

Availability of Hospital-Based Obstetric Services in the United States by County, 2010–2023: A State-by-State Report



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Suggested Citation: Interrante JD, O'Hanlon K, Kozhimannil KB. Availability of Hospital-Based Obstetric Services in the United States by County, 2010 – 2023: A State-by-State Report. University of Minnesota Rural Health Research Center. January 2026. <https://rhc.umn.edu/publication/availability-of-hospital-based-obstetric-services-in-the-united-states-by-county-2010-2023-a-state-by-state-report/>

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Executive Summary

The Maternity Care Team at the University of Minnesota Rural Health Research Center documents obstetric care access and conducts research on access to care around the time of childbirth for pregnant patients and infants, as well as maternal and infant health outcomes. As leaders in measuring and tracking obstetric services access, we have regularly documented changes in these services since 2010, detailing how rural communities have been disproportionately affected by obstetric service losses.

The purpose of this inaugural report on the availability of hospital-based obstetric services across the United States (US) from 2010 to 2023 is to provide timely national, state, and county-specific information on changes in obstetric care access, including key trends and recent updates. This report displays county-level maps of changes in county-level hospital-based obstetric services availability between 2010 and 2023, highlighting changes that occurred between 2022 and 2023, along with time trends in the annual percentage of counties with in-county hospital-based obstetric services. Findings are stratified among rural and urban counties and – for rural counties – among micropolitan (non-metropolitan counties with a town of at least 10,000) and noncore (non-metropolitan counties without a town of 10,000 or more). This report also provides summary text specific to recent (2023) updates in hospital-based obstetric services availability and changes in hospital-based obstetric services availability over the period from 2010 to 2023. The report presents a national overview by county, followed by county-level reports for every US state.

The “Availability of Hospital-Based Obstetric Services in the United States by County, 2010–2023: A State-by-State Report” reveals continued declines in access to these services in both rural and urban US communities. Between 2010 and 2023, 269 of the 3,144 counties (8.6%) in the US lost all hospital-based obstetric services; 26 of the counties that lost these services (21 of which were rural) experienced a recent loss, between 2022 and 2023. These losses have resulted in 60% of rural counties and 38% of urban counties not having any hospital-based obstetric services by 2023.

Access to obstetric care is further limited in less populated rural counties. Among rural noncore counties (counties without a town $> 10,000$), 148 counties (11%) lost all hospital-based obstetric services between 2010 and 2023 (15 of these losses occurred recently, between 2022 and 2023), resulting in only 24% of rural noncore counties having any hospital-based obstetric services by 2023.

Importantly, this report also highlights variation across states in county-level hospital-based obstetric services availability. Between 2010 and 2023, there were 9 states where more than 10 counties lost all hospital-based obstetric services; in Iowa, 20 counties lost these services during this time. In the most recent year of data available (between 2022 and 2023), obstetric service losses at the county level were concentrated in California, Idaho, Indiana, Minnesota, and Nebraska, which lost services in 2 counties each; Illinois and Kansas lost services in 3 counties (all of which were rural); and Ohio experienced recent losses in 4 counties (2 of which were rural). Only one state (North Dakota) recently gained hospital-based obstetric services in 2023 in a county without those services in 2022; this gain was in a rural noncore county.

By 2023, over 50% of all counties (rural and urban) lacked hospital-based obstetric services in 23 states: with the highest percentages of counties without hospital-based obstetric services in Kentucky (68%), South Dakota (68%), and North Dakota (79%). This lack of hospital-based obstetric services was high among urban counties in some states, with at least 50% of urban counties lacking these services in 2023 in 11 states. However, lacking obstetric care is most common for rural counties. In 28 states, at least 50% of rural counties lacked these services in 2023; in Florida, North Dakota, Virginia, and West Virginia, over 75% of rural counties lacked hospital-based obstetric services. Further, the lack of all hospital-based obstetric services by 2023 was extremely high (90% or greater) among rural noncore counties in 7 states (Florida, Georgia, Illinois, Louisiana, North Dakota, Oklahoma, and Tennessee).

Access to hospital-based obstetric care declined from 2010–2023, particularly in rural areas, and access varies across US states. Loss of hospital-based obstetric services is associated with increased potential

risks for maternal and infant health.^{1–4} The findings of this report have both national and local implications and highlight areas for improving access to care and maternal and infant health.

