

Report to the Legislature

2017 Charity Care in Washington Hospitals

January 2019

RCW 70.170

Hospital Charity Care and Financial Data
Health Systems Quality Assurance



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Executive Summary

The Department of Health is required per [RCW 71.70.060](#) to annually update the public on the status of charity care performed by hospitals in Washington State. Hospitals in Washington cannot deny patients access to care based on an inability to pay. They are required to develop a charity care policy, and to submit financial data regarding charity care to the Department of Health (department). This report summarizes the charity care data received from Washington hospitals for the hospital fiscal years (FY) ending in 2017.

The department has noted an increase in hospitals reporting charity care data for the first time since 2013. Washington hospitals reported \$772 million in charity care charges in FY 2017, which amounts to \$263 million in actual expenses based on a cost-to-charge formula¹. These charges reflect an increase of 28 percent from those reported in FY 2016, which was 5 percent more than FY 2015.

The amount of money spent on hospital charity care services in Washington varies widely with the highest reporting hospital, Harborview Medical Center, accounting for 10 percent of the statewide total charity care charges. The median amount per hospital was \$1.48 million; however, the average was much higher at \$7.87 million because several hospitals provided significant amounts of charity care.

For more information on charity care, including detailed reports by hospital, click [here](#):

¹ Since the data in this report are based on billed charges, not the actual payment expected by the hospital, calculating the approximate cost of providing charity care can be estimated by applying a cost-to-charge ratio. Multiplying the dollars by the cost-to-charge ratio results in an approximate cost of what hospitals actually spent providing this service to patients. The statewide cost-to-charge ratio is 0.34. Based on the \$772 million reported in charity care charges in FY 2017, the overall cost of providing charity care statewide was about \$263 million.

Background on charity care in Washington

What is charity care?

Charity care is defined in chapter [70.170 RCW](#) as “necessary hospital health care rendered to indigent persons, to the extent that the persons are unable to pay for the care or to pay deductibles or coinsurance amounts required by a third-party payer, as determined by the department.”² A person is considered indigent under [WAC 246-453-040](#) if family income is at or below 200 percent of the federal poverty guidelines. Washington law prohibits hospitals from denying patient access to care based on inability to pay or adopting admission policies that significantly reduce charity care.

Patients with family incomes below 100 percent of the federal poverty guidelines are entitled to hospital services at no cost. Hospitals must also provide discounted care to patients between 100 percent and 200 percent of the poverty guidelines using a sliding scale ([WAC 246-453-040](#)). These are minimum requirements. Hospitals may extend free or discounted care to patients earning more than these levels, and many do. The charity care policies for each hospital in Washington may be found [here](#).

What are hospitals required to report and when?

Hospitals are required by law to submit charity care policies to the department for review at least 30 days before policies are adopted. Hospitals are also required to submit quarterly and year-end financial reports to the department using a uniform system of accounting. The department uses these financial reports to report charity care data and trends for the state each year. Fiscal years vary among hospitals in Washington, with hospital fiscal years ending on March 31, June 30, September 30, or December 31.

Hospitals are required to report total patient services revenue, also called billed charges, and the amount of patient services revenue that is written off as charity care. Hospitals are also required to report bad debt. Bad debt is different from charity care and is defined as uncollectible amounts, excluding contractual adjustments, arising from failure to pay by patients whose care has not been classified as charity care. All of these data are reported as part of the hospital’s year-end financial report.

Hospitals report financial data to the department on an income statement. Below is an abbreviated example of an income statement to illustrate the relationships between the various revenue sources and expenses.

² Please note the definition of charity care changed effective October 1, 2018. The new definition reads: Charity care means medically necessary hospital health care rendered to indigent persons when third-party coverage, if any, has been exhausted, to the extent that the persons are unable to pay for the care or to pay deductibles or coinsurance amounts required by a third-party payer, as determined by the department.

| Hospital: Sample Community Hospital | Comment | Sample Hospital Revenue |
|--|--|--------------------------------|
| = TOTAL PATIENT SERVICES REVENUE | Inpatient and outpatient revenue equivalent to Total Billed Charges | 615,000,000 |
| - Provision for Bad Debts | Unpaid charges billed to patients who are not eligible for charity care, deducted from total revenue | 15,000,000 |
| - Contractual Adjustments | Reductions from billed charges negotiated by insurance companies, deducted from total revenue | 350,000,000 |
| - Charity Care | Unpaid charges billed to patients eligible for charity care, deducted from total revenue | 25,000,000 |
| = NET PATIENT SERVICE REVENUE | Actual patient revenue received | 225,000,000 |
| + OTHER OPERATING REVENUE | Actual revenue received for office rental, cafeteria income, etc. | 10,000,000 |
| = TOTAL OPERATING REVENUE | Actual patient revenue and other operating revenue | 235,000,000 |
| - TOTAL OPERATING EXPENSES | Total expenses for operating the hospital | 220,000,000 |
| = NET OPERATING REVENUE | Cash remaining after operation of patient services | 15,000,000 |
| +/- NON-OPERATING REVENUE-NET OF EXPENSES | Nonpatient revenue (investments, partnership fees) | 5,000,000 |
| = NET REVENUE BEFORE ITEMS LISTED BELOW | Operating plus nonoperating remainder | 20,000,000 |
| +/- EXTRAORDINARY ITEM | One time cash revenue or cash expenses | 0 |
| = NET REVENUE OR (EXPENSE) | Net cash remaining after all the transactions | 20,000,000 |

How do hospitals report charity care and how is it calculated?

The amount of charity care reported by hospitals is based on patient services revenue, also known as billed charges. These charges are based on the hospital's charge master rate sheet, which sets the price for every treatment and supply category a hospital uses. Every patient's total bill is comprised of the sum of the charge master rates of the various services or supplies during the stay before any adjustments based on insurance status. All patients, regardless of insurance status, receive the same billed charges for the same services.

The billed charges reflect a markup that varies among hospitals and is significantly higher than the amount the hospital actually expects to be paid. Medicaid and Medicare pay a set rate for services regardless of billed charges, and private insurance companies negotiate with hospitals for large discounts off the master rate sheet.

