Chartbook Section 8

Health Care Providers and Service Availability





Section 8: Health Care Providers and Service Availability

- Hospital system and capacity
- Utilization of hospital services
- Hospital financial trends
- Hospital capital expenditures
- Hospital community benefit
- Availability of specific health care services at hospitals (e.g., imaging, surgery)
- Physician services

HOSPITAL SYSTEM AND CAPACITY

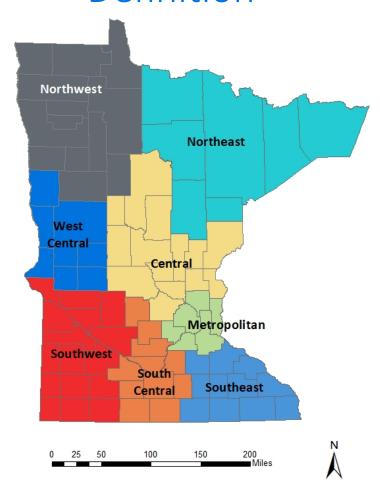
Hospital Capacity in Minnesota, 2014

Number of Hospitals	Available Beds ^{/1}	Occupancy Rate Based on Available Beds	Licensed Beds ^{/2}	Occupancy Rate Based on Licensed Beds	Available Beds Per 1,000 Population
132	11,652	56.1%	16,369	40.0%	2.1

^{/1}Available beds is defined as the number of acute care beds that are immediately available for use or could be brought online within a short period of time.

[/]²Licensed beds is defined as the number of beds licensed by the Department of Health, under Minnesota Statutes, sections 144.50 to 144.58. Source: MDH Health Economics Program analysis of hospital annual reports, March 2016; U.S. Census Bureau Unless otherwise noted, all data is this section is for each hospital's fiscal year.

Minnesota Geographic Regions: Definition



Regional Hospital Capacity in Minnesota, 2014

	Number of Hospitals	Available Beds ¹	Occupancy Rate Based on Available Beds	Licensed Beds ²	Occupancy Rate Based on Licensed Beds	Available Beds Per 1,000 Population
Central	19	1,147	45.2%	1,377	37.6%	1.6
Metro	26	5,887	68.5%	8,524	47.3%	2.0
Northeast	17	1,149	44.7%	1,411	36.4%	3.5
Northwest	13	378	35.2%	570	23.3%	1.9
South Central	15	561	33.7%	770	24.5%	1.9
Southeast	11	1,641	58.4%	2,584	37.1%	3.3
Southwest	23	571	17.8%	725	14.1%	2.6
West Central	8	318	29.4%	408	22.9%	1.7
Total	132	11,652	56.1%	16,369	40.0%	2.1

¹Available beds is defined as the number of acute care beds that are immediately available for use or could be brought online within a short period of time.

²Licensed beds is defined as the number of beds licensed by the Department of Health, under Minnesota Statutes, sections 144.50 to 144.58. Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

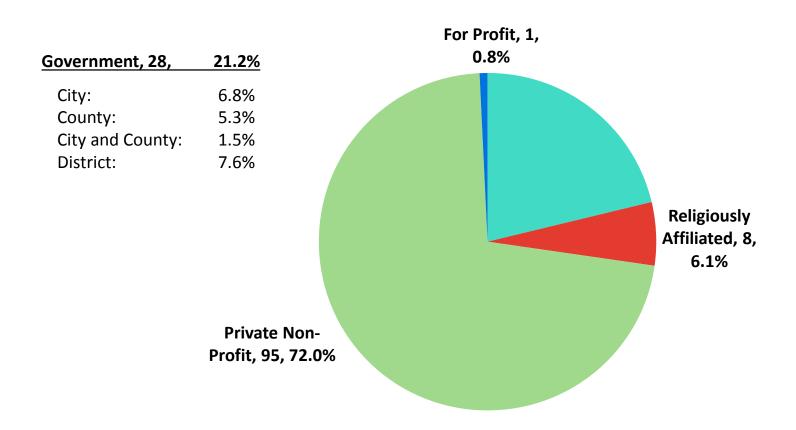
Distribution of Minnesota's Hospitals by Size and Region, 2014

By Number of Available Beds

	Under 25 Beds	25-49 Beds	50-99 Beds	100-199 Beds	200 or More Beds	Total
Central	10.5%	68.4%	10.5%	5.3%	5.3%	100.0%
Metro	3.8%	11.5%	23.1%	15.4%	46.2%	100.0%
Northeast	41.2%	23.5%	17.6%	5.9%	11.8%	100.0%
Northwest	46.2%	46.2%	0.0%	7.7%	0.0%	100.0%
South Central	46.7%	33.3%	13.3%	6.7%	0.0%	100.0%
Southeast	27.3%	27.3%	36.4%	0.0%	9.1%	100.0%
Southwest	39.1%	56.5%	4.3%	0.0%	0.0%	100.0%
West Central	37.5%	37.5%	12.5%	12.5%	0.0%	100.0%
Statewide	28.8%	37.9%	14.4%	6.8%	12.1%	100.0%