Acknowledgments

The author team would like to thank the following individuals for their support reviewing and finalizing this report: Emily C. Sheffield, MPH; Caitlin Carroll, PhD; Sara C. Handley, MD, MSCE; Corrie E. McDaniel, DO; Khadija Abdi, BS.

Additionally, we would like to thank the following individuals for their support throughout the process of preparing the data used in this report: Emily C. Sheffield, MPH; Alyssa H. Fritz, MPH, RD, CLC; Khadija Abdi, BS; Alonso Quijano-Ruiz, MA; Ingrid Jacobson, MPH; Mariana S. Tuttle, MPH.

Methodological Summary

The “Availability of Hospital-Based Obstetric Services in the United States by County, 2010–2023: A State-by-State Report” measures hospital-based obstetric services availability in aggregate at the county level. Data come from 2010 through 2023 American Hospital Association (AHA) Annual Surveys, Centers for Medicare & Medicaid Services (CMS) Provider of Services (POS) Files, and review of hospital websites and news reports conducted through October 2025. For more detailed information on how we identified hospital-based obstetric unit status, see the University of Minnesota Rural Health Research Center website for our October 2025 Methodology Brief.⁵

Briefly, we first restricted measurement to hospitals that were classified as short-term acute care hospitals, obstetrics and gynecology specialty hospitals, or children’s short-term acute care hospitals that provided obstetric services at any point during the study period (henceforth “eligible hospitals”). Next, within each year, obstetric services provision was defined as having an obstetric unit designated, prepared, and staffed to attend labor and delivery/childbirth within one of these eligible hospitals. In the case of obstetric unit closure, if the closure occurred prior to July 1, obstetric

services were designated as not available in that year. Conversely, if the closure occurred on or after July 1, obstetric services were designated as available in that year, but no longer available in the subsequent year.

For each year, hospital-level measures of obstetric services provision were aggregated to the county-level. If at least one eligible hospital within a county had obstetric services, then the county was designated as having in-county hospital-based obstetric services. If no eligible hospitals within a county had obstetric services or the county did not have a hospital, then the county was designated as not having in-county hospital-based obstetric services. Because of this aggregation, counties could experience a loss or gain of obstetric services at one or more hospitals but still have other or a remaining hospital(s) with obstetric services, and those individual hospital-level changes are not evident in these county-level data displays. Additionally, freestanding birth centers are not represented in these data, nor are out-of-hospital births.

Rural and urban county status were defined using 2024 Urban Influence Codes⁶ and 2020 Standards for Delineating Core Based Statistical Areas⁷ from the Office of Management and Budget. Urban counties included those with a Metropolitan Statistical Area (with at least one urbanized area of 50,000 or more inhabitants). Counties without Metropolitan Statistical Areas were considered rural. Rural counties were further classified as either micropolitan (with a population of at least 10,000 but less than 50,000) or noncore (without a town of at least 10,000 inhabitants). Counties were classified once based on their status in the most recent year of data. Of note, in this report the term “county” is used to describe all counties and county-equivalents (e.g., independent cities, planning regions, parishes, boroughs, census areas, etc.), as defined by the US Census Bureau.⁸

Across the study period (2010–2023), counties were classified as either having 1) hospital-based obstetric services in 2010 and 2023, 2) gained hospital-based obstetric services since 2010, 3) lost hospital-based obstetric services by 2023, or 4) continuously lacking hospital-based obstetric services from 2010–2023. A small number of counties classified in category 1 (services in 2010 and 2023) had a period between 2010 and 2023 when

services were not available, and a small number classified in category 3 (loss of services) gained services after 2010 but then lost them by 2023. These situations are clarified in the notes of each state's map, when relevant. Some counties without hospital-based obstetric services may be classified as such because the county lacks or lost a hospital(s) altogether. These counties are not differentiated in the current report.

Of note, the District of Columbia (DC) has experienced changes in hospital-based obstetric services availability since 2010,⁹ but because DC does not contain counties, these changes are not visible at the county-level measure, and thus DC does not have its own page in this report.

Further, because of its small population and unique history, Hawaii's Kalawao County was combined with Maui County for the purpose of this report, consistent with precedent in the state.¹⁰

The county-level data used to generate the maps, figures, and summary statistics in this report are publicly available on the University of Minnesota Rural Health Research Center's Maternity Care Team website.¹¹

Do you know of a hospital that closed their obstetric/labor and delivery unit? Please email your information and tips to us here: RMC@umn.edu.

