## Chapter 8: Hospitals Second Half

Lecturer: Monika M. Wahi, MPH, CPH

## **Learning Objectives**

At the end of this lecture, student should be able to:

- Describe at least two ways to classify hospitals into types.
- Name a real hospital and know how to classify it into a type of hospital
- Describe one way a non-profit hospital is different than a for-profit hospital.
- Give an example of a specialty hospital.

#### **Types of Hospitals**

#### **Many Types of Hospitals** General Private Non-profit Community Public Specialty Osteopathic Private F profit Teaching Rural

# For-profit and Non-profit Hospitals



#### Private non-profit hospitals

- "Voluntary hospitals"
- Operated by community organizations, philanthropic foundations, fraternal orders/societies
- Church-owned: Catholic, Protestant, Jewish
- Non-profit status for tax break because benefit community



#### Private for-profit hospitals

- "Proprietary hospitals"
- Stockholders/investors operate
- No non-profit tax breaks, give profits to shareholders rather than forced to invest

# Are Non-profit Hospitals "Better" than Private for-profit Hospitals?

- Non-profits compete head-on with private hospitals
  - Same providers
  - Same patients
  - Same insurance/third party sources for revenue
- Both use same aggressive marketplace behaviors
- Both provide similar levels of charity and uncompensated care
- "Hence, whether nonprofit hospitals are indeed charitable institutions remains controversial."

#### **Many Types of Hospitals** General Private Non-profit Community Public Specialty Osteopathic Private F profit Teaching Rural

#### **General and Specialty Hospitals**



#### General hospitals

- Most hospitals in the U.S. are general hospitals
- Provides dx, tx, and surgical services for acute medical conditions
- "General" does not mean less specialized or inferior care

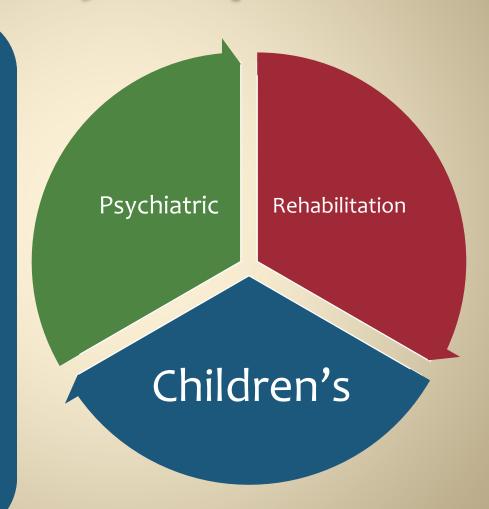


#### Specialty hospitals

- Only certain types of patients, or those with specified illnesses or conditions
- Traditionally tuberculosis, psychiatric, rehabilitation, and children's hospitals

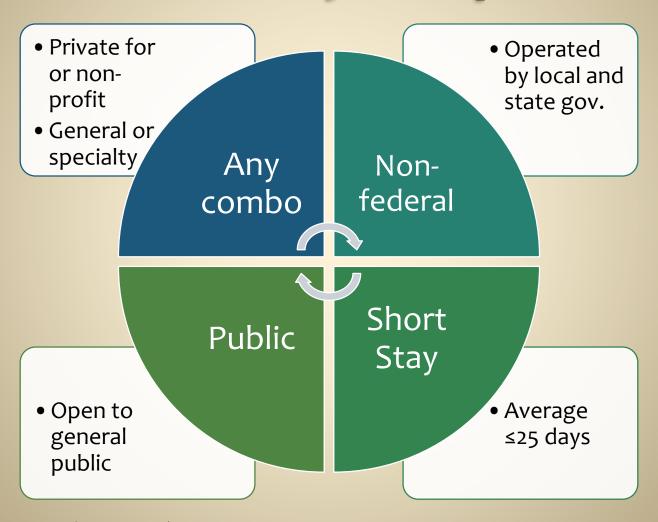
### **Specialty Hospitals**

- Community hospitals
   with special facilities
   for children especially
   rare/complex
   conditions
- 75% of children's hospital patients are being treated for chronic or congenital conditions
- Others require intensive care (transplants, ca tx, etc.)
- Higher nurse/pt staffing ratio for kids



#### **Many Types of Hospitals** General Private Non-profit Community Public Specialty Osteopathic Private F profit Teaching Rural

#### **Community Hospitals**



From Exhibit 8.4 (page 195)

## Community Hospitals are Public Hospitals

#### **COMMUNITY**

- 85% of all U.S. hospitals classified as community hospitals
- Must be nonfederal and available to the general public, and have average ≤25-day stay.
- Not the VA or other military because federal.
- Not hospital units at some institutions (prisons, college/universities) because not available to public.
- Most hospitals operated by local gov'ts Community – the rest tend to be "long stay" – psychiatric, tuberculosis/chronic disease hospitals.