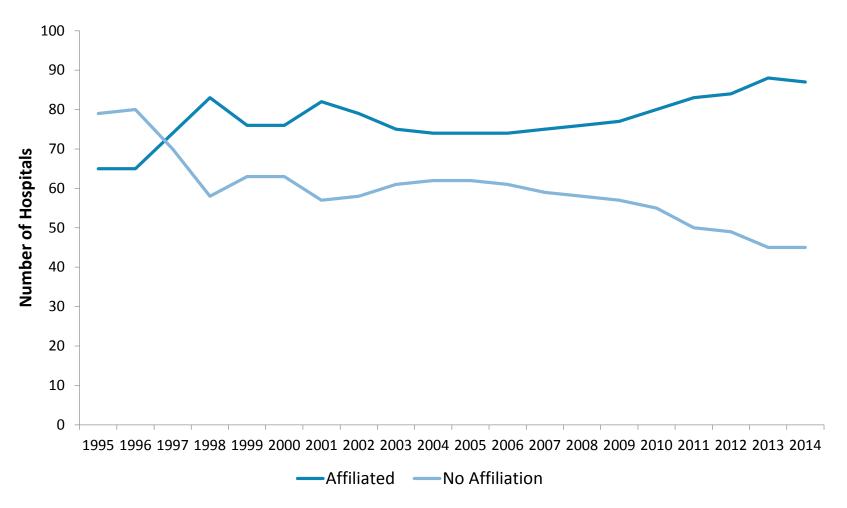
Ownership of Minnesota Hospitals, 2014





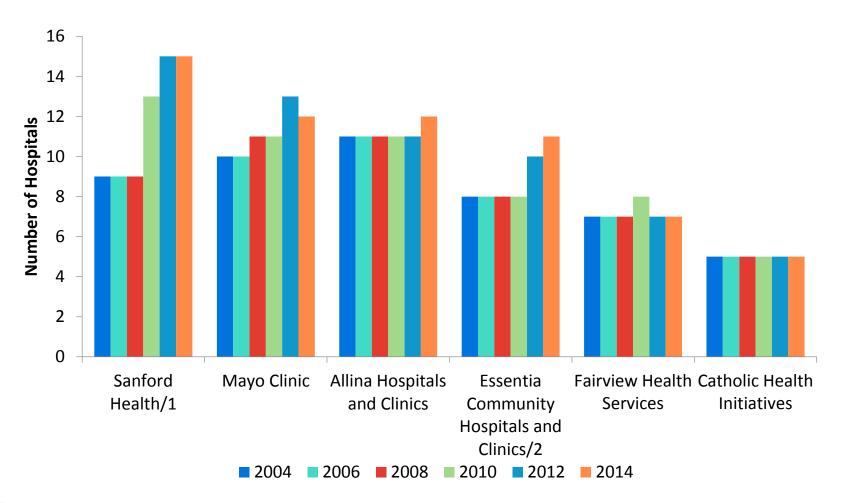
Source: MDH Health Economics Program analysis of hospital annual reports, March 2016. Summary of graph

Minnesota Community Hospitals Affiliated with a Hospital System, 1995-2014



Source: MDH Health Economics Program analysis of hospital annual reports, March 2016. Summary of graph

Largest Minnesota Hospital Systems, 2004-2014



[/]¹Previously known as Sioux Valley. Changes in the number of hospital affiliations impact trend lines over time.

Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

Summary of graph 10

^{/2}Essentia represents the merger of Benedictine and SMDC systems and includes both systems over time.

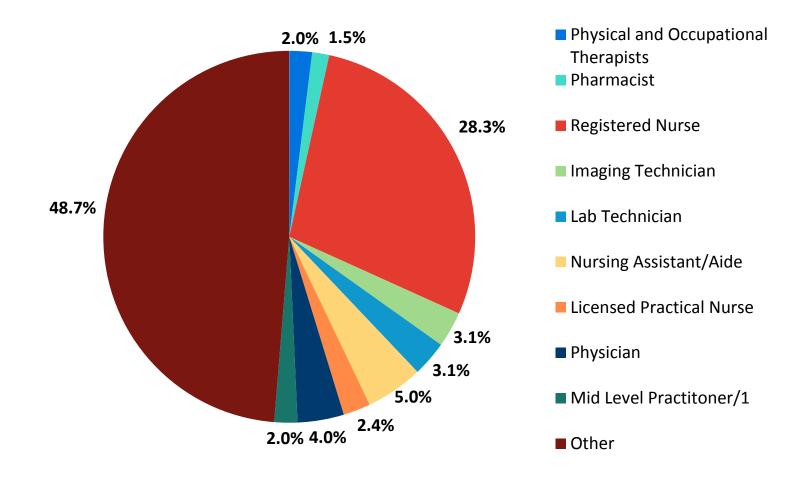
Minnesota Hospital System Ownership, 2014