United States

Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, some United States counties lost hospital-based obstetric services; 26 counties—21 of which were rural—lost all in-county hospital-based obstetric services during this time. Only one county—which was rural—gained hospital-based obstetric services during this time.
- In 2023, 60% of rural counties and 38% of urban counties did not have hospital-based obstetric services (Figure 2).
- Access to obstetric care is limited in less populated rural counties. In 2023, 76% of rural noncore counties (without a town $> 10,000$) did not have hospital-based obstetric services (Figure 3).
- In 2023, the percentage of counties without hospital-based obstetric services varied across states; in 23 states, over 50% of all counties lacked hospital-based obstetric services (Figure 4).
- In 20 states, over 75% of counties that lacked hospital-based obstetric services in 2023 were rural counties (Figure 4).

Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across rural and urban United States counties between 2010 and 2023. During this period, 269 of 3,144 counties (8.6%) lost all hospital-based obstetric services (Map).
- In 2010, 50% of rural and 66% of urban counties had hospital-based obstetric services. By 2023, 40% of rural and 62% of urban counties had these services (Figure 2).
- Of the 203 rural counties that lost obstetric services between 2010 and 2023, 73% were noncore counties (without a town $> 10,000$).
- Between 2010 and 2023, the percentage of counties that lost hospital-based obstetric services varied by state; in 13 states, 10% of all counties lost these services during this period.
- In 12 states, 100% of counties that lost hospital-based obstetric services between 2010 and 2023 were rural counties (Figure 5).

Figure 1: Percentage of all US counties (n = 3,144) with in-county hospital-based obstetric services, 2010-2023

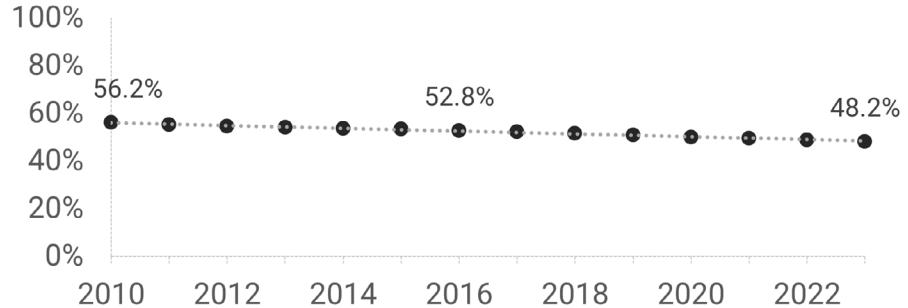


Figure 2: Percentage of US rural (n = 1,958) and urban (n = 1,186) counties with in-county hospital-based obstetric services, 2010-2023

