Republican Health Care Bill Threatens Rural Hospitals and the Older Americans and Economies They Support in North Carolina

Rural hospitals play a critical role in ensuring that Americans and their families have access to needed health care services. Given that rural communities tend to be older, rural hospitals are particularly important for older Americans in these communities. Rural hospitals are also often a critical driver of economic activity in the areas in which they are located, serving as an important employer and providing good-paying jobs that inject money into local communities.

Overall, the health care and social services sector employs 17% of all workers in rural counties. At the center of rural health care delivery systems are often rural hospitals. More than 40% of rural counties rely on hospitals alone for more than 10% of their total employment. The average pay of rural hospital employees is 43% higher than the average pay of other workers in the same counties.

The Republican health care bill – which will cut $834 billion over 10 years from Medicaid and undermine the private health insurance market in rural areas by cutting premium assistance – will hurt rural hospitals. Medicaid is a critical source of revenue for rural hospitals, which on average have operating margins of less than 1%. Medicaid revenues and related funding are responsible for, on average, more than 10% of rural hospitals’ net revenues.

The Republican health care bill’s deep cuts to Medicaid funding will jeopardize health care coverage and services for millions living in rural areas – including many vulnerable seniors – and will put at risk the jobs and economic growth rural hospitals support across the nation.

North Carolina By the Numbers

- The health care and social services sector employs 18.7% of all workers in rural areas in North Carolina.
- In North Carolina, hospitals employ 6.3% of all employees in rural counties that report having any hospital employment.
- Medicaid revenues and related funding make up 11.6% of rural hospitals’ net revenues in North Carolina.

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1 Unless otherwise noted, all figures presented are the product of Senate Joint Economic Committee and Senate Aging Committee calculations. See “TrumpCare Threatens Rural Hospitals,” June, 2017, for details of analysis and data sources.
3 Ibid. See also “TrumpCare Threatens Rural Hospitals.” The term ‘related funding’ refers to Disproportionate Share Hospital (DSH) Payments.