

Supplementary Online Content

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This supplementary material has been provided by the authors to give readers additional information about their work.

eMethods

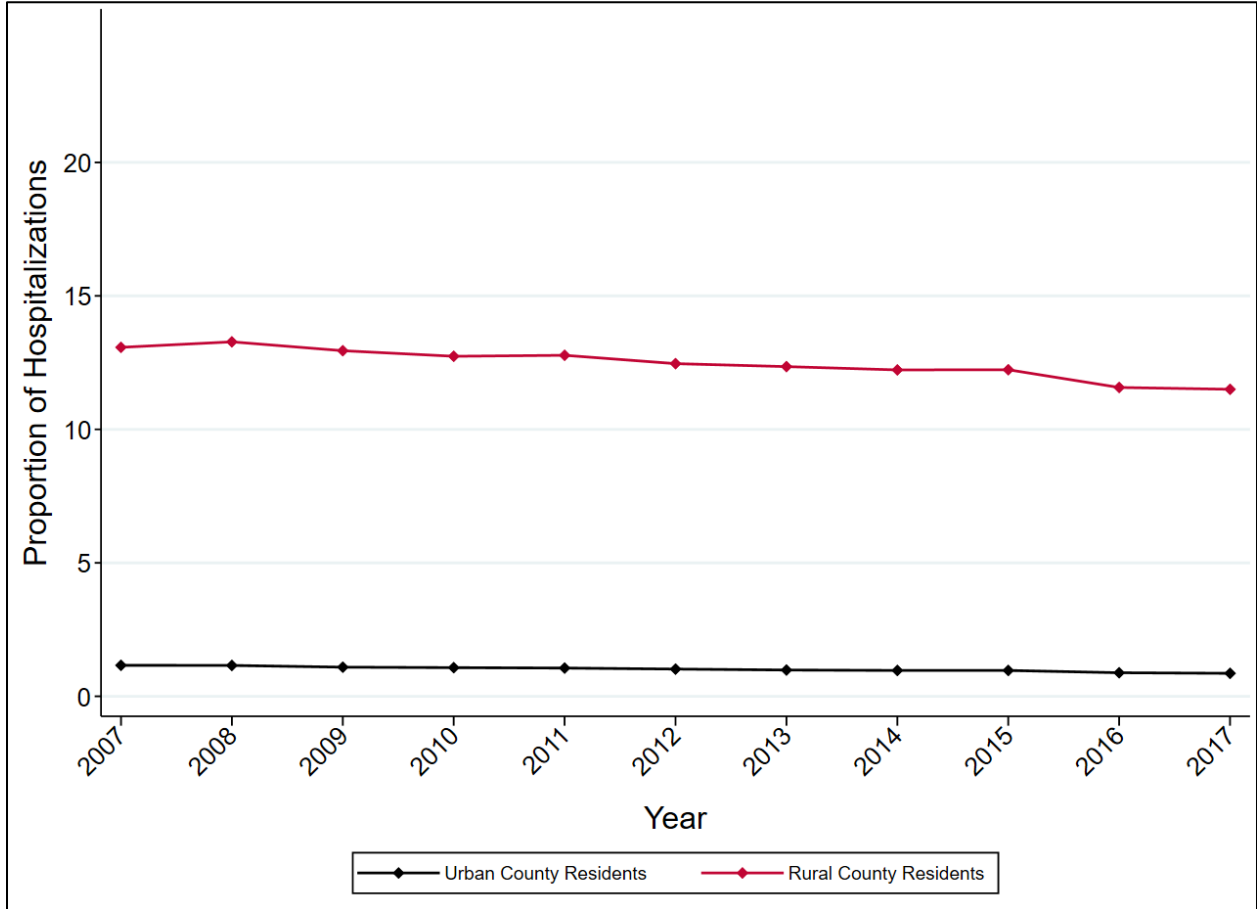
Study Population. Our sample consists of rural Traditional Medicare beneficiaries admitted to CAHs and non-CAHs between January 1, 2007 and November 30, 2017 with a primary diagnosis of pneumonia, congestive heart failure, chronic obstructive pulmonary disease, stroke, septicemia, urinary tract infection, and arrhythmia (identified with international classification of diseases [ICD] codes, **eTable 1**). These conditions were selected due to being common causes for admission to both CAHs and non-CAHs, which we ascertained by examining the distribution of diagnosis related groups (DRGs) assigned to discharges. We list the top 10 most prevalent medical DRGs among CAH and non-CAH discharges in **eTable 2**. Diagnoses from the DRGs common to both CAHs and non-CAHs were selected, with the exception of ‘esophagitis, gastroenteritis, and miscellaneous digestive disorders’ because of the high diagnostic heterogeneity within this group.

Analyses were limited to rural beneficiaries because CAHs are generally not an alternative site of care for urban beneficiaries (**eFigure 1**). Additionally, non-CAHs where urban beneficiaries receive care are likely to be inherently different from non-CAHs where rural beneficiaries receive care. Medicare Advantage enrollees were excluded given evidence that their diagnoses are over-coded due to different payment mechanisms that are not the focus of this study.