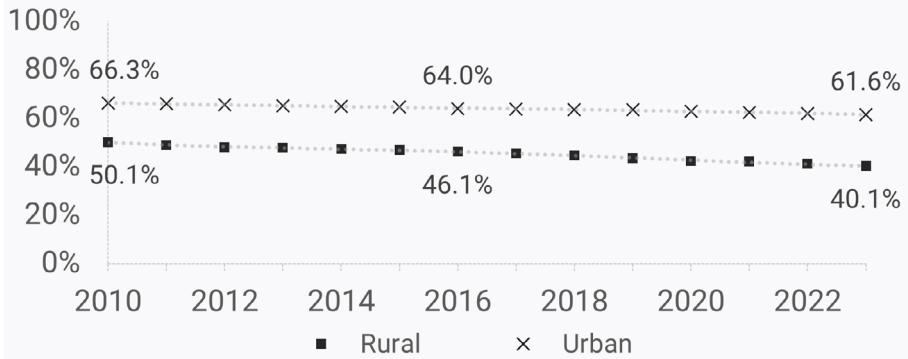
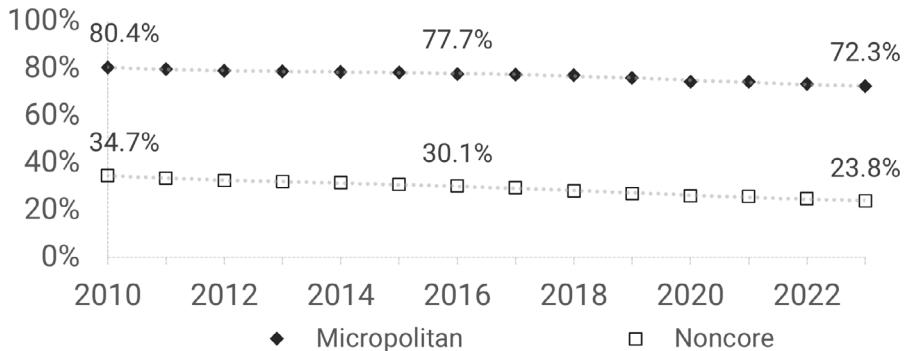
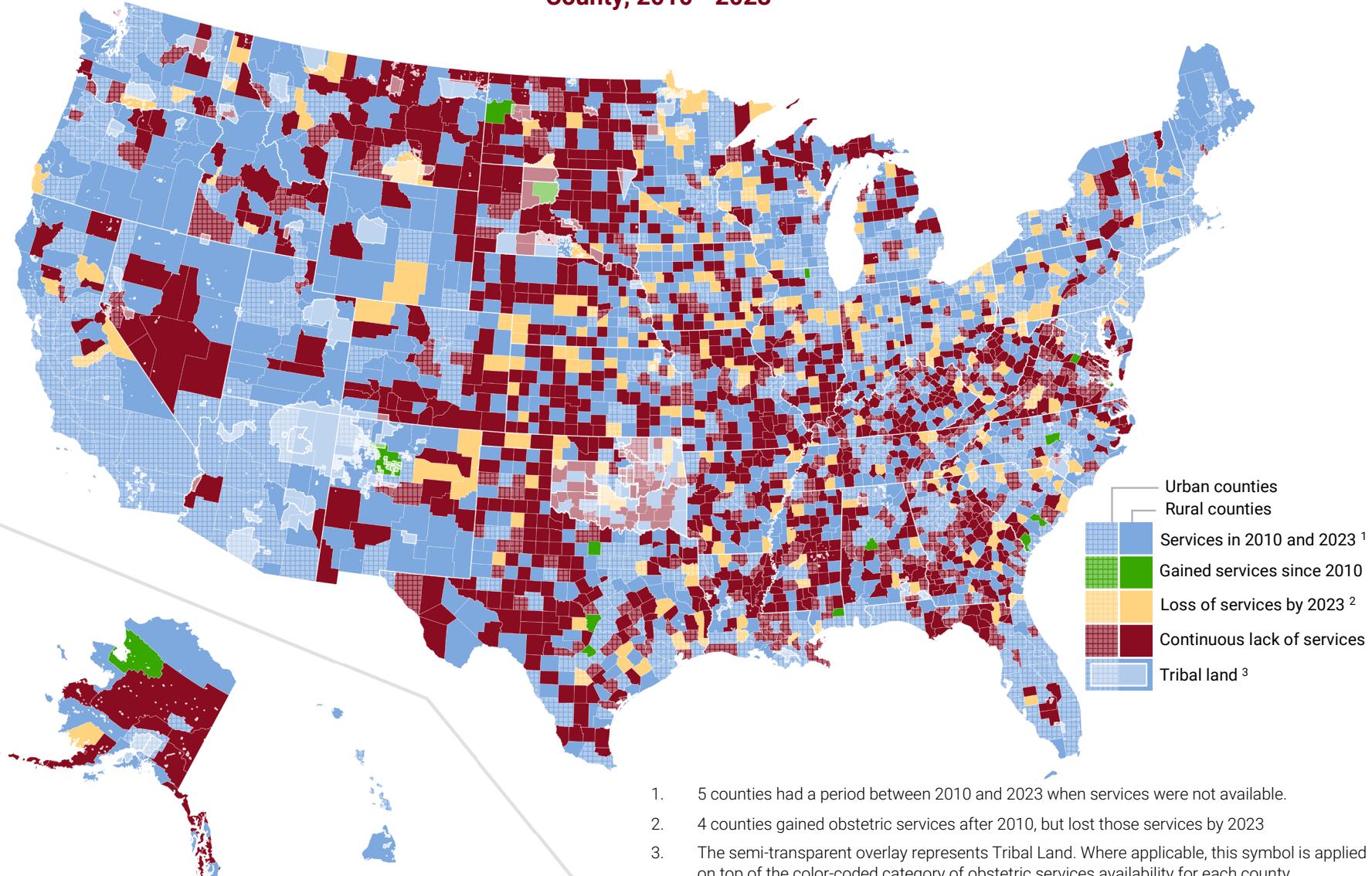