Charity care is the amount of billed charges an indigent patient incurs for appropriate hospital-based medical services. Since these charges include the markup, the dollar amount of charity care reported by hospitals overestimates the true cost of providing charity care to indigent patients. To estimate the true cost of providing charity care, the department applies a cost-to-charge ratio.³

2017 Washington state charity care data

Statewide charity care charges for hospital fiscal year 2017

This report describes data collected from licensed Washington hospitals for their fiscal years (FY) ending in 2017. FY 2017 includes data for the 12 months prior to the end of each hospital's fiscal calendar, including data for months in 2016 if the fiscal year starts prior to January 1, 2017.

All charity care data for FY 2017 were due to the department by June 30, 2018. Although the department provides reminders and follow-up by phone and in writing to hospitals that are late in reporting data, some hospitals still have not provided data for their 2017 fiscal year. For 2017, 94 of 101 hospitals reported charity care information in year-end financial reports in time to be used in this report. Of the 7 hospitals that did not provide year-end reports, we have provided annual financial estimates for 4 hospitals based on their quarterly financial reports or audited financial statements⁴. For the other 3 hospitals, no charity care data are available because no FY 2017 financial reports were submitted to the department⁵.

Overall, Washington hospitals reported \$772 million of charity care charges written off in FY 2017. These charges amounted to 1.18 percent of total patient services revenue and 3.12 percent of adjusted patient services revenue. Adjusted patient services revenue is the amount of revenue for non-Medicare and non-Medicaid payers, which includes private insurance and self-pay. The proportion of patients covered by Medicare or Medicaid varies widely among hospitals. The use of adjusted patient services revenue allows for a comparison of hospital charity care as a percent of privately sponsored patient revenue.⁶

³ The formula is total operating expenses (the actual cost of running the hospital and providing services) divided by total patient services revenue (billed charges).

⁴ PeaceHealth Southwest Medical Center, Lake Chelan Community Hospital, PMH Medical Center, and Ferry County Memorial Hospital.

⁵ Astria Sunnyside Community Hospital, Adventist Health Walla Walla General Hospital (closed in early 2017), and Othello Community Hospital.

⁶ Adjusted patient services revenue subtracts Medicare and Medicaid specific patient services revenue from total patient services revenue to allow meaningful comparisons of charity care provided among hospitals. The federal Centers for Medicare and Medicaid Services (CMS) prohibits hospitals from billing patients for the difference between the billed charges and the Medicare or Medicaid payment levels set by CMS. Therefore, patients covered by Medicare or Medicaid can't be charity care patients. The proportion of patients covered by Medicare or Medicaid varies widely among hospitals.

From the years 2007 through 2017, statewide charity care charges increased by 15.6 percent over the 10-year period. Statewide hospital total patient services revenue, or billed charges, increased by 112 percent (Table 1). However, from 2013 to 2017, charity care decreased 46 percent while total patient services increased 35 percent. As a percent of total hospital patient services revenue, charity care charges dropped from 2.9 percent to 1.2 percent from 2013 to 2017 (Figure 1 and Table 1).

Figure 1. Statewide Hospital Charity Care in Washington as a Percent of Total Hospital Patient Service Revenue and as a Percent of Adjusted Patient Service Hospital Revenue, Fiscal Year 2007 - 2017.

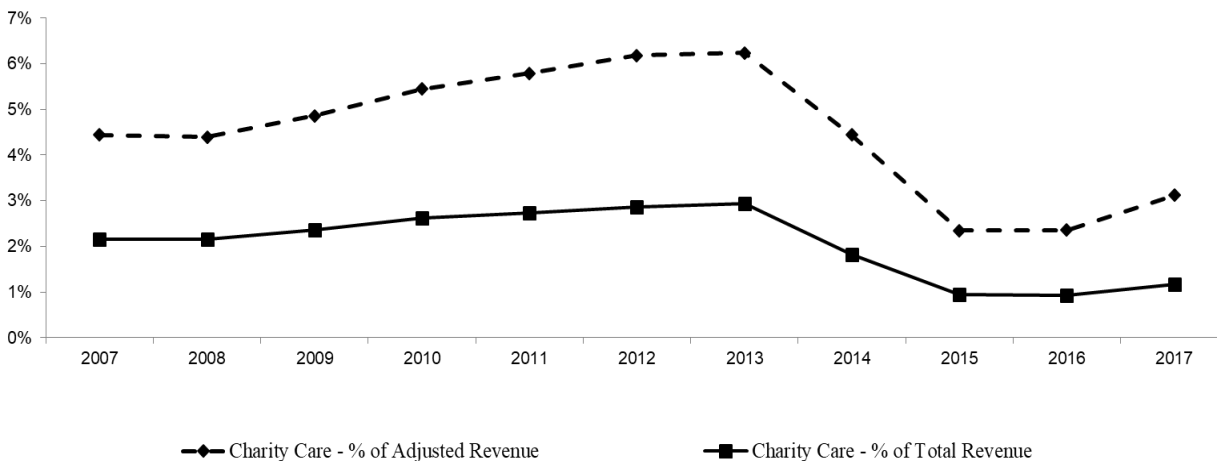


Figure 1 Notes: Adjusted patient service revenue is the total patient service hospital revenue minus Medicare and Medicaid patient service charges. Patient service revenue is the same as billed charges.

Table 1. Statewide Hospital Charity Care in Washington, Fiscal Year 2007-2017

| Year | in Millions | | | Charity Care | | Operating Margin % |
|------|--------------------------------|-----------------------------------|-------------------------------------|--------------------|-----------------------|--------------------|
| | Total Patient Services Revenue | Adjusted Patient Services Revenue | Total Charity Care (Billed Charges) | % of Total Revenue | % of Adjusted Revenue | |
| 2007 | \$27,502 | \$13,315 | \$592 | 2.2% | 4.4% | 5.5% |
| 2008 | \$30,847 | \$15,187 | \$668 | 2.2% | 4.4% | 5.3% |
| 2009 | \$34,884 | \$16,962 | \$824 | 2.4% | 4.9% | 6.1% |
| 2010 | \$38,172 | \$18,378 | \$1,001 | 2.6% | 5.4% | 5.6% |
| 2011 | \$41,182 | \$19,398 | \$1,123 | 2.7% | 5.8% | 3.4% |
| 2012 | \$44,728 | \$20,775 | \$1,285 | 2.9% | 6.2% | 5.5% |
| 2013 | \$48,482 | \$22,795 | \$1,422 | 2.9% | 6.2% | 5.0% |
| 2014 | \$51,993 | \$21,288 | \$944 | 1.8% | 4.4% | 4.6% |
| 2015 | \$57,703 | \$23,009 | \$540 | 0.9% | 2.3% | 5.6% |
| 2016 | \$61,782 | \$24,102 | \$568 | 0.9% | 2.4% | 2.7% |
| 2017 | \$65,506 | \$24,734 | \$772 | 1.2% | 3.1% | 2.1% |

Table 1 Notes: Adjusted patient service revenue is the total hospital revenue minus Medicare and Medicaid charges. Operating margin is the total hospital patient service operating revenue (net of deductions) minus total patient service operating expenses expressed as a percent. Note: Patient service revenue is the same as billed charges.

