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The Economic Impact of University Health Systems Of Eastern Carolina

By

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EXECUTIVE SUMMARY

University Health Systems of Eastern Carolina consists of a group of six hospitals that serve the medical and health needs of 1.2 million individuals in a 29-county region in northeastern North Carolina. UHS is exceedingly diverse. Its largest and most complex medical center, Pitt County Memorial Hospital (PCMH) in Greenville, offers almost 800 beds for patients, and is affiliated with the Brody School of Medicine at East Carolina University. PCMH performs more than 25,000 surgeries annually. UHS' smallest hospital, Bertie Memorial in Windsor, has only six beds and annual revenues of less than \$25 million. [This report also gauges the economic impact of three subsidiaries, Physician Practice Management \(PPM\), HealthAccess \(wellness, home health and hospice care\), and the Surgicenter.](#)

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The centerpiece of the UHS system is Pitt County Memorial Hospital. PCMH offers a full range of medical services and has identified six distinct centers of excellence: (1) cardiovascular medicine and research; (2) its children's hospital; (3) cancer research and treatment; (4) patient rehabilitation; (5) trauma and critical care; and, (6) medical challenges relating to women. The Cardiovascular Center is well regarded nationally. UHS also offers a wide range of additional services that include the support of physicians' practices, home health, a wide variety of community health and education programs, and the like.

PCMH, with [5,238](#) FTE employees, is the largest single employer in Pitt County and, indeed, is the largest single employer in the region. East Carolina University ranks second with 4,636 FTE employees. The UHS average salary per FTE employee ([\\$45,389](#)) ranks second in the region behind ECU (\$65,544) and is [39.9](#) percent above the regional average.

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The economic impact of UHS can be divided into six categories: (1) direct expenditures on personnel in the form of salaries and fringe benefits; (2) equipment expenditures; (3) other operating expenditures such as the purchase of drugs and supplies, utilities, and the like; (4) non-operating expenditures such as interest on obligations; (5) gifts made to public and charitable organizations, both financial and in-kind, plus the value of time volunteered by UHS employees to civic and charitable organizations; and, (6) the ripple effect of these expenditures through the regional economy as these dollars are spent and re-spent.

When the economic ripple effects of its expenditures are taken into account, PCMH and its direct subsidiaries have an annual economic impact of \$1.41 billion, which is 25.41 percent of the value of the annual gross product of Pitt County. Along with East Carolina University, PCMH provides the economic spark for Pitt County and most of

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eastern North Carolina. Together, they are responsible for more than one-half of the economic activity in Pitt County.

The five regional hospitals that are members of UHS also have significant economic impacts on the counties in which they are located. Roanoke-Chowan Hospital, for example, has an annual economic impact of \$102 million and accounts for one of every six dollars of economic activity, directly and indirectly, within Hertford County.

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Overall, the annual economic impact of UHS is \$1.74 billion. With economic ripple effects taken into account, the health system generates 17.04 percent of the total economic activity within the counties in which the six hospitals are located. Within the past five years, the health system's share of total economic activity within the six home counties has grown more than five percent, from 11.98 percent to 17.04 percent. As noted below, this dramatic growth largely reflects national trends in health care costs, the magnet nature of UHS, availability of higher quality health care services and the construction of new hospital facilities.

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Finally, even though some of the activities of UHS are not directly taxable, the spin-off from the economic activities of UHS and its employees generates substantial sales, license and property tax revenues that benefit virtually every governmental unit in the region. Indeed, it appears that approximately one in every six dollars of local tax collections within the region eventually are generated by the economic activities of UHS and its employees.

I. Direct Expenditures on Personnel, Equipment, Supplies, etc.

The most direct and visible way UHS impacts the region is via the high quality medical services it provides. Indeed, many individuals benefit from UHS services who are not even aware of that fact. This is true because these benefits sometimes are indirect; for example, a healthy, disease free population is of benefit to everyone. Individuals often are unaware that UHS is the sponsor of medical and health outreach programs or educational programs they utilize. Nevertheless, by working to keep a population healthy and able to live a full and fulfilling life, UHS makes a very significant contribution to the welfare of the region.