We retained all hospitalizations in our analysis that met the CMS definition of index hospitalization. As such, hospitalizations fulfilling one or more of the following criteria were excluded: date of admission within 30 days of a prior discharge (readmissions are not considered index hospitalizations); date of admission before February 1, 2007, for which readmission status cannot be ascertained; date of discharge after November 30, 2016, for which follow-up is

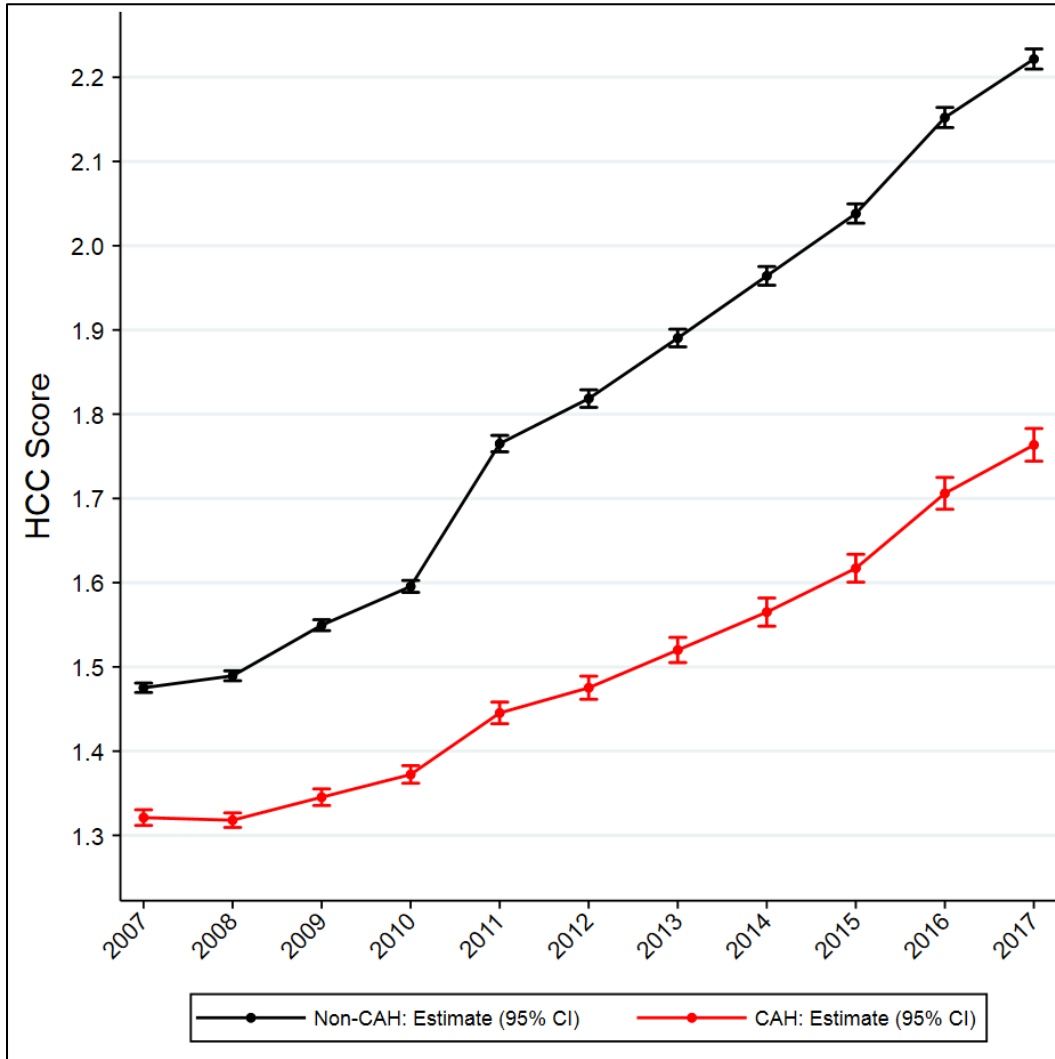
censored; or discharge status was left against medical advice. If a patient had multiple index hospitalizations during a calendar year then only one was selected at random to be included. Contiguous hospitalizations (involving transfers) were combined into a single episode of care and the patient outcome was attributed to the first hospital.

eFigure 1. Proportion of Hospitalizations Among Traditional Medicare Beneficiaries Occurring at Critical Access Hospitals