Figure 3: Percentage of US rural micropolitan (n = 658) and rural noncore (n = 1,300) counties with in-county hospital-based obstetric services, 2010-2023



United States

Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



United States

Figure 4: Percentage of counties without hospital-based obstetric services, by the proportion that were rural or urban, 2023

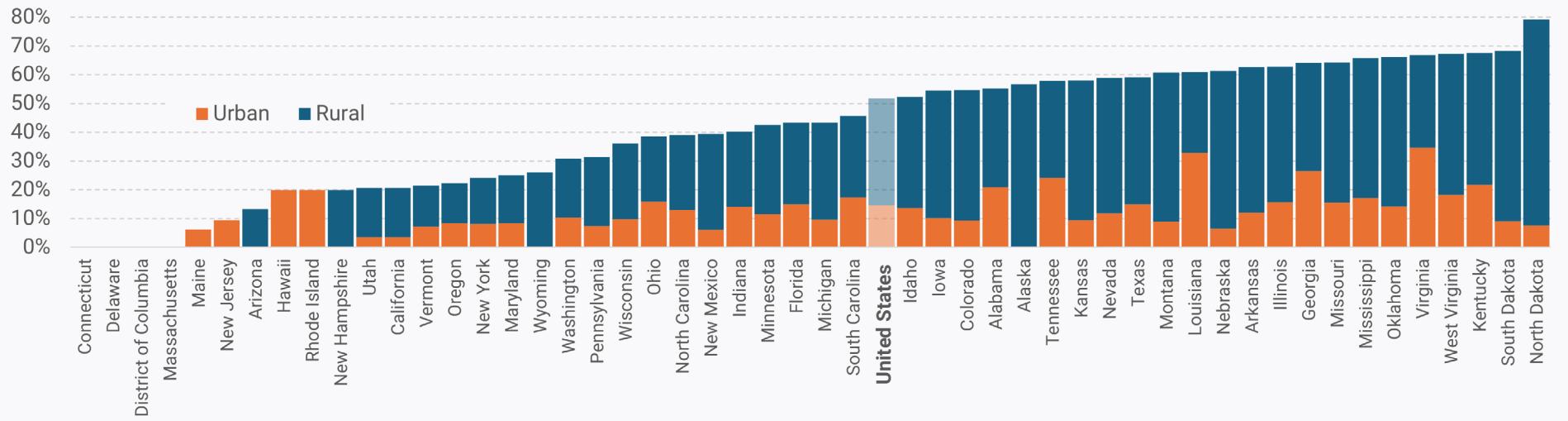
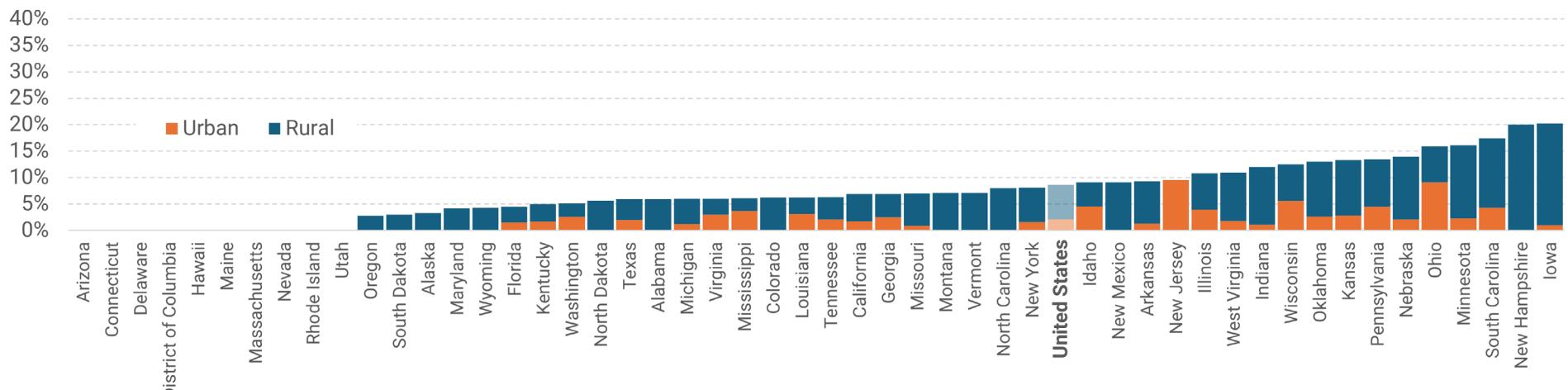