In direct and immediate economic terms, however, the primary way in which UHS affects the region is via the wages it pays employees and the fringe benefits it purchases on their behalf. The health system employs 7,137 full-time equivalent employees within the region (5,238 at PCMH and 1,628 total at the five smaller hospitals and 271 at the subsidiaries).

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PCMH is worthy of particular attention in that it is much larger than the other hospital members of the system. The hospital's compensation of its employees constitutes more than 79 percent of total employee compensation in UHS overall. As Table One discloses, PCMH paid its employees \$237.4 million in the fiscal year ending September 30, 2005, and this total conservatively will grow to \$246.90 million by the end of 2006. Meanwhile, PCMH provided its





employees with an estimated \$69.64 million in fringe benefits in the 2006 fiscal year. These fringe benefits averaged 28.1 percent of all salaries paid within the health care system. This level of fringe benefits is approximately seven percent more generous than the average level at nearby East Carolina University. All of the UHS hospitals together will pay their employees an estimated \$310.96 million in salaries in fiscal 2006, plus an additional \$87.33 million in fringe benefits.

UHS employees are paid quite well by regional standards. The mean salary paid an FTE employee in 2005 by UHS as a whole was \$45,389; this was 39.9 percent above the Greenville average of \$32,440. Table Two reports salary data for each of the six hospitals. While one must be sensitive that average salary data easily can be distorted when the number of employees at a hospital is small and that cost-of-living differences exist between localities, the overall salary pattern is clear. UHS hospitals pay their employees well by regional standards. Of course, it is a virtual necessity that they do so, for the national markets for many of the health occupations and specialties positions at UHS hospitals are highly competitive. The bottom line, however, is that this means that UHS employees are highly valuable economic assets to their communities, for they have significant disposable income to spend.

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As noted above, added to these salaries are fringe benefits purchased by UHS for its employees. These benefits currently range from 20.46 to 30.79 percent of an employee's salary at the various hospitals, with an average fringe benefit payment of 27.9 percent of employees' salaries within the entire UHS. Once again, these fringe benefit payments are well above the regional average, which depending upon the source, appears to average about 18 percent for full-time employees. However, Bureau of Labor Statistics data suggest that more than ten percent of all full-time employees within the region receive no fringe benefits at all that are not mandated by law and 40 percent have no pension coverage. By comparison, UHS shines in this regard. UHS fringe benefits include health and life insurance; pension and 401-k payments; tuition assistance; vacation pay; sick pay; FICA, FUTA, and SUTA payments; and, workers' compensation. The provision of these fringe benefits means that UHS employees are more likely than most to avoid becoming wards of the state, or to exhibit a variety of social maladies. Fringe benefits provide "behind the scenes" economic support to any region and University Health Systems of Eastern Carolina excels in this arena.

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TABLE ONE

SALARIES PLUS FRINGE BENEFITS AT UHS HOSPITALS, 2006

	<u>2005</u>		<u>2006</u>		
	<u>Salaries</u>	<u>Fringe Benefits</u>	<u>Salaries</u>	<u>Fringe Benefits</u>	
Pitt County Memorial Hospital	\$237.40m.	\$64.48m.	\$246.90 m.	\$69.64m.	
Totals	\$301.88 m.		\$316.54 m.		
Bertie Memorial Hospital	\$4.47 m.	\$.96m.	\$4.65 m.	\$1.04 m.	
Totals	\$5.43 m.		\$5.69 m.		
Chowan Hospital	\$14.20 m.	\$4.14 m.	\$14.77 <u>m.</u>	\$4.47 m.	删除: .
Totals	\$18.34 m.		\$19.24 m.		
Heritage Hospital	\$16.16 m.	\$4.20 m.	\$16.81 m.	\$4.54 m.	
Totals	\$20.36 m.		\$21.35 m.		
Outer Banks Hospital	\$8.64 m.	\$1.70 m.	\$8.99 m.	\$1.84 m.	
Totals	\$10.34 m.		\$10.83 m.		
Roanoke-Chowan Hospital	\$18.12 m.	\$5.37 m.	\$18.84 m.	\$5.80 m.	
Totals	\$23.49 m.		\$24.64 m.		
<u>Surgicenter of Pitt County</u>	<u>\$3.29 m.</u>	<u>\$.85 m.</u>	<u>\$3.47 m.</u>	<u>\$.93 m.</u>	格式化: 底線
Totals	\$4.14 m.		\$4.40 m.		
<u>Health Access, Inc.</u>	<u>\$4.90 m.</u>	<u>\$1.18 m.</u>	<u>\$6.66 m.</u>	<u>\$1.64 m.</u>	