	Owned	Managed	Leased	Total	Available Beds
Allina Health System	11	1	0	12	1,850
Avera Health	1	2	0	3	80
Catholic Health Initiatives	5	0	0	5	107
CentraCare Health System	6	0	0	6	567
Children's Hospitals and Clinics	1	0	0	1	279
Essentia Community Hospitals and Clinics (ECHC)	11	0	0	11	838
Fairview Health Services	7	0	0	7	1,438
HealthEast Care System	4	0	0	4	630
HealthPartners, Inc.	2	0	0	2	492
Mayo Clinic	12	0	0	12	1,777
Ministry Health Care	1	0	0	1	24
North Memorial Health Care	2	0	0	2	440
Park Nicollet Health Services	2	1	0	3	453
Rice Memorial Hospital	0	1	0	1	18
Sanford Health	7	5	3	15	435
Select Medical Corporation	1	0	0	1	92
St. Luke's Hospital, Duluth	1	1	0	2	284
Total	74	11	3	88/1	9,804
Unaffiliated Hospitals				45	1,848

Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

^{/1}Hospitals with multiple affiliations are counted under each affiliation; for hospitals with multiple affiliations available beds are divided across systems equally.

Composition of Minnesota's Hospital Workforce, 2014



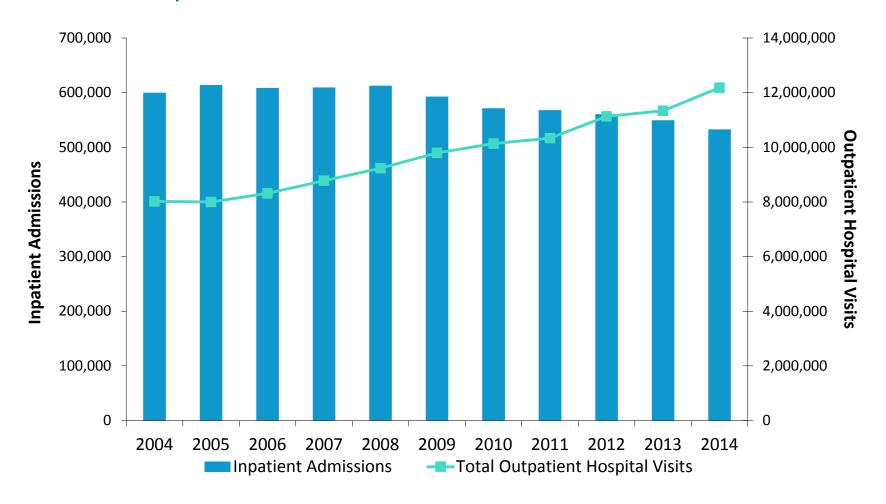
[/]¹Includes nurse anesthetists, nurse practitioners, and physician assistants. Other is reported as grouped category of positions.

Source: MDH Health Economics Program analysis of hospital annual reports, March 2016. Summary of graph