The Affordable Care Act and its initial impact on charity care

The Patient Protection and Affordable Care Act (ACA) was signed into law on March 23, 2010, putting into place provisions for expanding healthcare coverage, controlling healthcare costs, and improving the healthcare delivery system in the United States. The law, aimed at cost-containment, preventive wellness, and quality improvement, has been phased in with significant changes that may have impacted charity care taking effect in 2013, 2014, and 2017.

Three provisions of the ACA most visible to Washington patients—the individual mandate, Medicaid expansion, and creation of health benefit exchanges—all became effective in 2013 and 2014. A report published by the Washington State Office of Financial Management (OFM) estimates that 5.5 percent of the state’s population was uninsured in 2017, as compared to 5.8 percent in 2015 and 13.9 percent in 2012.⁷ The growth of the insured population in Washington led to a 48 percent decline in the amount of hospital charges written off to charity care from 2013 to 2017. Uninsured data for 2017 from OFM and at least two studies have shown modest increases in the uninsured population in both Washington and the U.S. as a whole.^{8,9} Should the number of uninsured patients increase, we can expect the utilization of charity care to increase.

Some of the elements of the ACA that took effect in 2017 were expiration of grandfathered non-ACA compliant insurance plans and elimination of some programs designed to help reduce risk insurers during the phase-in of the ACA. Each of those changes were expected to increase costs for employers and purchasers on the individual market.

A more significant part of the ACA that became effective in 2017 was full compliance with IRS section 501(r), which according to Becker’s Hospital Review continues “the IRS focus on the activities and policies of tax-exempt hospitals and the implication that tax-exempt hospitals must be required to ‘justify’ their tax-exempt status, especially with regard to serving patients unable to pay for the costs of their medical care. Internal audit and compliance plans will need to include oversight of these new policies.”¹⁰ Section 501(r) also imposed limitations on how much those hospitals may charge for emergency and medically necessary care, and placed restrictions on their billing and collections practices. If a hospital fails to comply with this section, it may be fined or lose its non-profit status. Although many of the charity care requirements of section 501(r) are similar to existing Washington regulations, hospitals’ efforts to comply with the new tax regulations may have increased the amount of charity care

⁷ OFM, Research Brief No. 89, “After a three year decline, Washington’s uninsured rate shows no change in 2017.”, <https://ofm.wa.gov/sites/default/files/public/dataresearch/researchbriefs/brief089.pdf>, December 2018

⁸ Sara R. Collins et al., “[First Look at Health Insurance Coverage in 2018 Finds ACA Gains Beginning to Reverse: Findings from the Commonwealth Fund Affordable Care Act Tracking Survey, Feb.–Mar. 2018](#),” *To the Point* (blog), Commonwealth Fund, May 1, 2018.

⁹ Dan Witters, “Uninsured Rate Rises in 17 States in 2017,” <https://news.gallup.com/poll/233597/uninsured-rate-rises-states-2017.aspx>, Gallup, May 9, 2018.

¹⁰ Becker’s Hospital Review “501r – What does it mean to you?”

provided. IRS enforcement of that section led to revocation of at least one unidentified hospital's non-profit status in 2017.

Effective January 1, 2019, Congress removed the fiscal penalty in the individual mandate, one of the key provisions of the ACA driving increased insurance coverage. Disagreement exists about the full impact of this change, but some believe that repeal or significant roll-back of ACA could cause charity care to revert to pre-2014 levels.^{11,12}

Distribution of charity care among Washington hospitals

Charity care varied widely among hospitals, ranging from \$0 to \$79 million. The median amount of charity care per hospital was \$1.5 million; however, the average was much higher at \$7.9 million as several hospitals provided significant charity care. The amount varied among hospitals in rural and urban areas and in different geographic areas of the state. These variations do not seem to be explained by population size. Some of the variation may be a function of the proportion of hospital revenue coming from Medicare and Medicaid.

Differences in charity care among hospitals may reflect demographic differences in service areas, hospital service availability, and charity care practices within the hospital. A high level of reported charity care, for example, may reflect greater need for charity care in the community. Likewise, a low level of charity care may reflect a relative absence of need for charity care in a hospital's service area.

Adjusting billed charges to determine actual cost of providing charity care

Because billed charges reflect mark-ups that vary between hospitals and are significantly higher than the expected payment, determining the actual cost of providing charity care to eligible patients is challenging. One way to estimate the cost of providing charity care is to use a cost-to-charge ratio¹³. The formula is total operating expenses (the actual cost of running the hospital and providing services) divided by total patient services revenue (billed charges).

As an example of how the cost-to-charge ratio works, if a hospital had billed charges of \$1,000,000 and a cost-to-charge ratio of .345, the actual cost for that hospital to treat patients is \$345,000. If that same hospital reported charity care billed charges of \$100,000, the cost of

¹¹ The Pew Charitable Trusts, "Costs of Care for Uninsured Would Rise Steeply with Repeal of ACA," <http://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2017/01/06/costs-of-care-for-uninsured-would-rise-steeply-with-repeal-of-aca>, January 6, 2017.

¹² Fritz Busch, Paul R. Hutchens, "The Individual Mandate Repeal: Will it Matter?" <http://www.milliman.com/insight/2018/The-individual-mandate-repeal-will-it-matter/> Milliman, March 1, 2018.