Totals	\$6.08 m.	\$8.30 m.		
PPM	N.A.	N.A.	\$2.86 m.	\$64 m.
Totals	N.A.		\$3.5 m.	
UHS Totals	\$307.18 m.	\$82.88 m.	\$323.95 m.	\$90.54 m.
Totals	\$390.06 m.		\$414.49 m.	

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TABLE TWO

**AVERAGE SALARIES PAID TO FULL-TIME EMPLOYEES
WITHIN UHS, FISCAL YEAR 2006**

	<u>Average Salary Per FTE Employee</u>	<u>Percent Above Greenville Average</u>	
Pitt County Memorial Hospital	\$47,136	45.3%	刪除: 40,416
Bertie Memorial Hospital	\$41,930	29.3%	刪除: 24.6
Chowan Hospital	\$35,998	11.0%	刪除: 41,689
Heritage Hospital	\$44,098	35.9%	刪除: 28.5
Outer Banks Hospital	\$47,068	45.1%	刪除: 35,925
Roanoke-Chowan Hospital	\$35,254	8.7%	刪除: 10.7
Surgicenter of Pitt County	\$44,759	38.0%	刪除: 44,200
Health Access, Inc.	\$42,138	29.9%	刪除: 36.3
PPM	\$79,863	146.2%	刪除: 46,359
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UHS Average	\$45,389	39.9%
Greenville, NC, Average	\$32,440	-----

TABLE THREE
THREE-YEAR GROWTH OF FTEs AT UHS HOSPITALS AND SUBSIDIARIES
FY 2003 - 2006

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II. Equipment Expenditures

UHS is a facility-intensive, equipment-intensive operation. Table Three reveals that the various units of UHS spent \$33.77 million on equipment in fiscal 2005. Very few enterprises within the region spend so much on equipment in a single year unless they are constructing a new facility de novo. While the economic impact of equipment expenditures upon the local economy is not as great as for wages and salaries because more equipment expenditures are made outside of the region, their impact still is substantial. For example, when UHS purchases office furniture or a vehicle, this injects money into localities throughout the region. These funds are spent and re-spent so that on average a \$1,000 equipment expenditure by UHS eventually generates \$1,800 in new income.

TABLE FOUR

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**CAPITAL AND EQUIPMENT EXPENDITURES
MADE BY UHS, FISCAL 2005**

Pitt County Memorial Hospital and Related Enterprises such as the Surgicenter	\$28,230,804
Bertie Memorial Hospital	\$ 234,666





Chowan Hospital	\$ 884,944
Heritage Hospital	\$ 1,802,143
Outer Banks Hospital	\$ 371,909
Roanoke-Chowan Hospital	\$ 1,789,194
Other Divisions	\$ 456,279
UHS Total	\$33,769,939
Updated to 2006	\$35,458,436

III. Other Operating Expenditures, Fiscal 2005

Salaries, fringe benefits and equipment purchases typically constitute the largest individual expenditures made by UHS hospitals in any given year. That said, there are numerous other operating expenditures the hospitals make, some of which are virtually unavoidable. These other expenditures include drugs and supplies, payments to physicians, utilities and contractual services. Taken together, these expenditures are highly significant. Table Four summarizes these other operating expenditures by hospital.