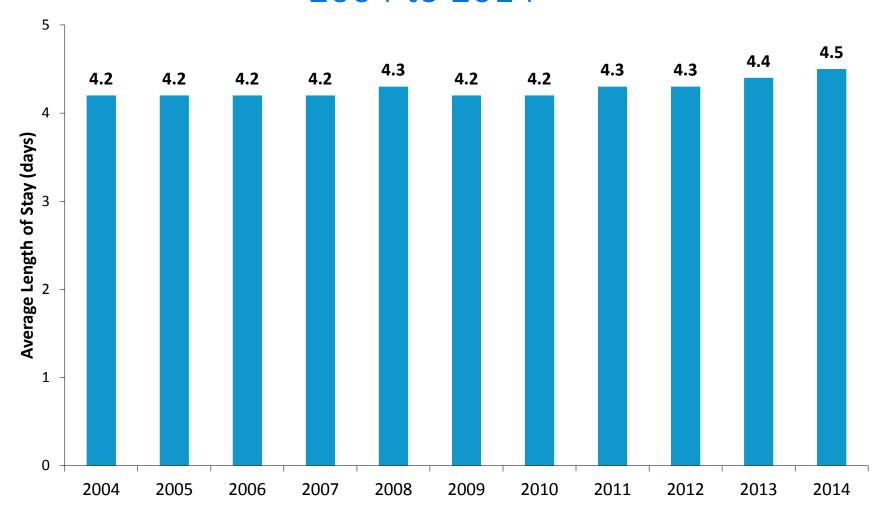
12

UTILIZATION OF HOSPITAL SERVICES

Minnesota Hospital Outpatient Visits and Inpatient Admissions, 2004 to 2014

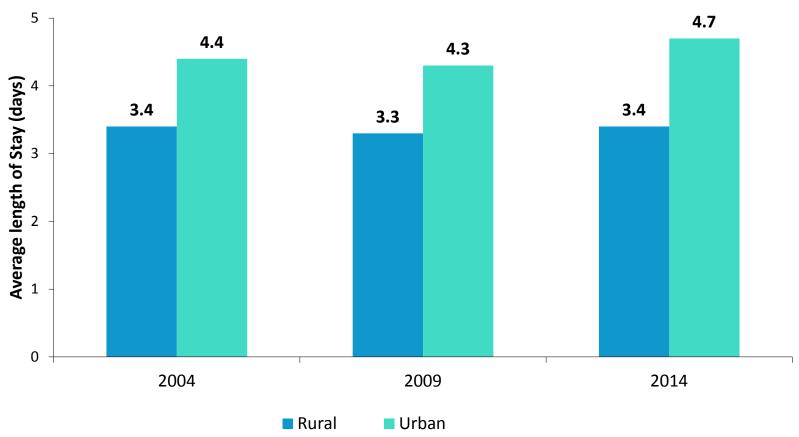


Average Length of Stay in Minnesota Hospitals, 2004 to 2014



Source: MDH Health Economics Program analysis of hospital annual reports, March 2016. Summary of graph

Average Length of Stay: Rural and Urban Minnesota Hospitals, 2004 to 2014



A hospital is defined as rural if it is located in a county that is not part of a metropolitan statistical area. Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

Summary of graph

Minnesota Hospital Utilization by Region, 2014

	Inpatient Admissions	Inpatient Days	Average Length of Stay (days)	Outpatient Visits
Central	51,256	189,103	3.7	1,652,342
Metro	316,253	1,471,871	4.7	4,414,132
Northeast	40,586	187,546	4.6	1,733,292
Northwest	13,447	48,511	3.6	716,781
South Central	19,628	68,918	3.5	841,335
Southeast	70,083	349,699	5.0	1,730,269
Southwest	12,217	37,191	3.0	504,757
West Central	9,388	34,175	3.6	587,867
Statewide	532,858	2,387,014	4.5	12,180,775

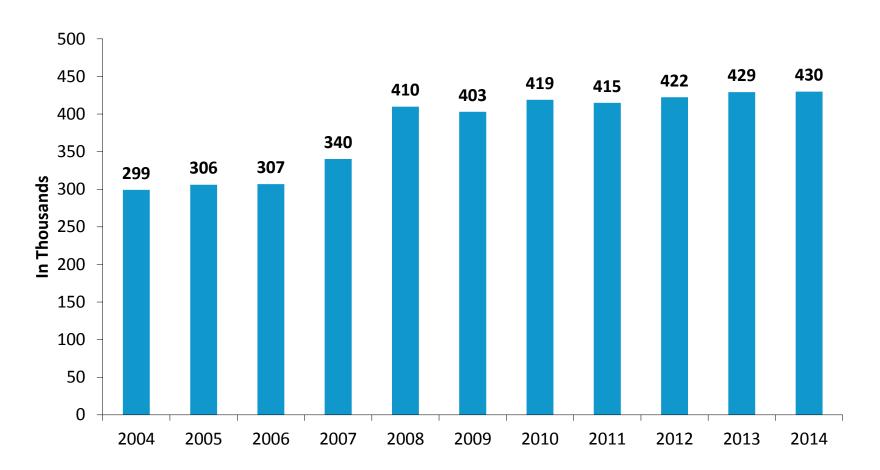
Distribution of Hospital Admissions and Inpatient Days by Type of Service, 2014

	Percent of Admissions	Percent of Inpatient Days
Medical & surgical care	34.4%	35.2%
Cardiac care	11.4%	10.4%
Obstetric care	13.5%	7.4%
Orthopedic care	12.8%	9.5%
Psychiatric care	6.9%	12.3%
Neurology care	6.0%	5.8%
Neonatal care (excluding births)	5.2%	6.3%
Chemical dependency care	1.8%	2.2%
Rehabilitation	1.1%	3.1%
Other acute care	6.9%	7.8%
Total acute care	100.0%	100.0%