¹³ <http://medical-dictionary.thefreedictionary.com/hospital+cost-to-charge+ratio>

treating those patients is \$34,500. The higher the ratio, the closer the billed charges are to the actual cost of treating patients. This is only an estimate based on overall hospital performance. Washington hospitals' cost-to-charge ratios range from .15 to 1.46. The statewide average was .47 with a majority of hospitals between .29 and .59. Below are some examples of cost-to-charge ratios for Washington hospitals, including a high, average, and low cost-to-charge ratio. Cost-to-charge ratios for all hospitals are listed in Appendix 2.

| Hospital | Charity Care Charges | Cost-to-Charge Ratio | Estimated Actual Cost of Charity Care |
|------------------------------|----------------------|----------------------|---------------------------------------|
| UW Medicine/Harborview | 79 Million | .414 | 33 Million |
| Kadlec Medical Center | 27.2 Million | .337 | 9.2 Million |
| Quincy Valley Medical Center | 162,270 | .951 | 154,276 |

Contribution of all purchasers of care to hospital charity care

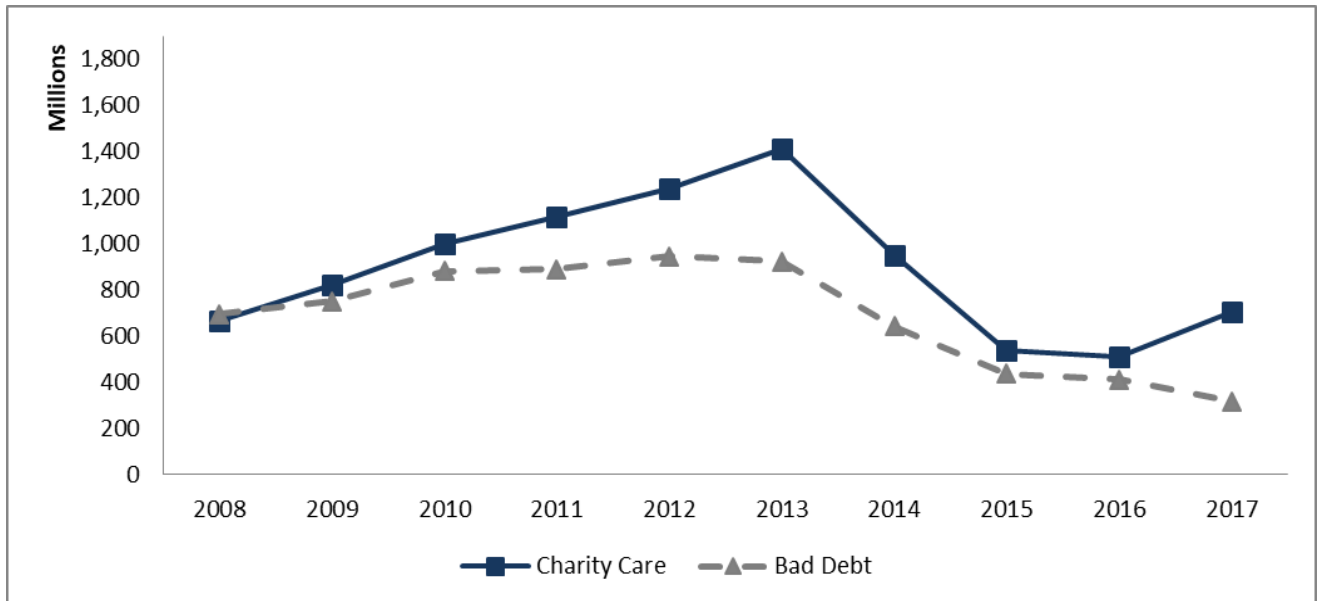
Charity care as a percent of adjusted (non-Medicare, non-Medicaid) revenue increased from 4.4 percent to 6.2 percent from FY 2007 through FY 2013, then declined to 4.4 percent in FY 2014, and declined to 2.3 percent in FY 2015, climbing again to 3.1% in 2017. Because charity care is unreimbursed, all payers – including insurance companies and patients who self-pay – contribute to covering the cost of charity care provided by the hospital. Throughout this time, fluctuations in the statewide operating margin, which is a measure of hospital profitability, do not appear to have adversely affected the amount of charity care provided in Washington (Table 1).

Uncompensated care in Washington

Uncompensated care includes both charity care and bad debt. Looking at uncompensated care gives us a bigger picture of the impact of the ACA and a way to compare Washington to other states.

In 2017, the amount of charity care increased for the first time since implementation of the ACA, bad debt continued to decline. Both charity care and bad debt had been increasing over the decade previous to implementation of the ACA. In recent years, charity care was rising faster than bad debt (Figure 2). Both had more than doubled between FY 2004 and FY 2013.

Figure 2. Hospital Charity Care and Bad Debt Patient Service Charges in Washington, Fiscal Year 2008 - 2017



How does Washington compare to the U.S. in uncompensated care?

No national charity care data are available to draw comparisons between Washington and the rest of the U.S. However, national data are available for uncompensated care, which includes both charity care and bad debt. The national uncompensated care number is built using a formula that includes a cost-to-charge ratio that translates the billed charges written off to uncompensated care into a “cost” or expense. The result is a proxy with which uncompensated care expenses are then compared to total operating costs, not total patient services revenue. The Washington uncompensated care number is built using the same formula.

Uncompensated care as a percent of hospital expenses is lower in Washington than it is in the U.S. as a whole (Figure 3). In both Washington and the U.S., uncompensated care remained relatively steady over most of the past 10 years, declining from 2013 onward. In the U.S., uncompensated care accounted for 4.2 percent of hospital expenses in FY 2016, the most recent year of data available. In Washington, uncompensated care accounted for 1.75 percent of hospital expenses in FY 2017. (Figure 3).