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TABLE FIVE

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**OTHER OPERATING EXPENDITURES
MADE BY UHS HOSPITALS
DURING FISCAL 2005**

Pitt County Memorial Hospital	\$288,816,537
Bertie Memorial Hospital	\$ 5,375,677
Chowan Hospital	\$ 14,295,232





Heritage Hospital	\$ 19,461,200
Outer Banks Hospital	\$ 11,957,244
Roanoke-Chowan Hospital	\$ 21,684,934
<u>Surgicenter of Pitt County (2006)</u>	<u>\$ 905,893</u>
<u>Health Access, Inc. (2006)</u>	<u>\$ 5,110,784</u>
<u>PPM (2006)</u>	<u>\$ 4,853,303</u>
Total	<u>\$372,460,804</u>
Updated to 2006	<u>\$390,540,345</u>

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IV. Non-Operating Expenditures, Fiscal 2005

Non-operating expenditures primarily consist of interest paid by UHS on financial obligations. These obligations often involve interest payments made on facilities previously constructed, but not yet paid for. [All long-term financial debt of UHS is held by financial institutions outside the UHS operating region, and therefore there is no regional economic impact from these expenditures.](#)

TABLE FIVE

NON-OPERATING (INTEREST) EXPENSES OF UHS, FISCAL 2005

Pitt Memorial Hospital	\$ 12,152,666
Bertie Memorial Hospital	\$ 508,778
Chowan Hospital	\$ 168,165
Heritage Hospital	\$ 3,715,610
Outer Banks Hospital	\$ 2,086,339
Roanoke-Chowan Hospital	\$ 770,325
Total	\$ 19,401,883
Updated to 2006	\$ 20,371,977

V. Volunteered Time and Other Resources Made as Gifts or Provided to the Community Gratis by UHS

The six hospitals within UHS provide an imposing set of services to eastern North Carolina. Many of these services are provided at prices below cost, or in fact are provided gratis. These services include health fairs, free health screenings, health counseling, health education sessions and other services including preventive medicine and shots. Most of these services address populations that are especially vulnerable in a health context -- groups of individuals that are particularly young or elderly, those that lack financial means or insurance coverage, and those that are composed primarily of members of minority groups.





UHS employees volunteer thousands of hours each year to regional civic and charitable organizations. Charitable activities by UHS hospitals and their employees are a major, multimillion dollar annual endeavor. It is necessarily difficult to place an economic value on services that are not actually priced in the marketplace and where personal care and concern weigh heavily. Even so, UHS appropriately attempts to do so, and Table Six provides a summary of the implicit economic value of most of the gratis services supplied by UHS hospitals and their employees. Volunteer hours have been valued at \$21.00, which approximates the average wage per hour of UHS full-time employees.

In addition, most UHS hospitals make cash contributions to local charities and a wide range of estimable community projects. These also are included in Table Six.

Note that UHS undertakes a wide range of charitable activities and uncompensated services that are not included in Table Six. Examples include Medicare (\$233.97 million at PCMH alone in fiscal 2005) and Medicaid (\$77.50 million at PCMH in fiscal 2005). However, the values of these services are included in the other expenditure categories. For example, unreimbursed salaries of doctors, nurses and personnel provided by UHS as a part of Medicare and Medicaid are included in the wages and salaries category and appear in Table One, while unreimbursed operating expenses are included in the operating expenditures category, and appear in Table Four. To include the value of these services in the Charitable and Volunteer Activities category would involve double counting.

TABLE SIX

THE VALUE OF CHARITABLE GIFTS AND VOLUNTEER TIME PROVIDED BY UHS AND ITS EMPLOYEES, FISCAL 2005

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	<u>Values of Employees' Volunteered Hours</u>	<u>Cash Contributions</u>	<u>Totals</u>
Pitt Co. Memorial Hospital	\$5,578,449	\$3,071,199	\$ 8,649,648
Bertie Memorial Hospital	\$ 40,634	\$ 291	\$ 40,925
Chowan Hospital	\$ 39,558	\$ 5,884	\$ 45,442
Heritage Hospital	\$ 235,119	\$ 18,723	\$ 253,842
Outer Banks Hospital	\$ 42,861	\$ 40,505	\$ 83,366

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Roanoke-Chowan Hospital	\$ 684,267	\$ <u>275,054</u>	\$ <u>959,321</u>	删除: 0
Total	\$6,620,888	\$ <u>3,411,656</u>	\$ <u>10,032,544</u>	删除: \$ 684,267
Updated to 2006	\$6,951,932	\$ <u>3,582,239</u>	\$ <u>10,534,171</u>	删除: 3,130,718
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VI. Economic Ripple Effects

Each dollar spent by UHS or its employees within the region goes to an individual or a merchant who in turn spends most of that dollar. These expenditures reverberate around the region as the dollars turn over. This overall phenomenon frequently is labeled the “economic ripple effect” and it multiplies the impact of any expenditure made within the region.

