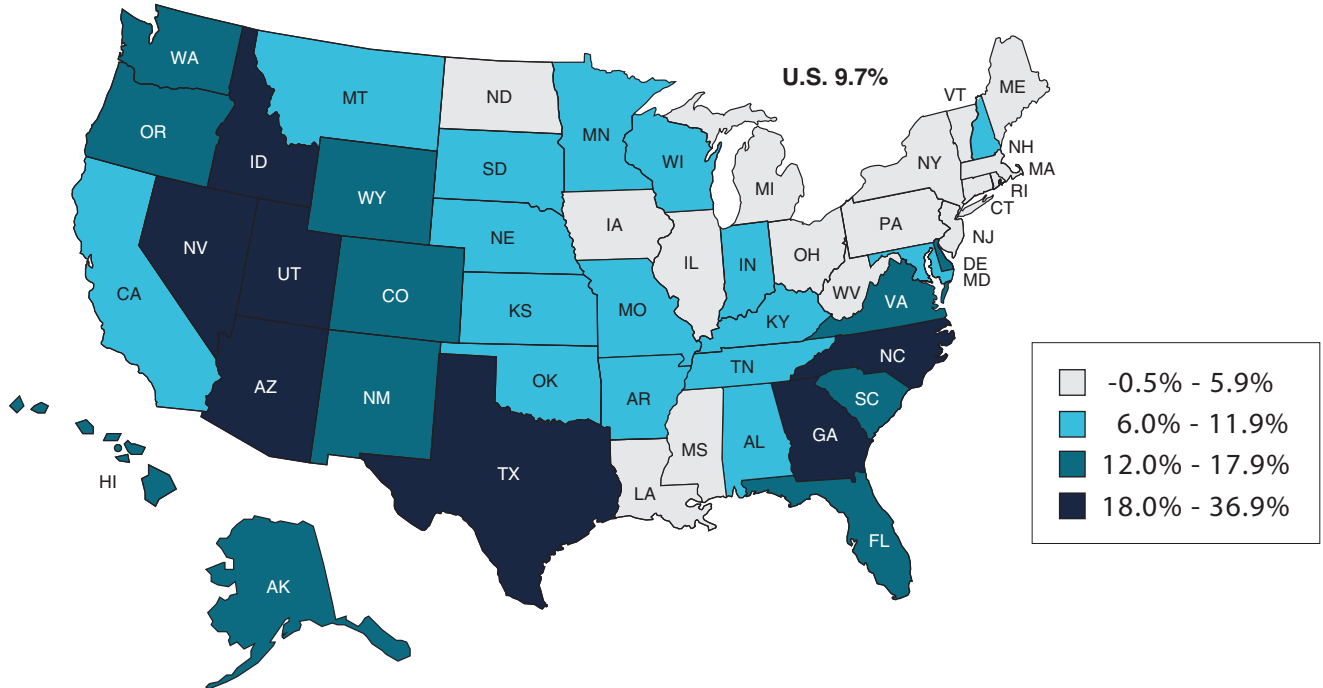
Z: Value greater than zero but less than half unit of measure shown

F: Fewer than 100 firms

Source U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, 2006 Census of Population and Housing, 2000 Census of Population and Housing, Small Area Income and Poverty Estimates, County Business Patterns, 2002 Economic Census, Minority- and Women-Owned Business, Building Permits, Consolidated Federal Funds Report, 2000 Census of Governments