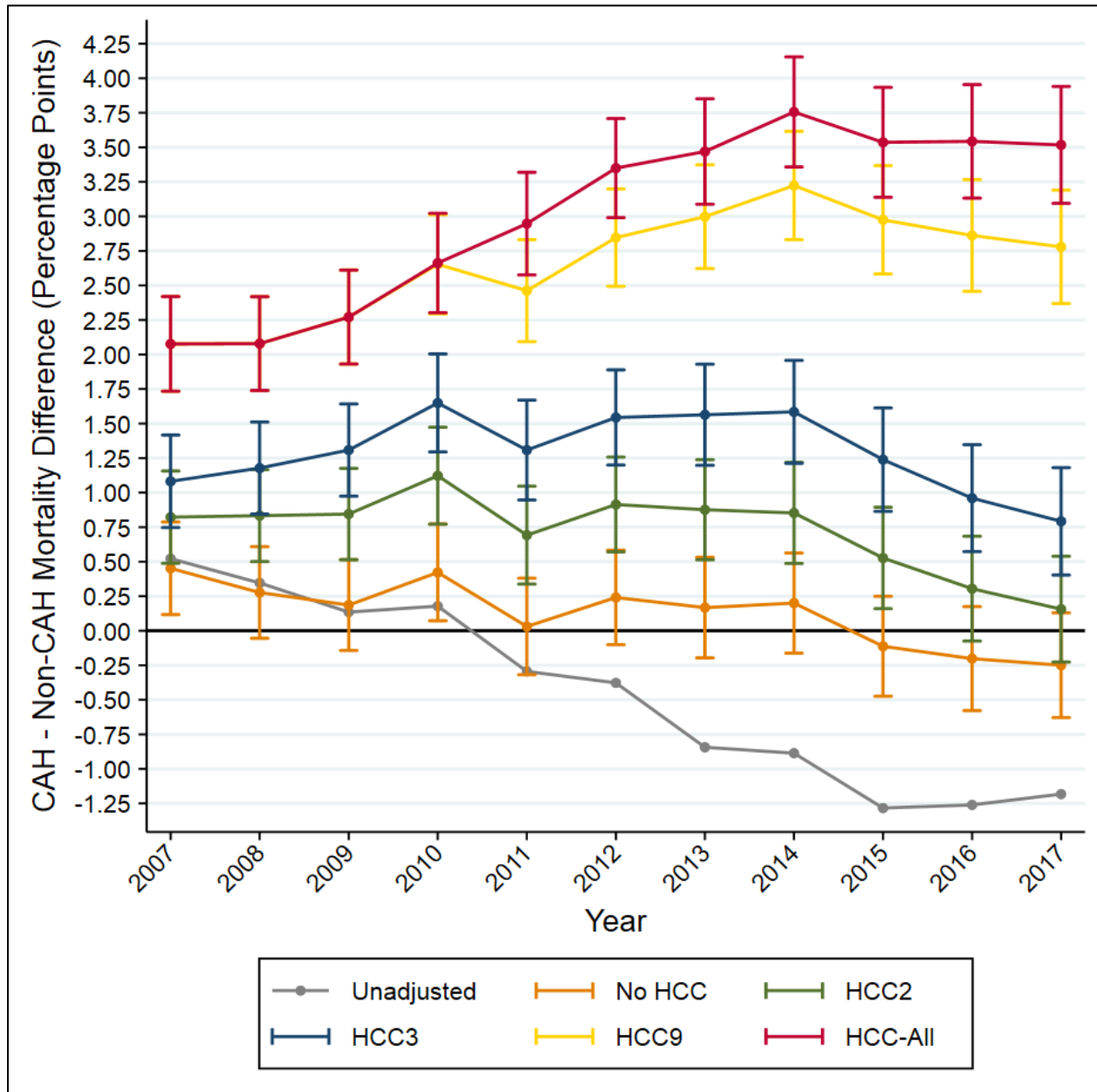
Counties were classified as rural or urban based on Rural-Urban Continuum Codes, which were developed by the US Department of Agriculture and last updated in 2013.

eFigure 2. HCC Scores Among Patients Discharged From Critical Access Hospitals and Non-Critical Access Hospitals, 2007-2017.



Covariates in the adjusted model were: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. CAH=Critical Access Hospital; CI=Confidence Interval.

eFigure 3. Sensitivity of Mortality Differences Between Critical Access Hospitals and Non-Critical Access Hospitals to Diagnosis Coding, 2007-2017.



Mortality includes in-hospital and 30-day post-discharge mortality. All adjusted models include the following covariates: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. Models in the legend are distinguished by whether or not they use the HCC score as an additional covariate, and the number of discharge diagnoses used to calculate the HCC score for that specification. Bars represent 95% confidence intervals for each adjusted point estimate. CAH=Critical Access Hospital.

eTable 1. List of Inclusionary Diagnoses and *International Classification of Diseases* Codes

Diagnosis	ICD-9	ICD-10
Pneumonia	480.xx-486.xx, 487.0, 488.01, 488.11	J10.0x, J11.0x, J12.xx-J18.xx, J09.X1
COPD	490.xx-492.xx, 493.2x, 496.xx	J40.xx-J44.xx
Heart Failure	398.91, 402.01, 402.11, 402.91, 404.01, 404.03, 404.11, 404.13, 404.91, 404.93, 428.xx	I09.81, I11.0, I13.0, I13.2, I50.xx
Arrhythmia	427.xx	I48.xx, I49.xx, R00.0, R00.1
UTI	599.00	N390.0
Septicemia	38.xx, 995.91, 995.92	A40.xx, A41.xx, R65.2x
Stroke	430.xx, 431.xx, 432.xx, 433.x1, 434.x1, 436.xx	I60.xx-I63.xx