Figure 3. Hospital Uncompensated Care in Washington and the U.S. as a Percent of Hospital Expenses, Fiscal Years 2007 - 2017

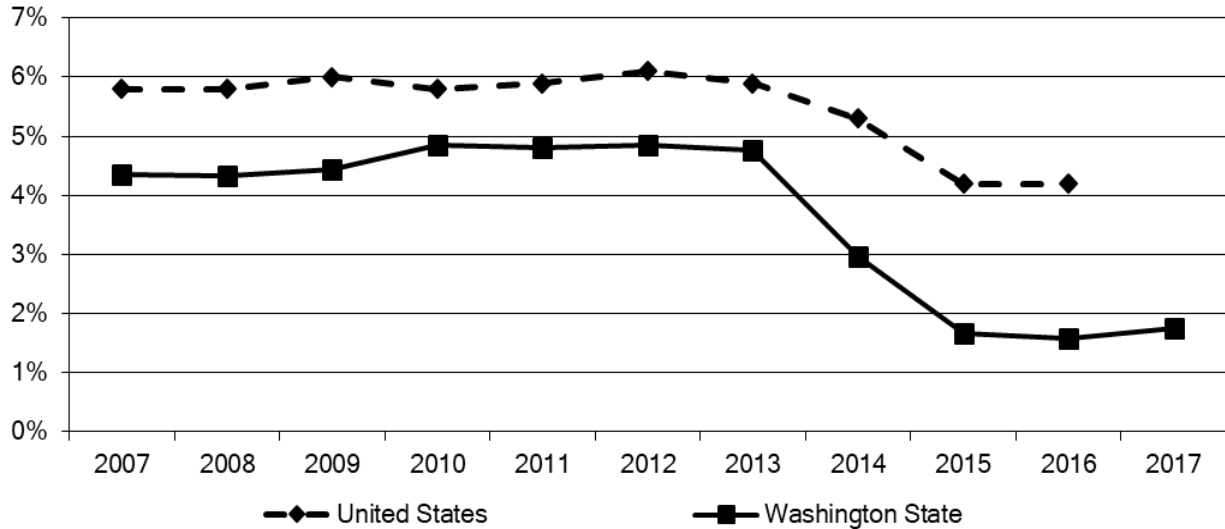


Figure 3 Notes: Uncompensated care includes bad debt and charity care. Uncompensated care as a percent of hospital expenses is calculated by multiplying uncompensated care by the ratio of total expenses to gross patient and other operating revenues. Uncompensated care data for 2017 are not yet available for the U.S. The U.S. data were derived from an American Hospital Association report¹⁴.

Summary

Implementation of the ACA has changed the landscape of charity care in Washington. More patients have health coverage, either through Medicaid expansion or through purchase of private coverage. As a result, Washington saw the first decline in the amount of charity care reported by hospitals since the department began gathering these data in 1989. That decline, however, has ceased and charity care is increasing again, though it remains well below 2013 levels.

Effective January 1, 2019, Congress removed the fiscal penalty in the individual mandate, one of the key provisions of the ACA driving increased insurance coverage. Disagreement exists about the full impact of this change but some believe that repeal or significant roll-back of ACA could cause charity care to revert to pre-2014 levels.^{15,16}

¹⁴ <https://www.aha.org/guidesreports/2018-05-22-trendwatch-chartbook-2018>

¹⁵ The Pew Charitable Trusts, "Costs of Care for Uninsured Would Rise Steeply with Repeal of ACA," <http://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2017/01/06/costs-of-care-for-uninsured-would-rise-steeply-with-repeal-of-aca>, January 6, 2017.

¹⁶ Fritz Busch, Paul R. Hutchens, "The Individual Mandate Repeal: Will it Matter?" <http://www.milliman.com/insight/2018/The-individual-mandate-repeal-will-it-matter/> Milliman, March 1, 2018.

About this report

The department has issued an annual report since 1990 as directed by chapter 70.170 of the Revised Code of Washington (RCW). Your feedback is important to us. Submit your comments by email at charitycare@doh.wa.gov to help us continue to improve the charity care report.

Appendix

Total Patient Service Revenue, Adjusted Patient Service Revenue, and Amount of Charity Care as a Percent for Washington Hospital Fiscal Years Ending During Calendar Year 2017