## Population Change by State, 2000-2010

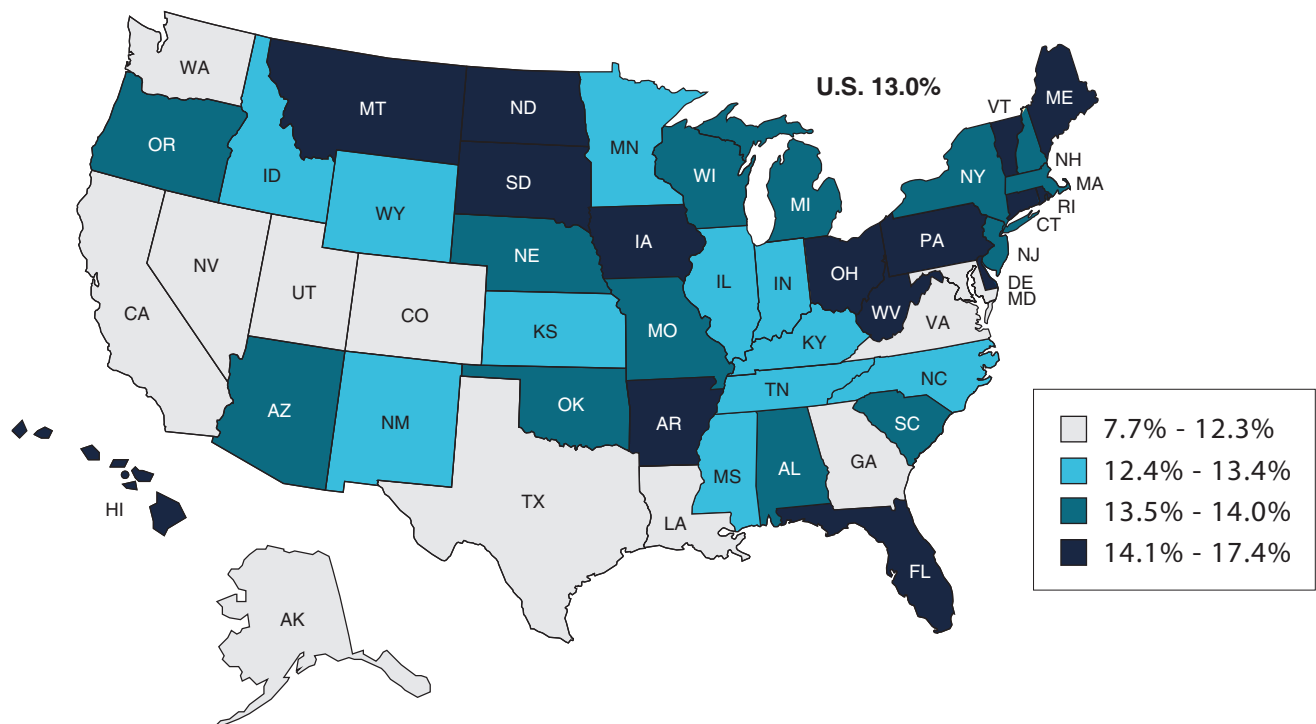
The map and information below highlight the percent in population change for the U.S. and individual states from 2000 to 2010. North Dakota ranked 37<sup>th</sup> with a population change of 4.7%, which is significantly lower than the U.S. average of 9.7%.



Source: U.S. Census Bureau, Population Division

Rank	State	% Population Change	Rank	State	% Population Change
	U.S. Average	9.7%	26	Minnesota	7.8%
1	Nevada	35.1%	27	Alabama	7.5%
2	Arizona	24.6%	28	Kentucky	7.4%
3	Utah	23.8%	29	Missouri	7.0%
4	Idaho	21.1%	30	Nebraska	6.7%
5	Texas	20.6%	31	Indiana	6.6%
6	North Carolina	18.5%	32	New Hampshire	6.5%
7	Georgia	18.3%	33	Kansas	6.1%
8	Florida	17.6%	34	Wisconsin	6.0%
9	Colorado	16.9%	35	District of Columbia	5.2%
10	South Carolina	15.3%	36	Connecticut	4.9%
11	Delaware	14.6%	<b>37</b>	<b>North Dakota</b>	<b>4.7%</b>
12	Wyoming	14.1%	38	New Jersey	4.5%
12	Washington	14.1%	39	Mississippi	4.3%
14	Alaska	13.3%	40	Maine	4.2%
15	New Mexico	13.2%	41	Iowa	4.1%
16	Virginia	13.0%	42	Pennsylvania	3.4%
17	Hawaii	12.3%	43	Illinois	3.3%
18	Oregon	12.0%	44	Massachusetts	3.1%
19	Tennessee	11.5%	45	Vermont	2.8%
20	California	10.0%	46	West Virginia	2.5%
21	Montana	9.7%	47	New York	2.1%
22	Arkansas	9.1%	48	Ohio	1.6%
23	Maryland	9.0%	49	Louisiana	1.4%
24	Oklahoma	8.7%	49	Rhode Island	0.4%
25	South Dakota	7.9%	51	Michigan	-0.6%