COPD=Chronic Obstructive Pulmonary Disease; UTI=Urinary Tract Infection

eTable 2. Top 10 Most Prevalent Diagnosis Related Groups for Critical Access Hospitals and Non-Critical Access Hospitals, 2007-2017

Base Diagnosis Related Group	Admissions/Year	Prevalence
<u>Critical Access Hospitals</u>		
Pneumonia	26,778	12.0
COPD	16,846	7.6
Heart failure	14,319	6.4
UTI	11,940	5.4
Esophagitis/Gastroenteritis/Misc. digestive disorders	10,162	4.6
Misc. disorders of nutrition, metabolism, and fluids	9,064	4.1
Arrhythmia	6,634	3.0
Septicemia	6,262	2.8
Cellulitis	6,209	2.8
Stroke	5,303	2.4
<u>Non-Critical Access Hospitals</u>		
Septicemia	68,734	4.5
Pneumonia	68,375	4.4
Heart failure	66,723	4.3
COPD	64,780	4.2
Arrhythmia	42,196	2.7
Stroke	41,250	2.7
Esophagitis/Gastroenteritis/Misc. Digestive Disorders	38,951	2.5
UTI	36,054	2.3
Renal failure	34,133	2.2
GI Bleed	31,966	2.1

eTable 3. Distribution of Transfers at CAHs and Non-CAHs

Transfer Type	Frequency	Proportion
Non-CAH to Non-CAH	87,275	70.2%
Non-CAH to CAH	600	0.5%
CAH to Non-CAH	33,695	27.1%
CAH to CAH	2,804	2.3%

CAH=Critical Access Hospital

eTable 4. Count of Discharge Diagnoses Among Patients Admitted to Critical Access Hospitals and Non-Critical Access Hospitals, 2007-2017

Year	Unadjusted				Adjusted			
	CAH	Non-CAH	Difference (95% CI)	<i>P</i>	CAH	Non-CAH	Difference (95% CI)	<i>P</i>
2007	6.86	7.80	-0.95 (-1.04, -0.85)	<0.001	6.82	7.81	-0.99 (-1.08, -0.90)	<0.001
2008	7.01	7.96	-0.95 (-1.05, -0.86)	<0.001	6.98	7.96	-0.99 (-1.08, -0.90)	<0.001
2009	7.23	8.19	-0.96 (-1.05, -0.86)	<0.001	7.20	8.19	-0.99 (-1.08, -0.90)	<0.001
2010	7.55	8.52	-0.98 (-1.07, -0.88)	<0.001	7.52	8.53	-1.01 (-1.11, -0.92)	<0.001
2011	9.28	12.23	-2.95 (-3.20, -2.71)	<0.001	9.27	12.23	-2.96 (-3.19, -2.73)	<0.001
2012	9.66	12.85	-3.19 (-3.44, -2.93)	<0.001	9.73	12.83	-3.10 (-3.35, -2.86)	<0.001
2013	10.07	13.48	-3.41 (-3.69, -3.13)	<0.001	10.21	13.45	-3.24 (-3.51, -2.98)	<0.001
2014	10.53	14.07	-3.54 (-3.84, -3.25)	<0.001	10.73	14.04	-3.31 (-3.58, -3.03)	<0.001
2015	10.88	14.48	-3.61 (-3.91, -3.30)	<0.001	11.05	14.45	-3.40 (-3.68, -3.11)	<0.001
2016	11.36	14.85	-3.49 (-3.80, -3.17)	<0.001	11.56	14.81	-3.25 (-3.54, -2.97)	<0.001
2017	11.96	15.65	-3.70 (-4.02, -3.38)	<0.001	12.25	15.60	-3.35 (-3.65, -3.06)	<0.001

Covariates in the adjusted model were: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. CAH=Critical Access Hospital; CI=Confidence Interval.

eTable 5. Assessment of Change in Diagnosis Coding Differences Between Critical Access Hospitals and Non-Critical Access Hospitals, 2007-2017