Distribution of Hospital Admissions and Inpatient Days by Type of Service, 2014

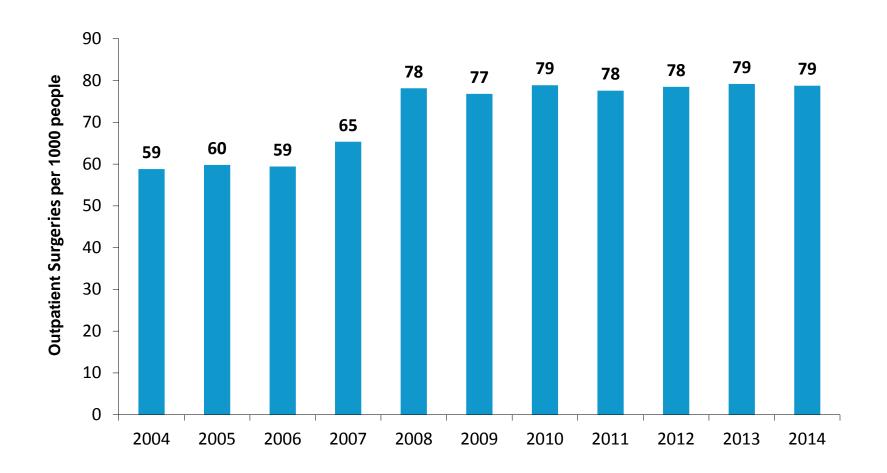
	Rural		Urban	
	Percent of	Percent of	Percent of	Percent of
	Admissions	Inpatient Days	Admissions	Inpatient Days
Medical & surgical care	39.6%	41.1%	33.4%	34.4%
Cardiac care	9.8%	8.5%	11.8%	10.7%
Obstetric care	16.1%	10.9%	13.0%	7.0%
Orthopedic care	12.0%	11.7%	12.9%	9.2%
Psychiatric care	6.0%	12.5%	7.1%	12.3%
Neurology care	3.6%	4.1%	6.5%	6.0%
Neonatal care (excluding births)	4.7%	3.7%	5.3%	6.6%
Chemical dependency care	1.2%	2.0%	1.9%	2.3%
Rehabilitation	1.3%	4.2%	1.1%	2.9%
Other acute care	5.8%	1.4%	7.2%	8.7%
Total acute care	100.0%	100.0%	100.0%	100.0%

Trend in Outpatient Surgeries at Minnesota Hospitals, 2004 to 2014

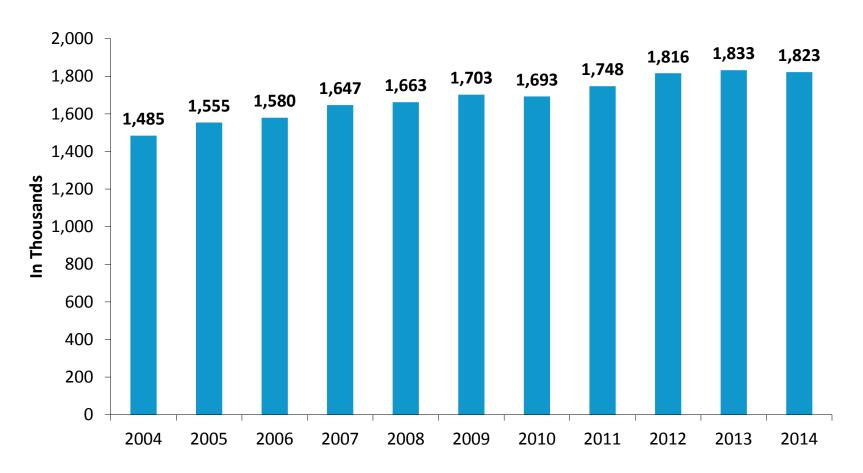


Source: MDH Health Economics Program analysis of hospital annual reports, March 2016. Summary of graph

Trend in Outpatient Surgeries at Minnesota Hospitals per 1000 in Population, 2004 to 2014

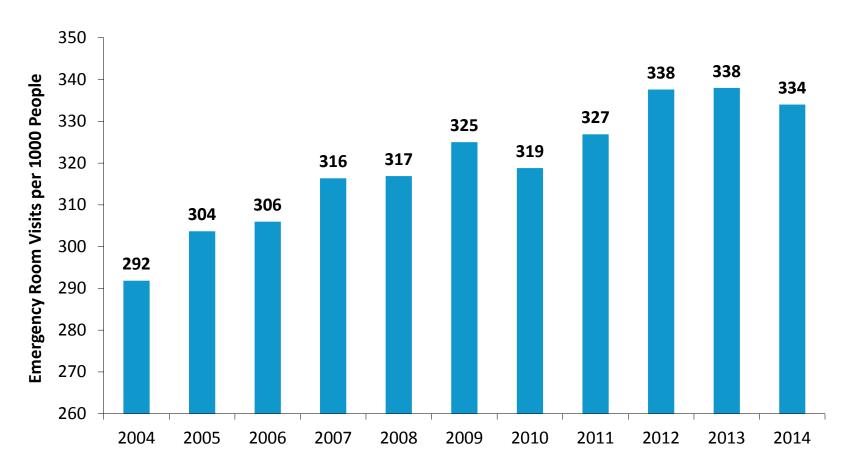


Trend in Emergency Room Visits at Minnesota Hospitals, 2004 to 2014



Source: MDH Health Economics Program analysis of hospital annual reports, March 2016. Summary of graph