## Resident Population 65 Years and Over, 2010

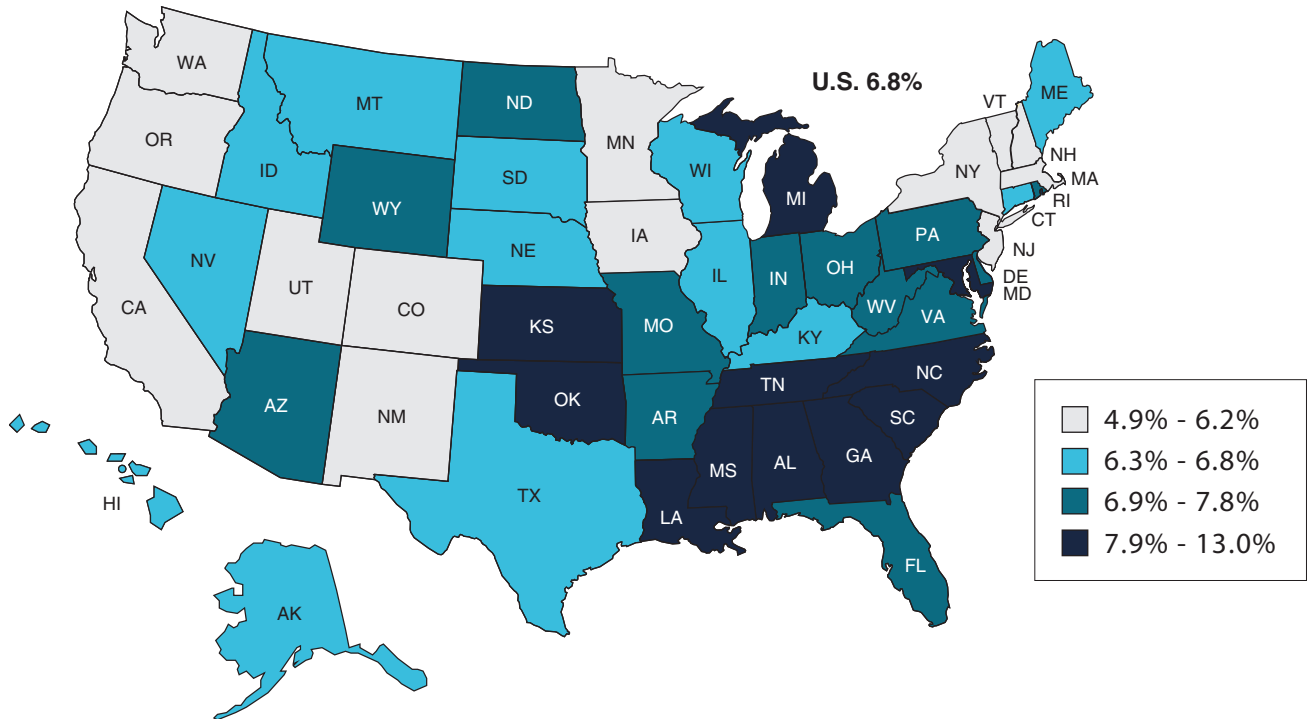


Source: U.S. Census Bureau, 2010 Census Data

Rank	State	Rate	Rank	State	Rate
	U.S. Average	13.0%	24	New Jersey	13.5%
1	Florida	17.3%	24	New York	13.5%
2	West Virginia	16.0%	24	Oklahoma	13.5%
3	Maine	15.9%	29	Tennessee	13.4%
4	Pennsylvania	15.4%	30	Kentucky	13.3%
5	Iowa	14.9%	31	Kansas	13.2%
6	Montana	14.8%	31	New Mexico	13.2%
7	Vermont	14.6%	33	Indiana	13.0%
<b>8</b>	<b>North Dakota</b>	<b>14.5%</b>	34	Minnesota	12.9%
9	Arkansas	14.4%	34	North Carolina	12.9%
9	Delaware	14.4%	36	Mississippi	12.8%
9	Rhode Island	14.4%	37	Illinois	12.5%
12	Hawaii	14.3%	38	Idaho	12.4%
12	South Dakota	14.3%	38	Wyoming	12.4%
14	Connecticut	14.2%	40	Louisiana	12.3%
15	Ohio	14.1%	40	Maryland	12.3%
16	Missouri	14.0%	40	Washington	12.3%
17	Oregon	13.9%	43	Virginia	12.2%
18	Alabama	13.8%	44	Nevada	12.0%
18	Arizona	13.8%	45	California	11.4%
18	Massachusetts	13.8%	45	District of Columbia	11.4%
18	Michigan	13.8%	47	Colorado	10.9%
22	South Carolina	13.7%	48	Georgia	10.7%
22	Wisconsin	13.7%	49	Texas	10.3%
24	Nebraska	13.5%	50	Utah	9.0%
24	New Hampshire	13.5%	51	Alaska	7.7%

