

**Main Messages**  
**Transfer Rates and Use of Post–Acute Care after Surgery at Critical Access vs**  
**Non–Critical Access Hospitals**  
**May 15, 2014**

**Background**

According to a study in the May 14 issue of JAMA, hospital transfers occur more often after surgical admissions at CAHs. However, the proportion of patients at CAHs using post–acute care is equal to or lower than that of patients treated in non-CAHs. The authors assert that these results will affect the ongoing debate concerning CAH payment policy and its implications for health care delivery in rural communities. The National Rural Health Alliance has criticized the study.

**Talking Points**

- **Critical access hospitals play a special role in their communities.** Often serving as the only source of care, critical access hospitals also face challenges like remote geographic locations, small size and limited workforce.
- **Treatment decisions at critical access hospital may include transfer options for some patients.** Often the appropriate role of a critical access hospital is to make sure they are stabilized and transferred to another facility (weather, logistics and familial preference permitting) that will have access to resources required for the patient’s care.
  - Transfers are a vital part of care, especially in communities served by critical access hospitals.
- **Most critical access hospitals serve the most vulnerable patients and are the only source of care in the area.** They are the family doctors for the uninsured and underinsured and provide the most vital resources in times of emergencies.
  - CAHs provide essential high-quality medical care to the 19.3 percent of the U.S. population that resides in rural areas.
  - Each year, CAHs treat approximately 7 million patients in their emergency departments and an additional 38 million in their outpatient departments.
- The AHA will continue to strongly advocate to maintain the current CAH program, and also for fixes to payment and administrative limitations that constrain the efficiency and effectiveness of these essential health care providers.