Variable	(1) Diagnosis Count		(2) HCC Score	
	β (95% CI)	<i>P</i>	β (95% CI)	<i>P</i>
CAH	-1.00 (-1.12, -0.89)	<0.001	-0.22 (-0.23, -0.20)	<0.001
Year				
2007	-0.66 (-0.69, -0.63)	<0.001	-0.10 (-0.11, -0.10)	<0.001
2008	-0.49 (-0.52, -0.46)	<0.001	-0.09 (-0.09, -0.08)	<0.001
2009	-0.29 (-0.31, -0.27)	<0.001	-0.03 (-0.04, -0.03)	<0.001
2010	Referent		Referent	
2011	3.66 (3.55, 3.78)	<0.001	0.16 (0.16, 0.17)	<0.001
2012	4.23 (4.11, 4.35)	<0.001	0.20 (0.19, 0.21)	<0.001
2013	4.77 (4.65, 4.90)	<0.001	0.25 (0.24, 0.25)	<0.001
2014	5.27 (5.13, 5.40)	<0.001	0.29 (0.28, 0.30)	<0.001
2015	5.59 (5.46, 5.73)	<0.001	0.34 (0.33, 0.35)	<0.001
2016	5.86 (5.72, 5.99)	<0.001	0.43 (0.42, 0.44)	<0.001
2017	6.62 (6.48, 6.76)	<0.001	0.48 (0.47, 0.49)	<0.001
CAH x 2007	-0.01 (-0.08, 0.06)	0.76	0.07 (0.06, 0.08)	<0.001
CAH x 2008	-0.00 (-0.06, 0.06)	0.96	0.05 (0.04, 0.06)	<0.001
CAH x 2009	0.00 (-0.04, 0.05)	0.76	0.01 (0.01, 0.02)	<0.001
CAH x 2010	Referent		Referent	
CAH x 2011	-1.93 (-2.10, -1.76)	<0.001	-0.11 (-0.12, -0.10)	<0.001
CAH x 2012	-2.11 (-2.31, -1.92)	<0.001	-0.13 (-0.14, -0.12)	<0.001
CAH x 2013	-2.28 (-2.50, -2.06)	<0.001	-0.16 (-0.17, -0.14)	<0.001
CAH x 2014	-2.36 (-2.60, -2.12)	<0.001	-0.18 (-0.20, -0.17)	<0.001
CAH x 2015	-2.39 (-2.64, -2.13)	<0.001	-0.20 (-0.22, -0.19)	<0.001
CAH x 2016	-2.28 (-2.54, -2.01)	<0.001	-0.23 (-0.25, -0.22)	<0.001
CAH x 2017	-2.46 (-2.74, -2.18)	<0.001	-0.25 (-0.27, -0.23)	<0.001

The table includes point estimates derived from linear regression models for two outcomes: (1) diagnosis count and (2) HCC score. The terms of interest, CAH, calendar year, and CAH x year (interaction), are presented. Covariates in the adjusted model were: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. CAH=Critical Access Hospital; CI=Confidence Interval

eTable 6. Mean HCC Scores Among Patients Admitted to Critical Access Hospitals and Non-Critical Access Hospitals, 2007-2017

Year	Unadjusted				Adjusted			
	CAH	Non-CAH	Difference (95% CI)	<i>P</i>	CAH	Non-CAH	Difference (95% CI)	<i>P</i>
2007	1.31	1.48	-0.16 (-0.17, -0.15)	<0.001	1.32	1.48	-0.15 (-0.16, -0.14)	<0.001
2008	1.31	1.49	-0.19 (-0.2, -0.17)	<0.001	1.32	1.49	-0.17 (-0.18, -0.16)	<0.001
2009	1.33	1.55	-0.22 (-0.24, -0.21)	<0.001	1.35	1.55	-0.2 (-0.22, -0.19)	<0.001
2010	1.35	1.60	-0.25 (-0.26, -0.23)	<0.001	1.37	1.60	-0.22 (-0.24, -0.21)	<0.001
2011	1.40	1.77	-0.37 (-0.39, -0.35)	<0.001	1.45	1.77	-0.32 (-0.34, -0.3)	<0.001
2012	1.42	1.83	-0.41 (-0.43, -0.39)	<0.001	1.48	1.82	-0.34 (-0.36, -0.33)	<0.001
2013	1.45	1.90	-0.46 (-0.48, -0.43)	<0.001	1.52	1.89	-0.37 (-0.39, -0.35)	<0.001
2014	1.48	1.98	-0.5 (-0.53, -0.48)	<0.001	1.57	1.96	-0.4 (-0.42, -0.38)	<0.001
2015	1.52	2.06	-0.53 (-0.56, -0.51)	<0.001	1.62	2.04	-0.42 (-0.44, -0.4)	<0.001
2016	1.60	2.17	-0.57 (-0.6, -0.54)	<0.001	1.71	2.15	-0.45 (-0.47, -0.42)	<0.001
2017	1.66	2.24	-0.59 (-0.61, -0.56)	<0.001	1.76	2.22	-0.46 (-0.48, -0.44)	<0.001

Covariates in the adjusted model were: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. CAH=Critical Access Hospital; CI=Confidence Interval.

eTable 7. Adjusted Mean Discharge Diagnosis Count Before and After Transfer by CAH Status

	Pre-Transfer (95% CI)	Post-Transfer (95% CI)	Pre-Post Change (95% CI); <i>P</i>
<u>All Years</u>			
CAH	9.72 (9.57, 9.88)	13.41 (13.32, 13.52)	3.69 (3.54, 3.84); <0.001
Non-CAH	11.63 (11.53, 11.73)	13.35 (13.29, 13.41)	1.72 (1.63, 1.80); <0.001
CAH vs. non-CAH difference	-1.90 (-2.10, -1.72)	-0.07 (-0.06, 0.19)	1.97 (1.79, 2.16); <0.001
<u>Pre-2011</u>			
CAH	7.34 (7.26, 7.42)	8.68 (8.65, 8.71)	1.34 (1.25, 1.42); <0.001
Non-CAH	8.16 (8.13, 8.20)	8.61 (8.60, 8.63)	0.45 (0.41, 0.49); <0.001
CAH vs. non-CAH difference	-0.82 (-0.92, -0.73)	0.06 (0.02, 0.10)	0.89 (0.79, 0.98); <0.001
<u>Post-2011</u>			
CAH	11.24 (10.94, 11.38)	16.45 (16.34, 16.56)	5.20 (4.98, 5.42); <0.001
Non-CAH	13.95 (13.85, 14.13)	16.52 (16.45, 16.59)	2.56 (2.44, 2.70); <0.001
CAH vs. non-CAH difference	-2.70 (-2.97, -2.43)	-0.07 (-0.21, 0.07)	2.63 (2.37, 2.90); <0.001