## Infant Mortality Rate Per 1000 Births, 2007

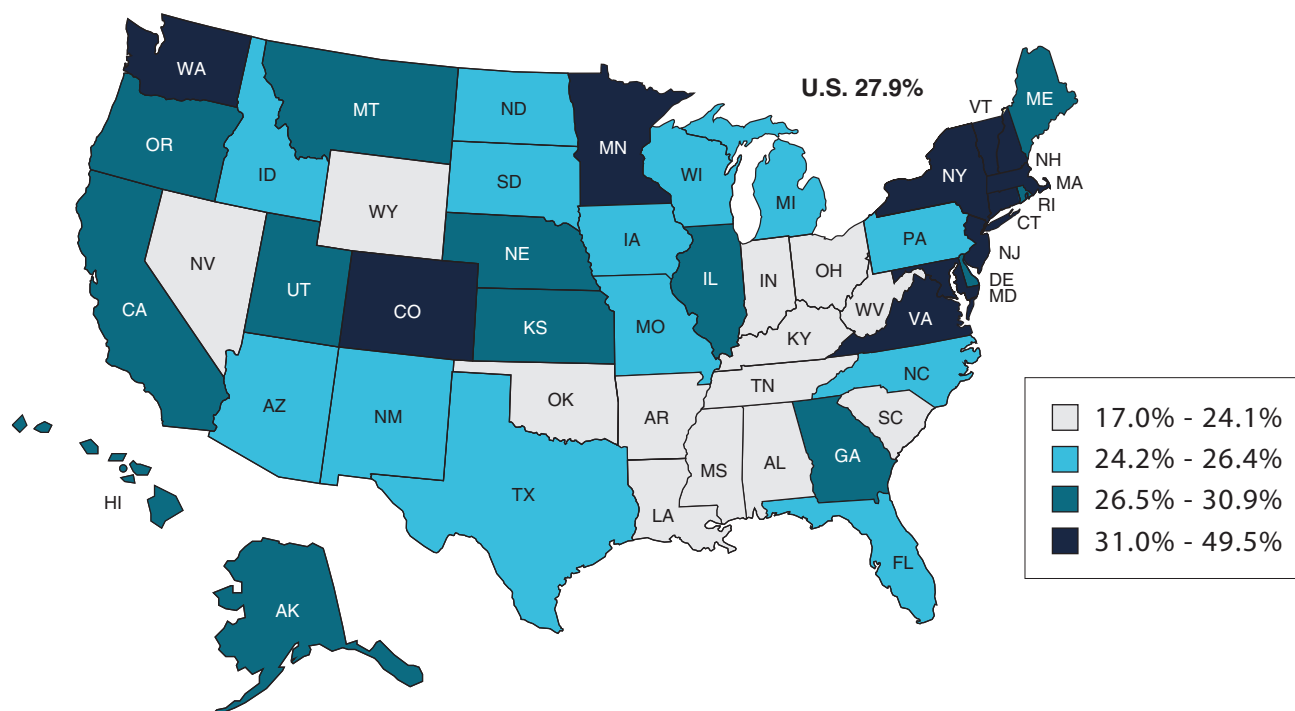
Represents deaths of infants under 1 year old per 1,000 live births, by place of residence. Excludes fetal deaths.



Source: U.S. Department of Health and Human Services, National Vital Statistics Report, Vol. 59, No. 6, June 29, 2011

Rank	State	Rate	Rank	State	Rate
	U.S. Average	6.8%	26	Idaho	6.8%
1	District of Columbia	13.0%	26	Illinois	6.8%
2	Mississippi	10.0%	26	Nebraska	6.8%
3	Alabama	9.9%	29	Connecticut	6.7%
4	Louisiana	9.2%	29	Kentucky	6.7%
5	North Carolina	8.5%	31	Hawaii	6.6%
5	South Carolina	8.5%	31	Alaska	6.6%
7	Oklahoma	8.4%	33	Wisconsin	6.4%
8	Tennessee	8.3%	33	Maine	6.4%
9	Maryland	8.0%	35	Texas	6.3%
9	Georgia	8.0%	35	Nevada	6.3%
9	Kansas	8.0%	35	South Dakota	6.3%
12	Michigan	7.9%	35	Montana	6.3%
13	Arkansas	7.8%	39	New Mexico	6.1%
13	Ohio	7.8%	39	Colorado	6.1%
15	Virginia	7.7%	41	Oregon	5.7%
16	Delaware	7.6%	42	Minnesota	5.6%
16	Indiana	7.6%	42	New York	5.6%
<b>16</b>	<b>North Dakota</b>	<b>7.6%</b>	44	Iowa	5.5%
19	Pennsylvania	7.5%	45	New Hampshire	5.4%
20	Missouri	7.4%	46	California	5.2%
20	Wyoming	7.4%	47	New Jersey	5.1%
22	Rhode Island	7.3%	47	Vermont	5.1%
22	West Virginia	7.3%	49	Utah	5.0%
24	Florida	7.1%	50	Massachusetts	4.9%
25	Arizona	6.9%	50	Washington	4.9%

