Notes on the Survey

The 2020 edition of *AHA Hospital Statistics*TM draws its data from the 2018 AHA Annual Survey of Hospitals. It is the statistical complement to the 2020 edition of the *AHA Guide*[®], which contains selected data about individual hospitals.

The AHA Survey was mailed to all hospitals, in the U.S. and its associated areas: American Samoa, Guam, the Marshall Islands, Puerto Rico, and the Virgin Islands. U.S. government hospitals located outside the U.S. were not included. Overall, the average response rate over the past five years has been approximately 83 percent.

Reporting Period

In completing the survey, hospitals were requested to report data for a full year, in accord with their fiscal year, ending in 2018. The statistical table present data reported or estimated for a 12-month period, except for data on personnel, which represent situations as they existed at the end of the reporting period.

Respondents

Data for Tables 1 and 2 include 6,146 hospitals in the U.S. Data on community hospitals (nonfederal, short-term general and other special hospitals) only are presented in Tables 3-6, and Table 8. It is important to note that the hospitals included in *AHA Hospital Statistics* are not necessarily identical to those included in *AHA Guide*. The institutions listed in the 2020 edition of *AHA Guide* include all of those institutions CMS certified, or Joint Commission accredited as of September 2019. Tables 1-6 in *AHA Hospital Statistics* present data for hospitals that were in operation during the 12-month reporting period ending 2018.

Estimates

Estimates were made of data for nonreporting hospitals and for reporting hospitals that submitted incomplete AHA Annual Survey questionnaires. Estimates were not made for beds, bassinets and facilities and services. Data for beds and bassinets of nonreporting hospitals were based on the most recent information from those hospitals. (Note that in all statistical tables, whenever bed-size categories are listed, all eight categories appear, whether or not there are hospitals in every category.)

Missing revenue, expenses, admissions, births, inpatient days, surgical operations, outpatient visits, and full-time-equivalent personnel values are estimates from regression models. For all other variables the estimates were based on ratios such as per bed averages derived from data reported by hospitals similar in size, control, major service provided, length of stay, and geographical characteristics to the hospitals that did not report this information.