The table contains results from three linear regression models estimating the number of discharge diagnoses before transfer, after transfer, and the pre- post- change as outcomes. CAH admission was the exposure of interest. Covariates in the adjusted model were: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. CAH=Critical Access Hospital; CI=Confidence Interval.

eTable 8. Mortality Event Counts at Critical Access Hospitals and Non-Critical Access Hospitals, 2007-2017

Year	Pooled		CAH		Non-CAH	
	n/N	%	n/N	%	n/N	%
2007	42997/363640	11.8%	8104/66148	12.3%	34893/297492	11.7%
2008	49640/400914	12.4%	9388/74131	12.7%	40252/326783	12.3%
2009	47501/388329	12.2%	8605/69715	12.3%	38896/318614	12.2%
2010	47466/384060	12.4%	8494/67920	12.5%	38972/316140	12.3%
2011	48474/385464	12.6%	8468/68656	12.3%	40006/316808	12.6%
2012	48247/379140	12.7%	8141/65583	12.4%	40106/313557	12.8%
2013	48503/370394	13.1%	7814/63040	12.4%	40689/307354	13.2%
2014	48939/366059	13.4%	7734/61229	12.6%	41205/304830	13.5%
2015	49988/370471	13.5%	7690/61896	12.4%	42298/308575	13.7%
2016	44462/339649	13.1%	6514/54144	12.0%	37948/285505	13.3%
2017	45100/346600	13.0%	6578/54741	12.0%	38522/291859	13.2%

CAH=Critical Access Hospital

eTable 9. Estimated Mortality Rates for Critical Access Hospitals and Non-Critical Access Hospitals, 2007-2017.

Year	CAH	Non-CAH	Difference (95% CI)	P
<u>Unadjusted</u>				
2007	12.25	11.73	0.52 (0.18, 0.86)	0.003
2008	12.66	12.32	0.35 (0.01, 0.69)	0.05
2009	12.34	12.21	0.14 (-0.21, 0.48)	0.45
2010	12.51	12.33	0.18 (-0.18, 0.53)	0.32
2011	12.33	12.63	-0.29 (-0.65, 0.07)	0.11
2012	12.41	12.79	-0.38 (-0.74, -0.02)	0.04
2013	12.40	13.24	-0.84 (-1.22, -0.46)	<0.001
2014	12.63	13.52	-0.89 (-1.25, -0.52)	<0.001
2015	12.42	13.71	-1.28 (-1.66, -0.91)	<0.001
2016	12.03	13.29	-1.26 (-1.64, -0.88)	<0.001
2017	12.02	13.20	-1.18 (-1.57, -0.79)	<0.001
<u>Adjusted Model 1, with HCC Score</u>				
2007	13.52	11.44	2.08 (1.73, 2.42)	<0.001
2008	14.07	11.99	2.08 (1.74, 2.42)	<0.001
2009	14.09	11.82	2.27 (1.93, 2.61)	<0.001
2010	14.55	11.89	2.66 (2.30, 3.02)	<0.001
2011	15.00	12.05	2.95 (2.58, 3.32)	<0.001
2012	15.49	12.15	3.35 (2.99, 3.71)	<0.001
2013	15.97	12.50	3.47 (3.09, 3.85)	<0.001
2014	16.50	12.74	3.76 (3.36, 4.15)	<0.001
2015	16.44	12.90	3.54 (3.14, 3.93)	<0.001
2016	16.07	12.52	3.54 (3.13, 3.95)	<0.001
2017	15.97	12.46	3.52 (3.09, 3.94)	<0.001
<u>Adjusted Model 2, without HCC Score</u>				
2007	12.19	11.74	0.45 (0.12, 0.79)	0.008
2008	12.60	12.33	0.28 (-0.05, 0.61)	0.10
2009	12.38	12.20	0.19 (-0.14, 0.52)	0.27
2010	12.71	12.28	0.42 (0.07, 0.77)	0.02
2011	12.60	12.57	0.03 (-0.32, 0.38)	0.86
2012	12.92	12.68	0.24 (-0.10, 0.58)	0.17
2013	13.23	13.07	0.17 (-0.20, 0.53)	0.37
2014	13.54	13.33	0.20 (-0.16, 0.56)	0.28
2015	13.40	13.51	-0.11 (-0.47, 0.25)	0.54
2016	12.92	13.12	-0.20 (-0.58, 0.17)	0.29
2017	12.80	13.05	-0.25 (-0.63, 0.13)	0.20