Not all expenditures are created equal, however, insofar as ripple effects are concerned. Those expenditures made within the region for locally produced goods and services usually have a much larger ripple effect than expenditures that are made in Washington, D.C., or perhaps the People’s Republic of China. This is not to say that expenditures made outside the region are inappropriate. Indeed, any organization or firm that seeks to be efficient must seek out the lowest possible price for the items it purchases, consistent with its requirements for quality and service. Viewed in this context, expenditures made regionally may or may not constitute efficient behavior, depending upon what is being purchased and the purchaser’s needs.

One additional point needs to be made. When UHS employees spend their incomes, or the UHS purchases goods and services within the region, state and local governmental units benefit substantially from increased tax collections. The State of North Carolina realizes additional income and sales tax collections, while local governments enjoy higher sales and property tax collections. Hence, even though some of the activities of UHS are not directly taxable, the overall economic activities of UHS generate substantial additional tax revenues for virtually every governmental unit in the region.

Based upon other economic impact studies I have completed, and existing research, the following spending multipliers are reasonable for the expenditures of UHS and its employees:

Wages, Salaries and Fringe Benefits:	2.3
Equipment	1.8
Operating Expenditures	1.9
Non-Operating Expenditures	1.2
Charitable and Volunteer Activities	1.1



With those expenditure multipliers in mind, Table Seven summarizes the economic ripple effects of UHS and its employees as of Fall 2006.

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TABLE SEVEN

ECONOMIC RIPPLE EFFECTS OF UHS HOSPITALS

<u>Class of Expenditure</u>	<u>Multiplier</u>	<u>Size of Expenditure</u>	<u>Total Economic Impact</u>
Wages, Salaries and Fringe Benefits	2.3	\$414.49 m.	\$ 953.33 m.
Equipment	1.8	\$ 33.76 m.	\$ 60.77 m.
Other Operating Expenditures	1.9	\$372.47 m.	\$ 707.69 m.
Charitable and Volunteer Activities	1.1	\$ 10.04 m.	\$ 11.05 m.
Other	1.0	\$ 9.30 m.	\$ 9.30 m.
Totals		\$840.06 m.	\$1742.14 m.

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VII. Summing Up the Economic Impact of UHS

We now can summarize the economic impact of UHS and its six constituent hospitals (including ripple effects) within eastern North Carolina in Table Eight.

The economic impact of University Health Systems of Eastern Carolina was quite substantial in 2006 and accounts directly and indirectly for more than one of every six dollars of economic activity in the counties in which its hospitals are located in the eastern North Carolina region. PCMH, in tandem with East Carolina University, is the economic engine for the region. UHS as an overall entity has a total economic impact that will exceed \$1.74 billion in 2006. Further, this economic impact has been growing over time. As Table Nine reveals, between 2001 and 2006, the contribution of UHS, including ripple effects, has risen from 11.98 percent to 17.04 percent of the value of the gross product of the counties in which the six hospitals are located.

What can we conclude? First, these data tell us that the citizens of the region are receiving large amounts of quality health care. Second, it is apparent from these results and other data that UHS hospitals constitute a magnet that attracts patients from other counties.





For example, PCMH attracts patients from adjacent counties such as Greene and Wilson, as well as serving as a wider regional referral center, while the Outer Banks Hospital attracts patients from Hyde and Tyrrell counties. The other hospitals act as similar magnets. Third, UHS clearly is providing a substantial economic spark to the region and now is the largest employer in the region. Fourth, it also is apparent that many individuals within the region have found attractive jobs supplying health care within UHS and when these employees spend their incomes, the entire region prospers.