## Percent of Persons 25 Years Old and Over with a Bachelor's Degree, 2006-2010

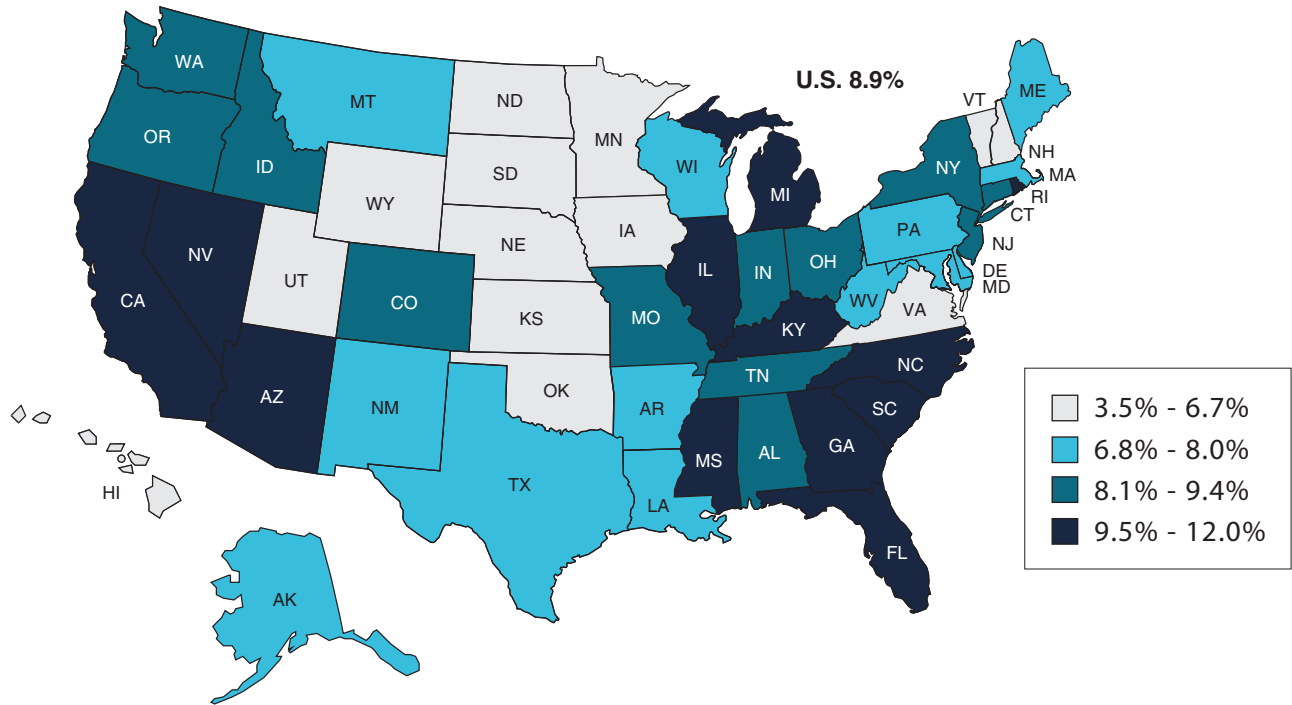


Source: U.S. Census Bureau, 2010 Census Data

Rank	State	Rate	Rank	State	Rate
	U.S. Average	27.9%	26	Pennsylvania	26.4%
1	District of Columbia	49.2%	27	Arizona	26.3%
2	Massachusetts	38.3%	<b>27</b>	<b>North Dakota</b>	<b>26.3%</b>
3	Colorado	35.9%	29	North Carolina	26.1%
4	Maryland	35.7%	30	Florida	25.9%
5	Connecticut	35.2%	31	Texas	25.8%
6	New Jersey	34.6%	31	Wisconsin	25.8%
7	Virginia	33.8%	33	New Mexico	25.5%
8	Vermont	33.3%	34	South Dakota	25.3%
9	New Hampshire	32.9%	35	Michigan	25.0%
10	New York	32.1%	35	Missouri	25.0%
11	Minnesota	31.4%	37	Iowa	24.5%
12	Washington	31.0%	38	Idaho	24.3%
13	Illinois	30.3%	39	Ohio	24.1%
13	Rhode Island	30.3%	40	South Carolina	24.0%
15	California	30.1%	41	Wyoming	23.6%
16	Hawaii	29.4%	42	Tennessee	22.7%
16	Utah	29.4%	43	Oklahoma	22.6%
18	Kansas	29.3%	44	Indiana	22.4%
19	Oregon	28.6%	45	Nevada	21.8%
20	Montana	27.9%	46	Alabama	21.7%
21	Delaware	27.7%	47	Louisiana	20.9%
21	Nebraska	27.7%	48	Kentucky	20.3%
23	Georgia	27.2%	49	Mississippi	19.5%
24	Alaska	27.0%	50	Arkansas	19.1%
25	Maine	26.5%	51	West Virginia	17.3%