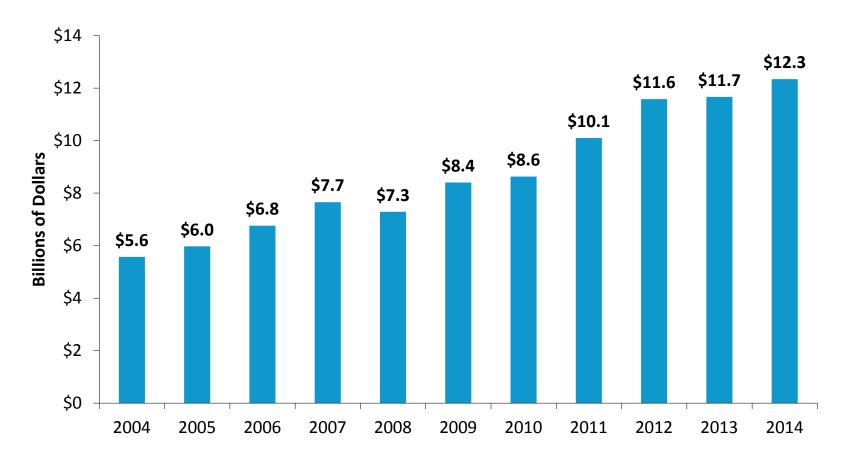
Trend in Emergency Room Visits at Minnesota Hospitals per 1000 Population, 2004 to 2014



Source: U.S. Census, MDH Health Economics Program analysis of hospital annual reports, March 2016. Summary of graph

HOSPITAL FINANCIAL TRENDS

Net Assets of Minnesota Hospitals, 2004 to 2014



Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

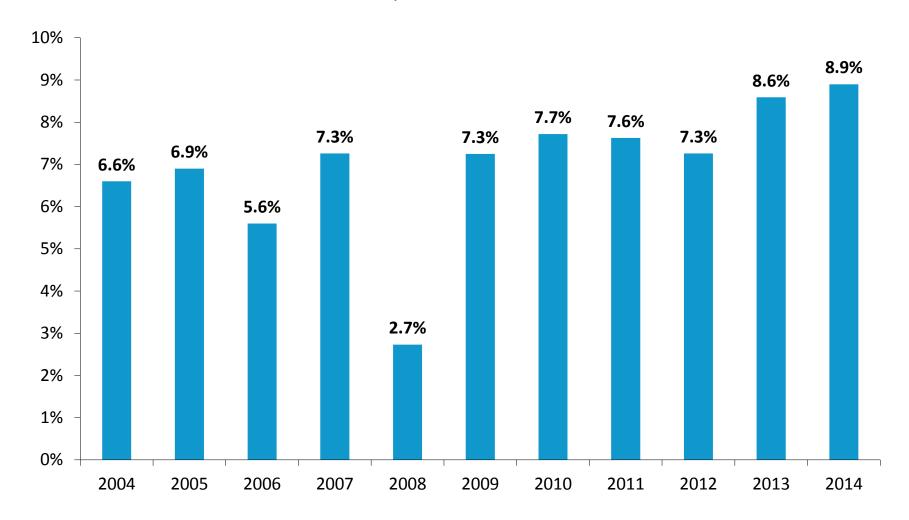
Net assets is an accounting term defining the total assets minus the total liabilities, and describes the hospital's financial position.

Summary of graph

Net Income of Minnesota Hospitals, 2004 to 2014



Minnesota Hospitals' Net Income as a Percent of Revenue, 2004 to 2014



Hospital Financial Indicators by Region, 2014

	Net Income (Million Dollars)	Net Income as a % of Revenue
Central	\$190.4	10.6%
Metro	\$599.0	6.6%
Northeast	\$117.4	7.3%
Northwest	\$29.5	5.7%
South Central	\$89.3	12.2%
Southeast	\$459.8	18.1%
Southwest	\$19.2	4.2%
West Central	\$29.2	7.3%
Statewide	\$1,533.8	8.9%

Hospital Financial Indicators by Hospital Size and Type, 2014

	Net Income (Million Dollars)	Net Income as a % of Revenue
Number of Available Beds		
Under 25 Beds	\$37.4	6.8%
25 to 49 Beds	\$154.1	7.3%
50 to 99 Beds	\$95.8	4.6%
100 to 199 Beds	\$182.4	9.7%
200 Beds or More	\$1,064.1	10.1%
Type of Hospital ^{/1}		
Critical Access Hospital (CAH)	\$143.2	7.2%
PPS	\$1,384.9	9.2%
Other	\$5.7	4.9%
All Hospitals	\$1,533.8	8.9%

^{/1}A critical access hospitals is a federal designation for a rural hospital that meets certain criteria, and PPS hospitals are Medicare Prospective Payment System hospitals.

Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

Sources of Patient Revenue for Minnesota Hospitals, 2014

Percent of Hospital Patient Revenue

	Rural Facilities	Urban Facilities	Facilities Statewide
Medicare	39.5%	28.9%	31.0%
State Public Programs/1	11.2%	13.6%	13.1%
Private Insurance	44.0%	52.8%	51.0%
Self-Pay	3.9%	2.6%	2.9%
Other Payers	1.4%	2.1%	1.9%
All Payers	100%	100%	100%

^{/1}Includes Medical Assistance and MinnesotaCare.

A hospital is defined as rural if it is located in a county that is not part of a metropolitan statistical area. Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

HOSPITAL CAPITAL EXPENDITURES

Capital Expenditure Commitments by Minnesota Hospitals, 2014

	2013	2014
Percent of Minnesota hospitals reporting major capital expenditure commitment	24.8%	22.0%
Total number of capital expenditure commitments reported	90	70
Value of major capital expenditure commitments reported (Millions)	\$473.8	\$447.4

Major spending commitments that are reportable under 62J.17 include expenditures in excess of \$ 1 million.

Spending commitments are sorted by the reported calendar date of the spending commitment and the 2013 figures reflect 2013 projects reported in the 2014 fiscal year and is a revision over previous publications.

A small portion of capital expenditure data may belong to earlier reporting periods.

Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

Minnesota Hospital Capital Expenditure Commitments by Type, 2014

	Capital Expenditure Commitments (Millions)	Percent of Total Capital Expenditure Commitments
Medical equipment	\$91.7	20.5%
Building and space	\$309.7	69.2%
Other	\$46.1	10.3%
All Major Capital Expenditure Commitments	\$447.4	100.0%

Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

Minnesota Hospital Capital Expenditure Commitment by Category, 2014

	Capital Expenditure Commitments (Millions)	Percent of Total Capital Expenditure Commitment
Other Patient Care Services	\$184.6	41.3%
Surgery	\$112.2	25.1%
General Infrastructure	\$59.5	13.3%
Diagnostic Imaging	\$25.8	5.8%
Obstetrics	\$25.6	5.7%
Radiation Therapy	\$11.3	2.5%
Rehabilitation	\$9.1	2.0%
Mental Health	\$6.3	1.4%
Intensive Care (ICU or NICU)	\$5.0	1.1%
Cardiac Care	\$4.5	1.0%
Orthopedics	\$3.6	0.8%
All Major Capital Projects	\$447.4	100.0%

COMMUNITY BENEFIT

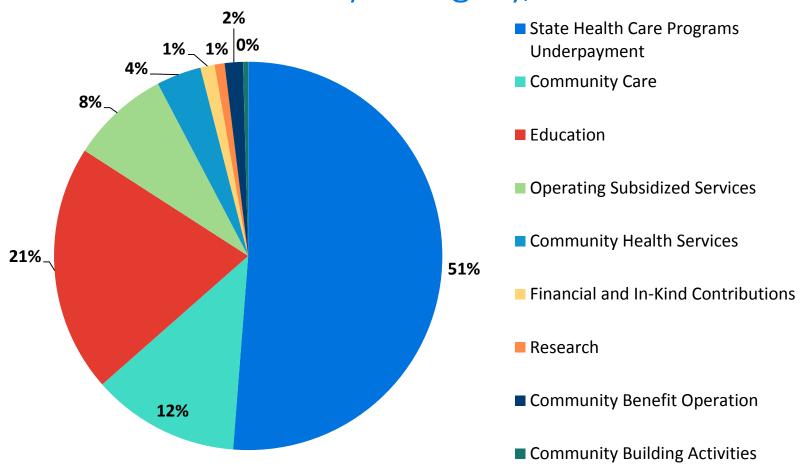
Community Benefit Provided by Minnesota Hospitals, 2014

	Community Benefit ^{/1} (Millions)	Percent of Total Operating Expenses
Community Care	\$123.4	0.8%
State Health Care Programs Underpayment	\$515.2	3.3%
Operating Subsidized Services	\$82.4	0.5%
Education	\$207.2	1.3%
Research	\$8.5	0.1%
Community Health Services	\$37.6	0.2%
Financial and In-Kind Contributions	\$11.8	0.1%
Community Building Activities	\$4.2	0.0%
Community Benefit Operation	\$15.3	0.1%
Total	\$1,005.7	6.5%

Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

[/]¹Community benefit refers to the contributions hospitals make outside of reimbursed patient care to the communities, for the or definitions of categories see: the forthcoming MDH/Health Economics Program, "Community Benefit Provided by Minnesota Hospitals in 2014" forthcoming (www.health.state.mn.us/healtheconomics).

Distribution of Minnesota Hospitals' Community Benefit^{/1} by Category, 2014



Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

[/]¹Community benefit refers to the contributions hospitals make outside of reimbursed patient care to the communities, for the or definitions of categories see: the forthcoming MDH/Health Economics Program, "Community Benefit Provided by Minnesota Hospitals in 2014" forthcoming (www.health.state.mn.us/healtheconomics).