| Revenue Categories - Patient Service Revenue - (Billed Charges) | | | | | | | | |
|---|--|-------------------------------|-------------------------|-------------------------|----------------------------------|--------------------|--|---|
| Lic. No | Region/Hospital | Total Patient Service Revenue | (Less) Medicare Revenue | (Less) Medicaid Revenue | Adjusted Patient Service Revenue | Charity Care | Charity Care as a % of Total Patient Service Revenue | Charity Care as a % of Adjusted Patient Service Revenue |
| KING COUNTY (N=22) | | | | | | | | |
| 921 | Cascade Behavioral Health | 61,044,738 | 31,544,013 | 18,522,875 | 10,977,850 | 83,433 | 0.14% | 0.76% |
| 126 | CHI/Highline Community Hospital | 857,308,312 | 360,708,171 | 227,159,732 | 269,440,409 | 17,424,658 | 2.03% | 6.47% |
| 202 | CHI/Regional Hospital | 41,459,895 | 29,484,456 | 1,591,891 | 10,383,548 | 462,781 | 1.12% | 4.46% |
| 35 | CHI/Saint Elizabeth Hospital | 184,969,185 | 71,561,688 | 35,529,219 | 77,878,278 | 1,204,773 | 0.65% | 1.55% |
| 201 | CHI/Saint Francis Community Hospital | 1,102,738,034 | 423,628,107 | 257,395,702 | 421,714,225 | 17,863,126 | 1.62% | 4.24% |
| 164 | EvergreenHealth/Kirkland | 1,804,111,322 | 748,671,088 | 183,089,580 | 872,350,654 | 8,634,623 | 0.48% | 0.99% |
| 148 | Kindred Hospital Seattle | 124,123,496 | 60,645,126 | 3,155,581 | 60,322,789 | - | 0.00% | 0.00% |
| 183 | MultiCare/Auburn Regional Medical Center | 762,546,918 | 317,701,463 | 204,352,933 | 240,492,522 | 18,597,538 | 2.44% | 7.73% |
| 919 | Navos | 19,767,522 | 4,641,785 | 12,011,800 | 3,113,937 | 363,839 | 1.84% | 11.68% |
| 131 | Overlake Hospital Medical Center | 1,446,629,627 | 644,648,044 | 92,691,143 | 709,290,440 | 15,687,999 | 1.08% | 2.21% |
| 3 | Providence/Swedish - Cherry Hill | 1,747,686,562 | 895,163,997 | 223,435,802 | 629,086,763 | 19,349,851 | 1.11% | 3.08% |
| 1 | Providence/Swedish - First Hill | 4,173,195,774 | 1,541,983,081 | 646,770,257 | 1,984,442,436 | 31,461,621 | 0.75% | 1.59% |
| 210 | Providence/Swedish - Issaquah | 652,936,581 | 233,272,976 | 69,961,201 | 349,702,404 | 6,658,414 | 1.02% | 1.90% |
| 204 | Seattle Cancer Care Alliance | 927,980,845 | 309,453,758 | 96,002,503 | 522,524,584 | 6,691,297 | 0.72% | 1.28% |
| 14 | Seattle Children's Hospital | 2,332,540,244 | 32,441,581 | 1,008,623,685 | 1,291,474,978 | 23,248,291 | 1.00% | 1.80% |
| 195 | Snoqualmie Valley Hospital | 46,628,750 | 25,495,232 | 4,186,271 | 16,947,247 | 830,073 | 1.78% | 4.90% |
| 904 | UHS/BHC Fairfax Hospital | 142,289,257 | 23,964,500 | 54,961,200 | 63,363,557 | 232,082 | 0.16% | 0.37% |
| 29 | UW Medicine/Harborview Medical Center | 2,354,013,203 | 688,487,038 | 775,230,151 | 890,296,014 | 79,328,399 | 3.37% | 8.91% |
| 130 | UW Medicine/Northwest Hospital | 1,105,609,632 | 513,670,836 | 157,634,318 | 434,304,478 | 12,843,266 | 1.16% | 2.96% |
| 128 | UW Medicine/University of Washington | 2,664,941,290 | 901,986,004 | 460,681,517 | 1,302,273,769 | 28,801,450 | 1.08% | 2.21% |
| 155 | UW Medicine/Valley Medical Center | 1,831,406,708 | 665,948,534 | 414,493,040 | 750,965,134 | 21,407,021 | 1.17% | 2.85% |
| 10 | Virginia Mason Medical Center | 2,234,483,678 | 1,012,891,483 | 165,756,889 | 1,055,835,306 | 18,954,520 | 0.85% | 1.80% |
| KING COUNTY TOTALS | | 26,618,411,573 | 9,537,992,961 | 5,113,237,290 | 11,967,181,322 | 330,129,055 | 1.24% | 2.76% |
| PUGET SOUND REGION (Less King Co. N=23) | | | | | | | | |
| 106 | Cascade Valley Hospital | 137,589,546 | 46,596,672 | 38,790,525 | 52,202,349 | (480,026) | -0.35% | -0.92% |
| 142 | CHI/Harrison Memorial Hospital | 1,981,711,335 | 1,009,766,028 | 353,151,728 | 618,793,579 | 11,451,781 | 0.58% | 1.85% |
| 209 | CHI/Saint Anthony Hospital | 683,059,403 | 341,753,308 | 107,961,556 | 233,344,539 | 5,309,895 | 0.78% | 2.28% |
| 132 | CHI/Saint Clare Hospital | 812,320,098 | 353,722,043 | 237,920,613 | 220,677,442 | 13,866,428 | 1.71% | 6.28% |
| 32 | CHI/Saint Joseph Medical Center - Tacoma | 2,806,799,621 | 1,291,401,512 | 633,612,956 | 881,785,153 | 29,579,984 | 1.05% | 3.35% |
| 104 | EvergreenHealth/Monroe | 120,415,294 | 40,926,915 | 30,038,556 | 49,449,823 | 586,514 | 0.49% | 1.19% |
| 54 | Forks Community Hospital | 44,307,496 | 16,529,684 | 13,396,416 | 14,381,396 | 442,399 | 1.00% | 3.08% |
| 134 | Island Hospital | 230,567,912 | 91,497,996 | 13,345,435 | 125,724,481 | 628,277 | 0.27% | 0.50% |
| 85 | Jefferson Healthcare | 209,298,397 | 122,904,753 | 33,580,727 | 52,812,917 | 1,437,426 | 0.69% | 2.72% |
| 81 | MultiCare/Good Samaritan Hospital | 1,842,875,441 | 820,037,623 | 373,157,084 | 649,680,734 | 32,969,697 | 1.79% | 5.07% |
| 175 | MultiCare/Mary Bridge Children's Health | 749,940,476 | 275,060 | 446,942,056 | 302,723,360 | 6,996,694 | 0.93% | 2.31% |
| 176 | MultiCare/Tacoma General - Allenmore | 3,078,609,799 | 1,224,208,039 | 833,095,775 | 1,021,305,985 | 58,317,848 | 1.89% | 5.71% |
| 38 | Olympic Medical Center | 364,179,825 | 211,809,749 | 61,081,559 | 91,288,517 | 2,655,122 | 0.73% | 2.91% |
| 211 | PeaceHealth/Peace Island Medical Center | 23,045,826 | 11,254,327 | 3,365,837 | 8,425,662 | 215,166 | 0.93% | 2.55% |
| 145 | PeaceHealth/Saint Joseph Hospital | 1,328,572,335 | 682,922,521 | 255,347,307 | 390,302,507 | 12,711,920 | 0.96% | 3.26% |
| 206 | PeaceHealth/United General Hospital | 104,618,675 | 53,056,696 | 21,572,172 | 29,989,807 | 953,946 | 0.91% | 3.18% |
| 84 | Providence/Regional Medical Center Everett | 2,260,528,776 | 1,057,336,401 | 406,140,853 | 797,051,522 | 36,952,894 | 1.63% | 4.64% |
| 138 | Providence/Swedish - Edmonds | 854,167,639 | 383,951,024 | 155,044,237 | 315,172,378 | 15,094,108 | 1.77% | 4.79% |
| 207 | Skagit Regional Health | 1,082,660,868 | 546,706,970 | 223,843,425 | 312,110,473 | 4,621,544 | 0.43% | 1.48% |
| 924 | Smokey Point Behavioral Hospital | 15,707,350 | 3,057,400 | 597,550 | 12,052,400 | 17,000 | 0.11% | 0.14% |
| 922 | UHS/BHC Fairfax Hospital - North | 28,653,778 | 7,750,400 | 12,294,800 | 8,608,578 | 60,311 | 0.21% | 0.70% |
| 923 | UHS/BHC Fairfax Hospital - Monroe | 21,606,965 | 10,211,600 | 2,094,400 | 9,300,965 | 43,919 | 0.20% | 0.47% |
| 156 | WhidbeyHealth | 260,885,263 | 117,821,872 | 38,212,724 | 104,850,667 | 633,152 | 0.24% | 0.60% |
| PUGET SOUND REGION TOTALS | | 19,042,122,118 | 8,445,498,593 | 4,294,588,291 | 6,302,035,234 | 235,065,999 | 1.23% | 3.73% |