## Unemployment Rate, 2011

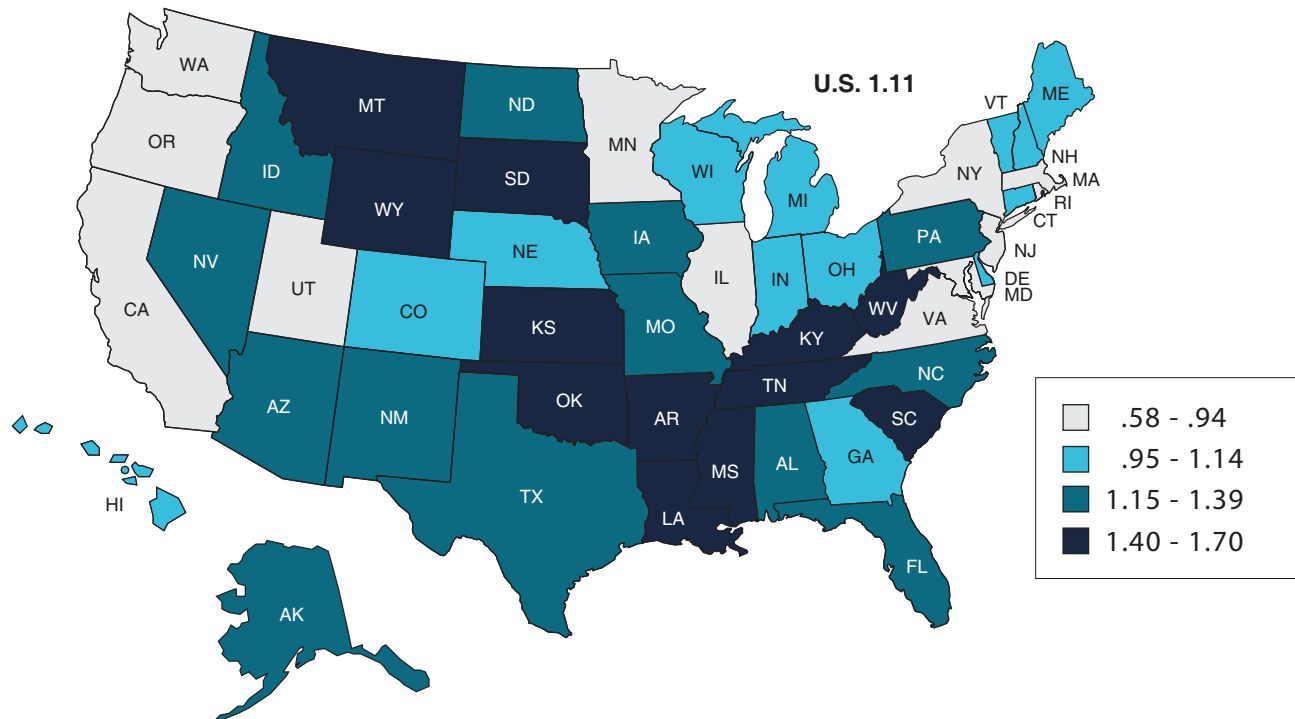
The map below highlights the nation's unemployment rates. With 3.5%, North Dakota has the lowest unemployment rate. North Dakota's unemployment rate is less than half the nation's average of 8.9%.



Source: U.S. Bureau of Labor Statistics

Rank	State	Rate	Rank	State	Rate
	U.S. Average	8.9%	26	Arkansas	8.0%
1	Nevada	11.7%	26	West Virginia	8.0%
2	California	11.3%	28	Pennsylvania	7.9%
3	Rhode Island	10.7%	28	Texas	7.9%
4	Mississippi	10.5%	30	Alabama	7.6%
4	Florida	10.5%	31	Maine	7.5%
6	North Carolina	10.3%	31	Wisconsin	7.5%
6	Michigan	10.3%	33	Massachusetts	7.4%
8	South Carolina	10.2%	33	New Mexico	7.4%
9	District of Columbia	9.8%	35	Delaware	7.3%
9	Georgia	9.8%	35	Louisiana	7.3%
11	Illinois	9.5%	37	Maryland	7.0%
11	Arizona	9.5%	38	Montana	6.8%
11	Kentucky	9.5%	39	Hawaii	6.7%
14	Oregon	9.3%	39	Kansas	6.7%
15	New Jersey	9.2%	39	Utah	6.7%
15	Tennessee	9.2%	42	Minnesota	6.4%
17	Washington	9.0%	43	Oklahoma	6.2%
17	Alabama	9.0%	43	Virginia	6.2%
19	Indiana	8.8%	45	Wyoming	6.0%
20	Connecticut	8.7%	46	Iowa	5.9%
21	Idaho	8.6%	47	Vermont	5.6%
21	Missouri	8.6%	48	New Hampshire	5.4%
23	Ohio	8.3%	49	South Dakota	4.7%
24	Colorado	8.2%	50	Nebraska	4.4%
25	New York	8.1%	<b>51</b>	<b>North Dakota</b>	<b>3.5%</b>