AVAILABILITY OF SPECIFIC HOSPITAL SERVICES

Services Available in Minnesota Hospitals, 2014

Number of Hospitals

	Services Available ^{/1}	Services Not Available
Surgery		
Inpatient Surgery	125	7
Outpatient Surgery	130	2
Open-Heart Surgery Services	18	114
Organ Transplant Services	6	126
Mental Health/Chemical Dependency Services		
Outpatient Psychiatric Services	64	68
Detoxification Services	22	110
Diagnostic Radiology		
Computer Tomography (CT) Scanning Services	131	1
Magnetic Resonance Imaging (MRI) Services	129	3
Positron Emission Tomography (PET) Services	7	125
Single Photon Emission Computerized	49	02
Tomography (SPECT) Services	49	83
Other Services		
Renal Dialysis Services	40	92
Cardiac Catheterization Services	25	107

[/]¹Services are considered "available" when they are provided on site by hospital staff, on site through contracted services, or off site through shared services agreement.

Source: MDH Health Economics Program analysis of hospital annual reports, March 2016.

PHYSICIAN SERVICES

Number of Physicians Practicing in Minnesota, 2014

Number of Physicians:	14,977
Primary Care Physicians	4,488
Specialty Care Physicians	7,476
No Certification	3,013
Population for Every 1 Physician:	453
Primary Care Physicians	1,207
Specialty Care Physicians	725

Includes all physicians who have an active Minnesota license and a primary business address in Minnesota. "Primary Care" includes: General Family Medicine, General Internal Medicine, General Pediatrics. "No Certification" means there were no board certifications on the record received from the Minnesota Board of Medical Practice.

Source: Minnesota Board of Medical Practices, May 2014. Analysis by MDH, Office of Rural Health & Primary Care.

Note: Due to methodology changes, past Chartbook data should not be used for comparison.

Number of Physicians^{/1} Practicing in Minnesota by MSA^{/2} and Non-MSA Counties, 2014

	Rural	Small Town	Micropolitan	Metropolitan	Statewide
Number of Physicians:	214	580	1,171	13,012	14,977
Primary Care Physicians	137	327	502	3,522	4,488
Specialty Care Physicians	17	143	468	6,848	7,476
Population for Every 1 Physician:	2,043	674	519	297	453
Primary Care Physicians	3,191	1,195	1,210	1,098	1,207
Specialty Care Physicians	25,715	2,733	1,297	565	725

[/]¹Includes all physicians who have an active Minnesota license and a primary business address in Minnesota. "Primary Care" includes: General Family Medicine, General Internal Medicine, General Pediatrics. "No Certification" means there were no board certifications on the record received from the Minnesota Board of Medical Practice.

Source: Minnesota Board of Medical Practices, May 2014. Analysis by MDH, Office of Rural Health & Primary Care.

Note: Due to methodology changes, past Chartbook data should not be used for comparison. Previous data used physicians' mailing address and methodology was changed to use physicians' business practice address.

^{/2}MSA refers to Metropolitan Statistical Area, see Minnesota Health Workforce Demographics (http://www.health.state.mn.us/divs/orhpc/workforce/demo/msadef.html) for more information.

Distribution of Number of Physicians^{/1} Practicing in Minnesota by Location and Specialty, 2014

	Rural	Small Town	Micropolitan	Metropolitan	Statewide
Primary Care Physicians	64.0%	56.4%	42.9%	27.1%	30.0%
General Facility Based	0.9%	3.4%	7.9%	11.2%	10.5%
Surgeons	2.8%	11.4%	12.4%	9.0%	9.2%
Other Specialty Physicians	4.2%	9.8%	19.6%	32.5%	30.2%
No Certification	28.0%	19.0%	17.2%	20.3%	20.1%
All Specialties	100%	100%	100%	100%	100%

Note: Due to methodology changes, past Chartbook data should not be used for comparison. Previous data used physicians' mailing address and methodology was changed to use physicians' business practice address.

[/]¹Includes all physicians who have an active Minnesota license and a primary business address in Minnesota. "Primary Care" includes: General Family Medicine, General Internal Medicine, General Pediatrics. "No Certification" means there were no board certifications on the record received from the Minnesota Board of Medical Practice.

Source: Minnesota Board of Medical Practices, May 2014. Analysis by MDH, Office of Rural Health & Primary Care.

Additional Information from the Health Economics Program Available Online

- Health Economics Program Home Page (www.health.state.mn.us/healtheconomics)
- Publications
 (www.health.state.mn.us/divs/hpsc/hep/publications/index.html)
- Health Care Market Statistics (Chartbook Updates)
 (www.health.state.mn.us/divs/hpsc/hep/chartbook/index.html)

A summary of the charts and graphs contained within is provided at <u>Chartbook Summaries</u> - <u>Section 8</u>. Direct links are listed on each page. Please contact the Health Economics Program at 651-201-3550 or <u>health.hep@state.mn.us</u> if additional assistance is needed for accessing this information.