Mortality includes in-hospital and 30-day post-discharge mortality. All adjusted models include the following covariates: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. Estimates derived from Model 1 are further adjusted for Hierarchical Condition Category (HCC score). CAH=Critical Access Hospital; CI=Confidence Interval.

eTable 10. Assessment of Change in Mortality Differentials for Critical Access Hospitals and Non-Critical Access Hospitals, 2007-2017

Variable	Model 1		Model 2	
	β (95% CI)	<i>P</i>	β (95% CI)	<i>P</i>
CAH	1.61 (1.28, 1.94)	<0.001	0.26 (-0.06, 0.58)	0.11
<u>Year</u>				
2007	Referent		Referent	
2008	0.56 (0.41, 0.72)	<0.001	0.71 (0.55, 0.86)	<0.001
2009	-0.02 (-0.19, 0.14)	0.80	0.54 (0.37, 0.71)	<0.001
2010	-0.39 (-0.57, -0.21)	<0.001	0.42 (0.24, 0.60)	<0.001
2011	-1.79 (-1.98, -1.60)	<0.001	0.50 (0.32, 0.68)	<0.001
2012	-2.25 (-2.45, -2.06)	<0.001	0.33 (0.15, 0.51)	<0.001
2013	-2.63 (-2.83, -2.43)	<0.001	0.36 (0.17, 0.54)	<0.001
2014	-3.19 (-3.4, -2.98)	<0.001	0.17 (-0.03, 0.37)	0.09
2015	-3.85 (-4.06, -3.63)	<0.001	-0.07 (-0.27, 0.13)	0.51
2016	-5.28 (-5.51, -5.05)	<0.001	-0.72 (-0.93, -0.52)	<0.001
2017	-6.16 (-6.39, -5.94)	<0.001	-1.12 (-1.33, -0.92)	<0.001
CAH x 2007	Referent		Referent	.
CAH x 2008	0.02 (-0.34, 0.37)	0.93	-0.15 (-0.51, 0.21)	0.41
CAH x 2009	0.21 (-0.17, 0.58)	0.28	-0.26 (-0.64, 0.12)	0.18
CAH x 2010	0.51 (0.12, 0.90)	0.01	-0.09 (-0.48, 0.30)	0.66
CAH x 2011	1.32 (0.91, 1.73)	<0.001	-0.29 (-0.69, 0.11)	0.15
CAH x 2012	1.75 (1.33, 2.16)	<0.001	-0.05 (-0.45, 0.35)	0.81
CAH x 2013	1.85 (1.43, 2.27)	<0.001	-0.19 (-0.59, 0.21)	0.36
CAH x 2014	2.38 (1.94, 2.82)	<0.001	0.12 (-0.29, 0.53)	0.57
CAH x 2015	2.27 (1.81, 2.72)	<0.001	-0.15 (-0.57, 0.27)	0.48
CAH x 2016	2.71 (2.23, 3.18)	<0.001	-0.04 (-0.47, 0.39)	0.85
CAH x 2017	2.92 (2.43, 3.40)	<0.001	0.06 (-0.37, 0.49)	0.79

The table includes point estimates derived from two linear regression models estimating mortality. The terms of interest, CAH, calendar year, and CAH x year (interaction), are presented. Covariates in both adjusted models were: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. Model 1 further adjusts for HCC score. CAH=Critical Access Hospital; CI=Confidence Interval

eTable 11. Estimated Mortality Rates for Critical Access Hospitals and Non-Critical Access Hospitals Excluding Transferred Patients, 2007-2017

Year	CAH	Non-CAH	Difference (95% CI)	P
<u>Unadjusted</u>				
2007	11.75	11.51	0.24 (-0.10, 0.59)	0.17
2008	12.26	12.11	0.15 (-0.20, 0.49)	0.40
2009	11.84	11.99	-0.15 (-0.51, 0.20)	0.40
2010	12.02	12.12	-0.10 (-0.46, 0.27)	0.60
2011	11.89	12.43	-0.54 (-0.91, -0.17)	0.004
2012	12.01	12.60	-0.59 (-0.96, -0.23)	0.002
2013	11.95	13.02	-1.07 (-1.46, -0.68)	<0.001
2014	12.17	13.29	-1.12 (-1.50, -0.75)	<0.001
2015	11.87	13.45	-1.58 (-1.96, -1.20)	<0.001
2016	11.41	13.03	-1.62 (-2.00, -1.24)	<0.001
2017	11.54	12.92	-1.39 (-1.78, -0.99)	<0.001
<u>Adjusted Model 1, with HCC Score</u>				
2007	13.01	11.23	1.77 (1.43, 2.12)	<0.001
2008	13.63	11.80	1.83 (1.49, 2.17)	<0.001
2009	13.57	11.62	1.95 (1.62, 2.29)	<0.001
2010	14.05	11.70	2.35 (1.98, 2.71)	<0.001
2011	14.57	11.87	2.70 (2.33, 3.08)	<0.001
2012	15.09	11.97	3.12 (2.76, 3.48)	<0.001
2013	15.53	12.31	3.22 (2.83, 3.6)	<0.001
2014	16.05	12.53	3.52 (3.12, 3.91)	<0.001
2015	15.87	12.67	3.20 (2.81, 3.60)	<0.001
2016	15.43	12.29	3.14 (2.73, 3.55)	<0.001
2017	15.46	12.21	3.26 (2.83, 3.68)	<0.001
<u>Adjusted Model 2, without HCC Score</u>				
2007	11.65	11.53	0.12 (-0.22, 0.46)	0.49
2008	12.13	12.13	0.00 (-0.33, 0.34)	0.99
2009	11.82	11.99	-0.17 (-0.50, 0.16)	0.32
2010	12.17	12.09	0.08 (-0.27, 0.43)	0.66
2011	12.14	12.38	-0.24 (-0.59, 0.11)	0.18
2012	12.49	12.50	-0.01 (-0.35, 0.34)	0.96
2013	12.74	12.87	-0.12 (-0.49, 0.24)	0.51
2014	13.05	13.12	-0.07 (-0.43, 0.29)	0.70
2015	12.79	13.27	-0.48 (-0.85, -0.11)	0.01
2016	12.23	12.88	-0.64 (-1.02, -0.27)	0.001
2017	12.25	12.79	-0.55 (-0.93, -0.16)	0.005