#### **PUBLIC**

- 25% of all U.S. hospitals
- Include Community (locallyrun) hospitals plus those federally run
- Unlike Community, the federal ones do NOT have to serve general public (e.g., VA)
- Native American hospitals
- Can be affiliated with medical schools – financed by Medicare/Medicaid, state/local taxes to train

# Why Public and Community Hospitals?



- Usually in large urban areas for inner-city indigent and disadvantaged populations
- Due to poor health status and high violence in this population, these hospitals have high utilization
- Usually small to moderate (average 115 beds), but large ones affiliated with med schools and funded by federal and local funds
  - Provide substantial amount of charity care
- Due to financial pressure, many privatizing or closing in recent years.
  - Number of community hospitals went from 1,444 in 1990 to only 1,092 in 2009.

#### **Many Types of Hospitals** General Private Non-profit Community Public Specialty Osteopathic Private F profit Teaching Rural

#### Rural Hospitals



Not in MSA (census = area that includes a city with 50k people or total MSA with 100k)



Higher percentage of poor and elder patients



Challenges: remote, small size, limited workforce (physician shortages), inadequate financial resources

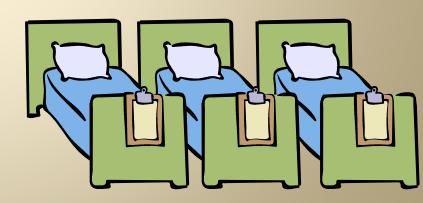
### **Critical Access Hospitals**

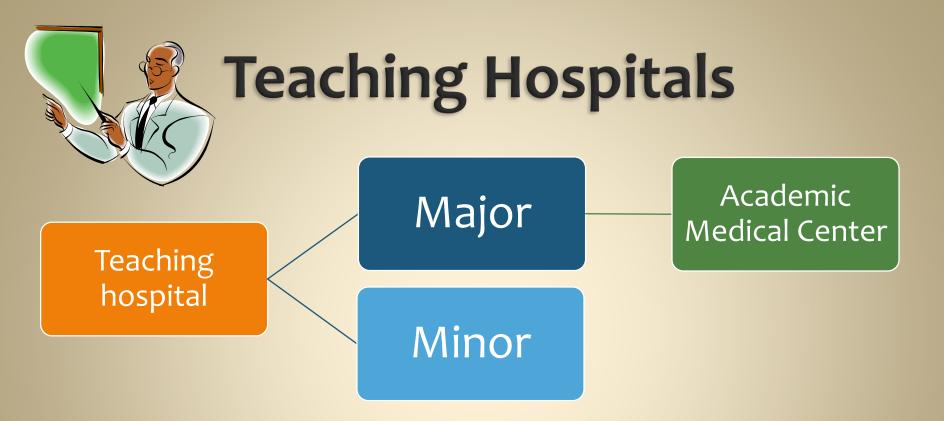
 To prevent small rural hospitals from having to close as part of prospective reimbursement, the Balanced Budget Act of 1997 allowed designating certain rural hospitals critical access hospitals (CAH)



- Medicare rules
  - No more than 25 beds

  - 24-hour emergency service An additional 10 beds may be in operation for psych or rehab
- Reimbursed on retrospective reimbursement





- Why be an AMC?
  - Uniquely capable of conducting basic and applied clinical research
  - While also providing health care services and offering medical education

### **Special Role of Teaching Hospitals**



Teaching Research



#### Specialized care

Complex medical problems

Latest medical technology



#### Specialty professionals and services

Many spec/sub spec represented

Special tertiary care (burn, transplant)

#### **History of Osteopathic Hospitals**

- Osteopathy establish separate branch of medicine in 1874
  - Same as "allopathic" (MDs) but is holistic, and looks at joints/tissues, diet and environment, promote health and prevent disease
- Since then, antagonism between fields made osteopaths establish own osteopathic hospitals
  - All the same services as allopathic (pharmacy, lab, x-ray, etc.) plus osteopathic services
- In 1970, osteopathic hospitals were eligible to apply for registration with the American Hospital Association
- Since then, allopathic and osteopathic (MDs and DOs) practice side-by-side in clinics/hospitals