**Total Patient Service Revenue, Adjusted Patient Service Revenue, and Amount of Charity Care as a Percent
for Washington Hospital Fiscal Years Ending During Calendar Year 2017**

| Revenue Categories - Patient Service Revenue - (Billed Charges) | | | | | | | | |
|---|--|--|-------------------------|-------------------------|----------------------------------|-------------------|--|---|
| Lic. No | Region/Hospital | Total Patient Service Revenue | (Less) Medicare Revenue | (Less) Medicaid Revenue | Adjusted Patient Service Revenue | Charity Care | Charity Care as a % of Total Patient Service Revenue | Charity Care as a % of Adjusted Patient Service Revenue |
| SOUTHWEST WASHINGTON REGION (N=14) | | | | | | | | |
| 197 | Capella/Capital Medical Center | 530,577,937 | 210,680,748 | 7,513,706 | 312,383,483 | 1,046,493 | 0.20% | 0.34% |
| 63 | Grays Harbor Community Hospital | 395,032,177 | 182,158,641 | 103,775,941 | 109,097,595 | 854,433 | 0.22% | 0.78% |
| 8 | Klickitat Valley Hospital | 43,007,168 | 19,475,468 | 11,951,671 | 11,580,029 | 283,395 | 0.66% | 2.45% |
| 208 | Legacy/Salmon Creek Hospital | 884,050,619 | 379,803,394 | 207,770,708 | 296,476,517 | 20,853,978 | 2.36% | 7.03% |
| 152 | Mason General Hospital | 218,892,827 | 91,966,336 | 67,149,862 | 59,776,629 | 2,905,052 | 1.33% | 4.86% |
| 173 | Morton General Hospital | 41,536,569 | 22,724,591 | 10,128,307 | 8,683,671 | 221,214 | 0.53% | 2.55% |
| 79 | Ocean Beach Hospital | 48,069,214 | 13,449,393 | 4,828,633 | 29,791,188 | 480,851 | 1.00% | 1.61% |
| 26 | PeaceHealth/Saint John Medical Center | 717,656,940 | 354,769,874 | 192,012,970 | 170,874,096 | 5,831,845 | 0.81% | 3.41% |
| 170 | PeaceHealth/Southwest Medical Center* | 1,684,702,910 | 805,404,083 | 399,904,746 | 479,394,081 | 17,541,647 | 1.04% | 3.66% |
| 191 | Providence/Centralia Hospital | 667,791,284 | 342,017,292 | 154,338,572 | 171,435,420 | 12,956,821 | 1.94% | 7.56% |
| 159 | Providence/Saint Peter Hospital | 1,915,639,077 | 1,053,351,610 | 316,025,278 | 546,262,189 | 23,169,720 | 1.21% | 4.24% |
| 96 | Skyline Hospital | 28,354,951 | 13,333,309 | 1,037,225 | 13,984,417 | 139,435 | 0.49% | 1.00% |
| 186 | Summit Pacific Medical Center | 68,334,014 | 28,205,936 | 20,692,577 | 19,435,501 | 384,930 | 0.56% | 1.98% |
| 56 | Willapa Harbor Hospital | 30,877,991 | 15,392,456 | 6,625,439 | 8,860,096 | 381,802 | 1.24% | 4.31% |
| SOUTHWEST WASH REGION TOTALS | | 7,274,523,678 | 3,532,733,131 | 1,503,755,635 | 2,238,034,912 | 87,051,616 | 1.20% | 3.89% |
| CENTRAL WASHINGTON REGION (N=21) | | | | | | | | |
| 915 | Ascension/Lourdes Counseling Center | 45,965,371 | 7,342,329 | 28,375,907 | 10,247,135 | 39,457 | 0.09% | 0.39% |
| 22 | Ascension/Lourdes Medical Center | 276,286,793 | 113,413,320 | 54,100,249 | 108,773,224 | 3,552,486 | 1.29% | 3.27% |
| 198 | Astria/Sunnyside Community Hospital | Hospital Late in Reporting to Department of Health | | | | | | |
| 199 | Astria/Toppenish Community Hospital*** | 33,808,825 | 5,527,641 | 7,929,884 | 20,351,300 | 86,857 | 0.26% | 0.43% |
| 102 | Astria/Regional Medical Center*** | 187,187,948 | 70,508,758 | 7,640,217 | 109,038,973 | 1,126,121 | 0.60% | 1.03% |
| 158 | Cascade Medical Center | 19,889,990 | 10,667,804 | 2,432,710 | 6,789,476 | 320,777 | 1.61% | 4.72% |
| 45 | Columbia Basin Hospital | 21,841,679 | 9,317,143 | 6,164,469 | 6,360,067 | 40,791 | 0.19% | 0.64% |
| 168 | Confluence/Central Washington Hospital | 794,290,460 | 436,975,077 | 143,912,609 | 213,402,774 | 5,207,842 | 0.66% | 2.44% |
| 205 | Confluence/Wenatchee Valley Hospital | 589,343,483 | 251,745,891 | 110,546,848 | 227,050,744 | 4,092,907 | 0.69% | 1.80% |
| 150 | Coulee Community Hospital | 45,739,632 | 16,144,479 | 12,591,103 | 17,004,050 | 133,960 | 0.29% | 0.79% |
| 140 | Kittitas Valley Hospital | 131,421,485 | 54,517,469 | 24,098,777 | 52,805,239 | 1,109,403 | 0.84% | 2.10% |
| 165 | Lake Chelan Community Hospital* | 46,097,433 | 17,977,952 | 9,059,101 | 19,060,380 | 398,385 | 0.86% | 2.09% |
| 147 | Mid Valley Hospital | 63,063,997 | 26,217,372 | 18,271,754 | 18,574,871 | 865,660 | 1.37% | 4.66% |
| 107 | North Valley Hospital | 38,491,932 | 14,749,081 | 12,904,245 | 10,838,606 | 439,901 | 1.14% | 4.06% |
| 46 | PMH Medical Center* | 103,262,889 | 34,724,954 | 32,648,592 | 35,889,343 | 1,527,798 | 1.48% | 4.26% |
| 161 | Providence/Kadlec Medical Center | 1,782,254,058 | 730,122,827 | 385,792,755 | 666,338,476 | 27,165,723 | 1.52% | 4.08% |
| 129 | Quincy Valley Hospital | 8,587,383 | 1,884,209 | 1,377,986 | 5,325,188 | 162,270 | 1.89% | 3.05% |
| 78 | Samaritan Hospital | 216,378,956 | 66,059,209 | 69,022,633 | 81,297,114 | 2,636,350 | 1.22% | 3.24% |
| 23 | Three Rivers Hospital | 25,704,905 | 9,287,666 | 1,539,064 | 14,878,175 | 1,054,291 | 4.10% | 7.09% |
| 39 | Trios Health | 502,877,948 | 205,149,436 | 111,448,334 | 186,280,178 | 2,181,352 | 0.43% | 1.17% |
| 58 | Virginia Mason Memorial Hospital | 1,175,431,833 | 515,266,037 | 261,815,616 | 398,350,180 | 14,839,109 | 1.26% | 3.73% |
| CENTRAL WASH REGION TOTALS | | 6,107,927,000 | 2,597,598,654 | 1,301,672,853 | 2,208,655,493 | 66,981,440 | 1.10% | 3.03% |