Mortality includes in-hospital and 30-day post-discharge mortality. All adjusted models include the following covariates: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. Estimates derived from Model 1 are further adjusted for Hierarchical Condition Category (HCC score). CAH=Critical Access Hospital; CI=Confidence Interval.

eTable 12. Estimated Mortality Rates for Critical Access Hospitals and Non-Critical Access Hospitals Derived From a County Fixed Effects Model

Year	CAH	Non-CAH	Difference (95% CI)	P
<u>Unadjusted</u>				
2007	12.25	11.73	0.52 (0.18, 0.86)	0.003
2008	12.66	12.32	0.35 (0.01, 0.69)	0.05
2009	12.34	12.21	0.14 (-0.21, 0.48)	0.45
2010	12.51	12.33	0.18 (-0.18, 0.53)	0.32
2011	12.33	12.63	-0.29 (-0.65, 0.07)	0.11
2012	12.41	12.79	-0.38 (-0.74, -0.02)	0.04
2013	12.40	13.24	-0.84 (-1.22, -0.46)	<0.001
2014	12.63	13.52	-0.89 (-1.25, -0.52)	<0.001
2015	12.42	13.71	-1.28 (-1.66, -0.91)	<0.001
2016	12.03	13.29	-1.26 (-1.64, -0.88)	<0.001
2017	12.02	13.20	-1.18 (-1.57, -0.79)	<0.001
<u>Adjusted Model 1, with HCC Score</u>				
2007	13.64	11.42	2.22 (1.86, 2.58)	<0.001
2008	14.21	11.97	2.25 (1.91, 2.59)	<0.001
2009	14.18	11.81	2.37 (2.02, 2.72)	<0.001
2010	14.69	11.86	2.83 (2.48, 3.19)	<0.001
2011	15.24	12.00	3.24 (2.88, 3.61)	<0.001
2012	15.65	12.11	3.53 (3.17, 3.90)	<0.001
2013	16.01	12.50	3.51 (3.13, 3.88)	<0.001
2014	16.50	12.74	3.76 (3.38, 4.13)	<0.001
2015	16.56	12.88	3.68 (3.29, 4.07)	<0.001
2016	16.03	12.53	3.50 (3.09, 3.90)	<0.001
2017	15.89	12.47	3.42 (3.01, 3.83)	<0.001
<u>Adjusted Model 2, without HCC Score</u>				
2007	12.12	11.76	0.37 (0.00, 0.73)	0.05
2008	12.57	12.34	0.23 (-0.12, 0.58)	0.20
2009	12.21	12.24	-0.03 (-0.38, 0.32)	0.86
2010	12.57	12.31	0.26 (-0.10, 0.62)	0.16
2011	12.45	12.60	-0.15 (-0.51, 0.21)	0.41
2012	12.66	12.74	-0.08 (-0.44, 0.28)	0.67
2013	12.87	13.14	-0.27 (-0.64, 0.10)	0.15
2014	13.07	13.43	-0.36 (-0.73, 0.00)	0.05
2015	13.11	13.57	-0.46 (-0.84, -0.09)	0.02
2016	12.42	13.22	-0.80 (-1.19, -0.40)	<0.001
2017	12.28	13.15	-0.87 (-1.25, -0.49)	<0.001

Mortality includes in-hospital and 30-day post-discharge mortality. All adjusted models include the following covariates: age, age-squared, sex, race (white, black, or other), Medicaid enrollment, Medicare entitlement reason (old age and survivors insurance versus all else), 27 chronic conditions present prior to the index admission (see Table 1), primary diagnosis, and Hospital Referral Region fixed effects. Estimates derived from Model 1 are further adjusted for Hierarchical Condition Category (HCC score). CAH=Critical Access Hospital; CI=Confidence Interval.