## Osteopathic Hospitals Today



#### **Pharmacy**



Surgery



**Pediatrics** 



**Gynecology** 

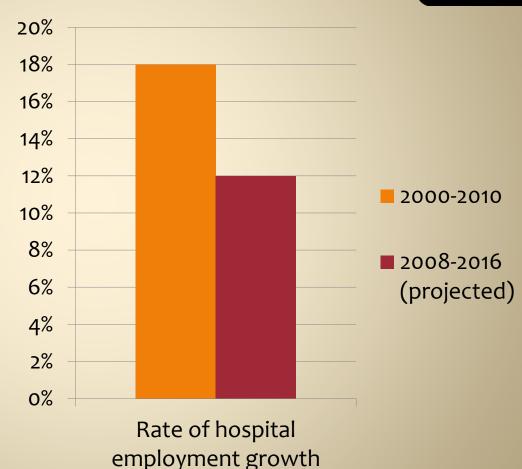
- For all practical purposes, osteopathic hospitals today are community general hospitals
- Once MDs and DOs integrated, separate hospitals became unnecessary
  - Found to be more costly and less productive than counterpart non-osteopathic hospitals
    - Many have closed

## **Hospital Employment**



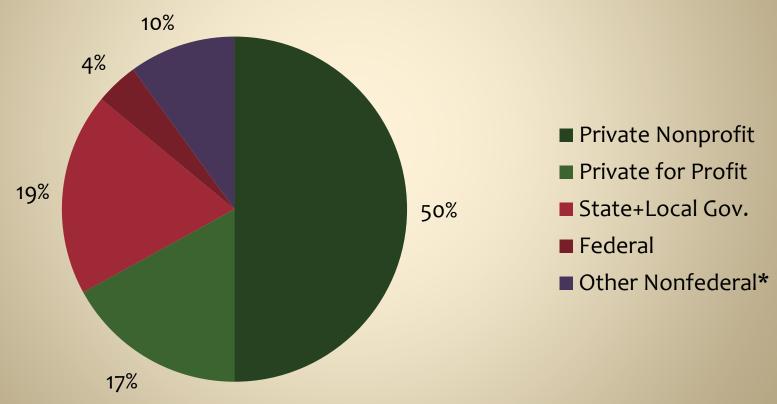
In 2010, US health care sector employed 16.4 million workers

- 4.7 of these were in hospitals
- This is 29% (almost a third!)



### Types of Hospitals, 2009

Total n. of hospitals=5,795



<sup>\*</sup> Mainly nonfederal psychiatric and long-term hospitals.

From Figure 8.3, page 196

## The Local Scene: Hospitals in Massachusetts

### **Local Hospitals**

General

- Public
  - Community
  - Not community
  - For-profit
  - Non-profit
- Allopathic
- Teaching
  - Major
    - Academic health center
  - Minor
- Urban

- Specialty
  - Psychiatric
  - Rehabilitation
  - Children's
- Private
  - For profit
  - Non-profit
- Osteopathic
- Not teaching

Rural



#### **Emerson Hospital on Concord, MA**

General

- Public
  - Community
  - Not community
  - For-profit
  - Non-profit
- Allopathic
- Teaching
  - Major
    - Academic health center
  - Minor
- Urban

- Specialty
  - Psychiatric
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- Not teaching





### **Newton-Wellesley Hospital**

General

- Public
  - Community
  - Not community
  - For-profit
  - Non-profit
- Allopathic
- Teaching
  - Major
    - Academic health center
  - Minor
- Urban

- Specialty
  - Psychiatric
  - Rehabilitation
  - Children's
- Private
  - For profit
  - Non-profit



Not teaching



Rural

# Spaulding Rehabilitation Center, Boston, MA

General

- Public
  - Community
  - Not community
  - For-profit
  - Non-profit
- Allopathic
- Teaching
  - Major
    - Academic health center
  - Minor
- Urban

- Specialty
  - Psychiatric
  - Rehabilitation
  - Children's
- Private
  - For profit
  - Non-profit



- Osteopathic
- Not teaching

Rural

#### Conclusion

- There are many different types of hospitals with many mixes of characteristics
- Each type of hospital plays a unique role in the U.S. health care system
- For different reasons, some type of hospitals are more common than others
  - Historical and current pressures cause certain types of hospitals to close in some eras, while other types are favored
- Hospitals will continue to evolve and will play an important role in the future of the U.S. HC system

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