## Traffic Fatalities Per 100 Million Vehicle Miles, 2010



Source: U.S. National Highway Safety Traffic Administration

Rank	State	Rate	Rank	State	Rate
	U.S. Average	1.11	26	Delaware	1.13
1	Montana	1.69	26	Hawaii	1.13
2	Arkansas	1.68	28	Georgia	1.11
3	South Carolina	1.65	28	Maine	1.11
4	West Virginia	1.64	30	Connecticut	1.02
5	Mississippi	1.61	31	Indiana	1.00
6	Kentucky	1.58	32	Nebraska	0.98
6	South Dakota	1.58	32	New Hampshire	0.98
8	Louisiana	1.56	32	Vermont	0.98
9	Tennessee	1.46	35	Michigan	0.97
10	Kansas	1.44	35	Ohio	0.97
11	Oklahoma	1.40	37	Wisconsin	0.96
11	Wyoming	1.40	38	Colorado	0.95
13	New Mexico	1.37	39	Oregon	0.94
14	Alabama	1.34	40	New York	0.91
15	Idaho	1.32	41	Virginia	0.90
15	Pennsylvania	1.32	42	Utah	0.89
17	North Carolina	1.29	43	Illinois	0.88
18	Texas	1.28	43	Maryland	0.88
19	Arizona	1.27	45	California	0.84
<b>19</b>	<b>North Dakota</b>	<b>1.27</b>	46	Rhode Island	0.80
21	Florida	1.25	46	Washington	0.80
22	Iowa	1.24	48	New Jersey	0.76
23	Nevada	1.22	49	Minnesota	0.73
24	Alaska	1.17	50	District of Columbia	0.67
25	Missouri	1.16	51	Massachusetts	0.58

# SECTION 7

Definition of Hospital and Health  
System Data Items





## DEFINITION OF HOSPITAL AND HEALTH SYSTEM DATA ITEMS

The following pages define the hospital and health system-specific data items reported in this publication.

**Accounts Receivable:** Money owed to an organization on an open account for goods furnished or services provided.

**Acute Length of Stay:** Average stay of acute inpatients during the reporting period. Derived by dividing the number of acute inpatient days by the number of acute admissions.

**Admissions:** Number of patients, excluding newborns, and including swing bed and nursing home-type unit/facility, accepted for inpatient service during the reporting period.

**All Other Operating Revenue:** Revenue from services other than health care provided to patients, as well as sales and services to nonpatients. Revenue which arises from the normal day-to-day operations from services other than health care provided to patients. Includes sales and services to nonpatients, and revenue from miscellaneous sources (rental of hospital space, sales of cafeteria meals, gift shop sales). Also includes operating gains.

**Bad Debt:** Care for which charges are not collected. Does not include charity or contractual allowances.

**Births:** Total number of infants born in the hospital during the reporting period.

**Charity Care:** Care given without compensation because the patient does not have the ability to pay.

**City/Hospital/Health System Name:** Hospitals/Health Systems are listed in alphabetical order by city, hospital and health system name within the Medicare classification of the hospital.

**Community Hospital:** Nonfederal, short-term hospitals whose facilities and diagnostic, therapeutic, medical and surgical services are available to the public.

• **For-Profit Hospital (Also Proprietary or Privately-Owned):** A hospital which pays taxes to the federal and state governments on the income earned.

• **Not-For-Profit Hospital (Also Voluntary):** A hospital that is organized on a not-for-profit basis under the ownership and control of a private, tax-exempt corporation.

• **Public Hospital:** A not-for-profit hospital operated and supported by a city, county, special district or state government.

**Contractual Allowance:** Difference between charges and amounts received or due from third party payers under contractual agreements. Sometimes called payment shortfalls.

**Consumer Price Index:** An inflationary measure encompassing the cost of all consumer goods and services.

**Control:** Type of organization that is responsible for establishing policy for overall operation of the hospital.

**Critical Access (CAH):** A special Medicare provision that provides cost reimbursement under the Balanced Budget Act of 1997 for facilities meeting defined criteria.

**Current Ratio:** The number of dollars held in current assets per dollar of current liabilities. It is perhaps the most widely used measure of liquidity.

**Deductions from Revenue:** Contractual adjustments and charity care that result in reduction of gross revenue (charges) billed by the hospital.

**Inpatient:** An individual who has been admitted to a hospital as a registered bed patient and is receiving services under the direction of a physician for at least 24 hours.

**Integrated Health Network:** An integrated health network is a system or network of organizations and individuals that provides or arranges to provide a coordinated continuum of services to a defined population and is willing and able to be held clinically and fiscally accountable for the outcomes and health status of populations served.

**Long Term Debt to Equity:** Long term debt divided by the fund balance.

**Managed Care (Coordinated Care):** Community or regional health plans designed to integrate health services for a defined population.