Figure 5: Percentage of counties that lost hospital-based obstetric services, by the proportion that were rural or urban, 2010–2023



Alabama

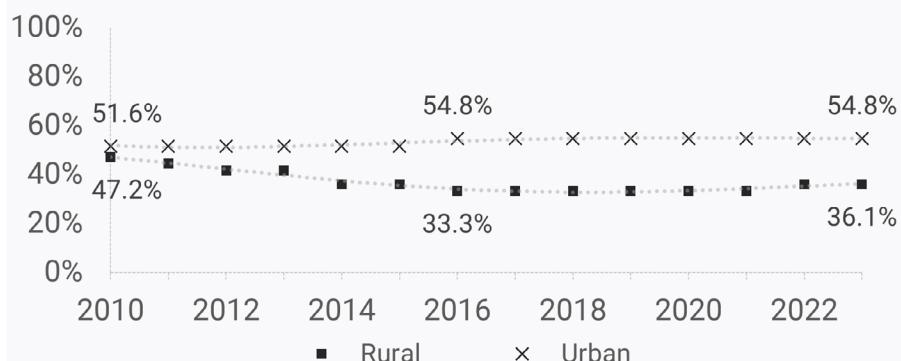
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Alabama.
- In 2023, 64% of rural and 44% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 77% of noncore rural counties (without a town > 10,000s) in Alabama lacked hospital-based obstetric services (Fig. 2).

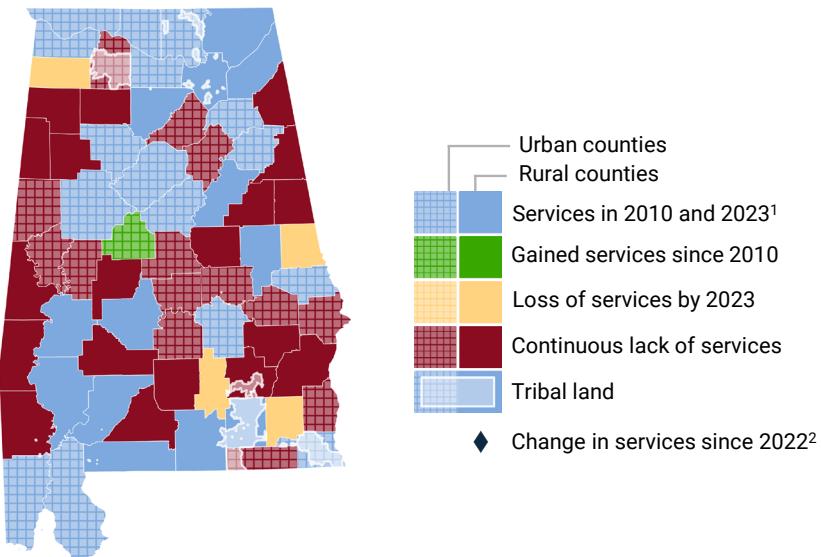
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more Alabama counties that lost hospital-based obstetric services than gained. During this period, 4 of Alabama's 67 counties lost all services, while 1 county (urban) gained services (Map).
- In 2010, 47% of rural and 52% of urban counties in Alabama had hospital-based obstetric services. By 2023, access dropped in rural counties but increased in urban, so that in 2023, 36% of rural and 55% of urban counties had these services (Fig. 1).
- Of the 4 counties (all rural) that lost all hospital-based obstetric services between 2010 and 2023, 75% were micropolitan (with a town > 10,000).

Figure 1: Percentage of Alabama rural (n = 36) and urban (n = 31) counties with in-county hospital-based obstetric care, 2010-2023

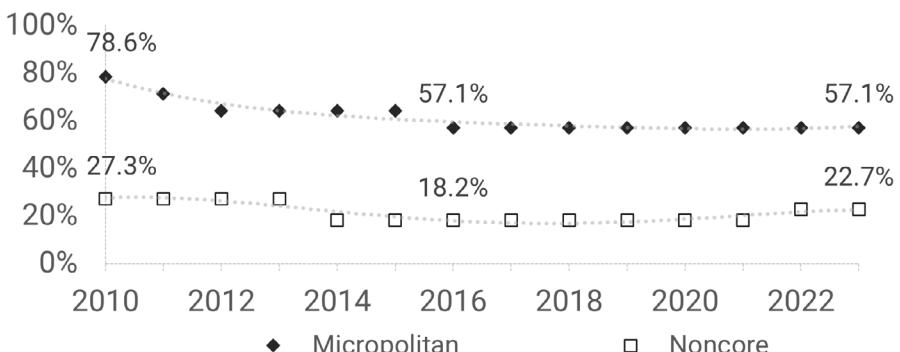


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- 1 county had a period between 2010 and 2023 when services were temporarily not available.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Alabama rural micropolitan (n = 14) and rural noncore (n = 22) counties with in-county hospital-based obstetric care, 2010-2023