**Total Patient Service Revenue, Adjusted Patient Service Revenue, and Amount of Charity Care as a Percent
for Washington Hospital Fiscal Years Ending During Calendar Year 2017**

| Revenue Categories - Patient Service Revenue - (Billed Charges) | | | | | | | | |
|---|---|--|-------------------------|-------------------------|----------------------------------|--------------------|--|---|
| Lic. No | Region/Hospital | Total Patient Service Revenue | (Less) Medicare Revenue | (Less) Medicaid Revenue | Adjusted Patient Service Revenue | Charity Care | Charity Care as a % of Total Patient Service Revenue | Charity Care as a % of Adjusted Patient Service Revenue |
| EASTERN WASHINGTON REGION (N=21) | | | | | | | | |
| 43 | Adventist West/Walla Walla General Hospital | Hospital Late in Reporting to Department of Health | | | | | | |
| 141 | Dayton General Hospital | 21,543,773 | 9,499,647 | 2,347,562 | 9,696,564 | 69,992 | 0.32% | 0.72% |
| 111 | East Adams Rural Hospital | 10,384,132 | 3,974,620 | 1,095,116 | 5,314,396 | 42,587 | 0.41% | 0.80% |
| 167 | Ferry County Memorial Hospital** | 14,639,952 | | | | 148,615 | 1.02% | |
| 82 | Garfield County Memorial Hospital | 5,413,141 | 2,162,771 | 1,537,208 | 5,314,396 | 10,402 | 0.19% | 0.20% |
| 137 | Lincoln Hospital | 27,251,079 | 14,112,556 | 5,796,783 | 7,341,740 | 103,073 | 0.38% | 1.40% |
| 37 | MultiCare/Deaconess Hospital | 1,473,112,938 | 705,126,964 | 321,424,144 | 446,561,830 | 2,838,831 | 0.19% | 0.64% |
| 180 | MultiCare/Valley Hospital | 663,204,244 | 294,693,101 | 143,835,252 | 224,675,891 | 2,086,201 | 0.31% | 0.93% |
| 21 | Newport Community Hospital | 47,516,224 | 17,291,560 | 14,067,068 | 16,157,596 | 489,602 | 1.03% | 3.03% |
| 80 | Odesssa Memorial Hospital | 5,176,704 | 1,332,830 | 1,310,609 | 2,533,265 | 17,259 | 0.33% | 0.68% |
| 125 | Othello Community Hospital | Hospital Late in Reporting to Department of Health | | | | | | |
| 139 | Providence/Holy Family Hospital | 603,951,193 | 285,951,054 | 153,598,699 | 164,401,440 | 8,621,928 | 1.43% | 5.24% |
| 193 | Providence/Mount Carmel Hospital | 105,832,301 | 54,092,708 | 24,604,092 | 27,135,501 | 1,662,337 | 1.57% | 6.13% |
| 162 | Providence/Sacred Heart Medical Center | 2,462,628,605 | 1,074,370,256 | 627,704,386 | 760,553,963 | 22,494,418 | 0.91% | 2.96% |
| 194 | Providence/Saint Joseph's Hospital | 45,086,774 | 24,853,390 | 12,192,423 | 8,040,961 | 688,685 | 1.53% | 8.56% |
| 50 | Providence/Saint Mary Medical Center | 534,227,534 | 271,653,306 | 85,863,102 | 176,711,126 | 7,350,364 | 1.38% | 4.16% |
| 172 | Pullman Regional Hospital | 114,883,526 | 38,992,012 | 14,497,813 | 61,393,701 | 870,002 | 0.76% | 1.42% |
| 157 | Saint Luke's Rehabilitation Institute | 105,475,919 | 57,948,895 | 19,730,391 | 27,796,633 | 438,384 | 0.42% | 1.58% |
| 42 | Shriners Hospital for Children - Spokane | 36,460,482 | 65,346 | 18,100,772 | 18,294,364 | 2,532,969 | 6.95% | 13.85% |
| 108 | Tri-State Memorial Hospital | 149,462,132 | 89,405,801 | 15,615,746 | 44,440,585 | 1,822,022 | 1.22% | 4.10% |
| 153 | Whitman Medical Center | 36,543,954 | 17,772,883 | 6,968,306 | 11,802,765 | 69,907 | 0.19% | 0.59% |
| EASTERN WASH REGION TOTALS | | 6,462,794,607 | 2,963,299,700 | 1,470,289,472 | 2,018,166,717 | 52,357,578 | 0.81% | 2.59% |
| STATEWIDE TOTALS (N=101) | | 65,505,778,976 | 27,077,123,039 | 13,683,543,541 | 24,734,073,678 | 771,585,688 | 1.18% | 3.12% |

*Hospital late in reporting final data to Department of Health. Amounts displayed are estimates calculated from quarterly reports.

**Hospital late in reporting final data to Department of Health. Amounts displayed are estimates calculated from audited financial statements.

***Partial year data due to change of ownership during the reporting period