**Margin: Income (or loss)**

- **Operating Revenue Margin:** Direct income or loss from the provision of patient services, and revenue from other operating sources such as sales and services to nonpatients and revenue from miscellaneous sources, i.e., rental of hospital space, sale of cafeteria meals, gift shop sales (total operating revenue).

- **Total Revenue Margin:** Includes the total operative revenue component plus revenue from nonoperating sources. These nonoperating revenue include investment income, contributions and other nonoperating gains or losses.

**Medicaid:** A federally-established, state-administered program designed to pay for the care provided to specifically defined categories of the poor. Medicaid is funded jointly by federal and state government.

**Medicare:** A federally-established, federally funded program administered by the Centers for Medicare and Medicaid Services (CMS) to pay for the health care provided to most people 65 and over, and some qualified people under 65.

**Medicare Classifications:** The federally administered Medicare program classifies hospitals into four major categories which we follow for this report.

**Medicare Managed Care Plan:** These are health care choices in some areas of the country. In most plans, you can only go to doctors, specialists or hospitals on the plan's list. Plans must cover all Medicare Part A and Part B health care. Some plans cover extras, like prescription drugs. Your costs may be lower than in the Original Medicare Plan.

**Near West:** Includes North Dakota, South Dakota, Nebraska, Kansas, Oklahoma, Texas, Louisiana, Arkansas, Missouri, Iowa and Minnesota.

**Net Nonoperating Revenue:** Net revenue (revenue less losses) from transactions that are peripheral or incidental to the provision of health care services and from other events stemming from the environment that may be largely beyond the control of the entity and its management. Includes investment income, contributions, and other nonoperating gains or losses.

**Net Operating Revenue:** Net patient revenue plus other operating revenue.

**Net Patient Revenue:** Gross patient revenue less deductions for payment shortfalls and charity.

**Net Total Revenue:** Net patient revenue plus other net operating revenue plus net nonoperating revenue.

**Nonoperating Revenue:** Revenue received by a health care provider from tax appropriations, investment income, contributions and other nonoperating gains.

**Nonreimbursed Care:** Patient care provided for which payment is not received including contractual adjustments, bad debt and charity care.

**Operating Revenue Margin:** Net patient revenue plus tax appropriations and all other operating revenue less total expenses.

**Operating Revenue Margin—Percent:** Operating revenue margin divided by net operating revenue expressed as a percent.

**Outpatient:** A patient who receives care at the hospital but does not stay in the hospital overnight for that care.

**Outpatient—Percent of Patient Revenue:**

Percent of total gross patient revenue attributable to services rendered to outpatients.

**Outpatient Surgical Operations—Percent:**

Percent of total surgical 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.

**Outpatient Visits:** Total number of patients seen in an emergency unit and the number of scheduled or unscheduled visits to outpatient service areas other than the emergency room. Includes physician referrals and outpatient surgeries.

**Patient Days:** Number of adult and pediatric days of care, excluding newborn days of care, and including swing bed and nursing home-type unit/facility, rendered during the entire reporting period.

**Payment Shortfall:** The difference between what the hospital charges and what it collects.

**Rural:** All locations in the state not located within a standard metropolitan area (SMA) or classified as rural referral.

**Rural Referral:** Hospitals not located within a standard metropolitan area (SMA) meeting specified requirements for discharges, case mix and physician specialists.

**Swing Beds:** Acute care hospital beds that can also be used for long-term care, depending on the needs of the patient and the community. Only those hospitals with fewer than 100 beds and located in a rural community are eligible to have swing beds.

**Tax Appropriations:** Tax revenue is nonoperating revenue that is ongoing and central to the operations of the hospital.

**Third-Party Payer:** An agency of a governmental unit or an organization which pays for health care provided to one of its beneficiaries, subscribers or enrollees.

**Total Expenses:** Total of payroll and nonpayroll expenses (including bad debt expense).

**Total Facility Personnel:** Number of people on the hospital payroll, both on a part-time or full-time basis.

**Total Gross Patient Revenue:** Revenue from services rendered to outpatients and inpatients.

**Total Margin:** Revenue less specified expenses

**Total Revenue Margin:** Net patient revenue plus all other revenue less total expenses and losses. Same as net income (loss).

**Total Revenue Margin—Percent:** Total revenue margin divided by net total revenue, expressed as a percent.

**Total Surgical Operations:** Number of surgical operations performed on an inpatient or outpatient basis.

**Uncompensated Care:** Services provided by hospitals for patients who are uninsured, are unable to pay, or fail to pay the costs of their care.

**Urban:** Hospitals located within a standard metropolitan area (SMA) and located in metropolitan counties of less than one million people.

**West North Central:** Includes North Dakota, South Dakota, Nebraska, Kansas, Missouri, Iowa and Minnesota.