TABLE EIGHT

THE TOTAL ECONOMIC IMPACT OF THE SIX HOSPITALS OF UHS AND THEIR PROPORTION OF THE VALUE OF THEIR HOME COUNTY GROSS PRODUCT

	<u>Total Annual Economic Impact</u>	<u>Proportion of Value of Home County Gross Product</u>
Pitt Co. Memorial Hospital	\$ <u>1,337.13 m.</u>	<u>24.34%</u>
Bertie Memorial Hospital	\$ <u>23.78 m.</u>	<u>4.25%</u>
Chowan Hospital	\$ <u>73.06 m.</u>	<u>14.94%</u>
Heritage Hospital	\$ <u>89.60 m.</u>	<u>5.31%</u>
Outer Banks Hospital	\$ <u>48.39 m.</u>	<u>3.61%</u>
Roanoke Chowan Hospital	\$ <u>102.14 m.</u>	<u>15.69%</u>
UHS Central Activities	\$ 35,621,421	
Surgicenter of Pitt County	\$ 12.68 m.	0.23%
Health Access, Inc.	\$ 28.80 m.	0.52%
PPM	\$ 17.27 m.	0.31%

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Other	\$ 9.30 m.	0.17%
All Pitt County Combined	\$1,405.18 m.	25.41%
UHS Total	\$1,742.14 m.	16.94%

Quality health care has become substantially more expensive and many individuals are spending increasingly large proportions of their incomes on health care. Since January 2000, the consumer price index for urban consumers has risen 34.1 percent, but the consumer price index for medical care has risen 82.8 percent. Eastern North Carolina is no exception to this pattern and therefore individuals within the region spend more on medical care than ever before.

When all is said and done, it is clear that UHS, led by PCMH, is a large and growing economic engine within eastern North Carolina. Whereas the size of the region's economy has grown about 18 percent over the past five years, the economic impact of UHS has grown 73 percent during the same period of time -- about four times more rapidly. Even if changes in national health policies occur that ameliorate the future rate of increase in expenditures on health care, it seems likely that the economic importance of UHS nevertheless will increase in the future. An aging population and the emergence of new, expensive health care technologies virtually assure this will be the case.

TABLE NINE

THE ECONOMIC IMPACTS OF THE SIX UHS HOSPITALS AND THEIR CONTRIBUTIONS TO THE VALUES OF THEIR HOME COUNTY GROSS PRODUCTS, 2001 AND 2006

	<u>Total Annual Economic Impact</u>		<u>Proportion of Value of Home County Gross Product</u>	
	<u>2001</u>	<u>2006</u>	<u>2001</u>	<u>2006</u>
Pitt Co. Memorial Hospital	\$ 804.0 m.	\$1,337.13 m.	18.20%	24.34%
Bertie Memorial Hospital	\$ 12.5 m.	\$ 23.78 m.	2.48%	4.25%
Chowan Hospital	\$ 46.2 m.	\$ 73.06 m.	11.18%	14.94%
Heritage Hospital	\$ 69.8 m.	\$ 89.60 m.	4.77%	5.31%

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Outer Banks Hospital	\$.9 m.	\$ <u>48.39</u> m.	0.01%	<u>3.61</u> %	删除: 49.
Roanoke Chowan Hospital	\$ 68.2 m.	\$ <u>102.14</u> m.	12.63%	<u>15.69</u> %	删除: 5
<u>All Subsidiaries Together</u>	<u>\$ N.A.</u>	<u>\$ 58.75 m.</u>	<u>N.A.</u>	<u>1.06</u> %	删除: 6
<u>All Pitt County Together</u>	<u>\$ N.A.</u>	<u>\$1,405.18 m.</u>	<u>N.A.</u>	<u>25.41</u> %	插入: 6
UHS Hospitals and Central Activities Together	\$1,001.7 m.	\$ <u>1,742.14</u> m.	11.98%	<u>17.04</u> %	删除: 89
					删除: 9
					删除: 103.3
					删除: 4.1
					删除: 98
					删除: 757.6
					删除: 7
					删除: 6.94
					插入: 4
					删除: 3

This study is based upon data provided by University Health Systems of Eastern Carolina.