Alaska

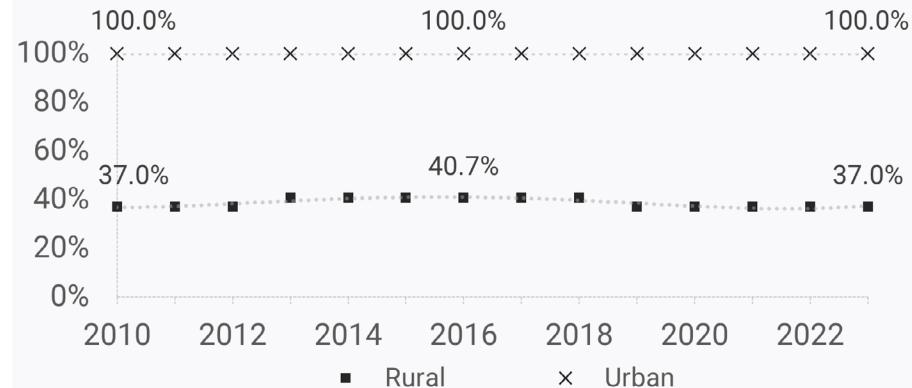
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Alaska.
- In 2023, 63% of rural counties did not have hospital-based obstetric services, compared to 0% of urban counties (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 68% of noncore rural counties (without a town $> 10,000$) in Alaska lacked hospital-based obstetric services (Fig. 2).

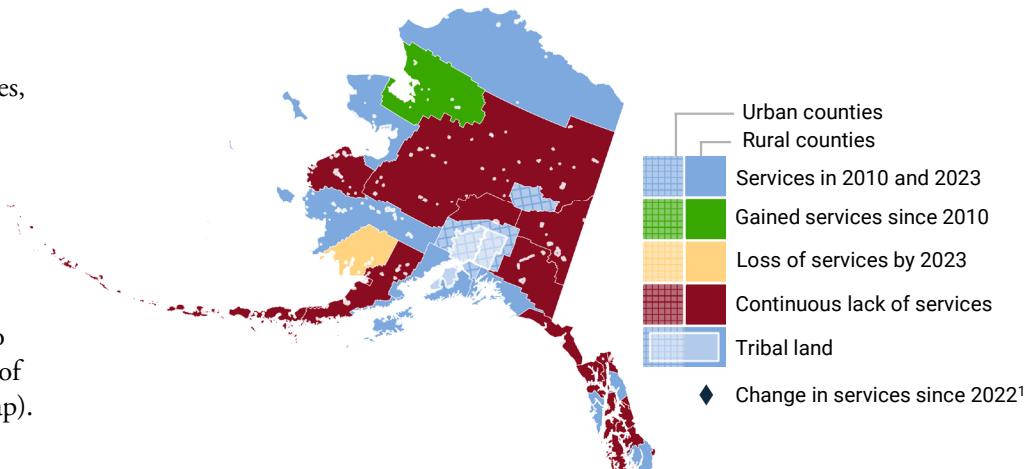
Changes in hospital-based obstetric services availability, 2010-2023

- There was no net change in the percentage of Alaska counties with access to hospital-based obstetric services from 2010 to 2023. During this period, 1 of Alaska's 30 counties lost all services and 1 county (rural) gained services (Map).
- In 2010, 37% of rural and 100% of urban counties in Alaska had hospital-based obstetric services. While access varied in rural counties between 2010 and 2023, by 2023 these percentages returned to 2010 levels. In urban counties, these percentages remained unchanged (Fig. 1).
- Both the county that lost and the county that gained hospital-based obstetric services were rural noncore counties (without a town $> 10,000$).

Figure 1: Percentage of Alaska rural ($n = 27$) and urban ($n = 3$) counties with in-county hospital-based obstetric care, 2010-2023

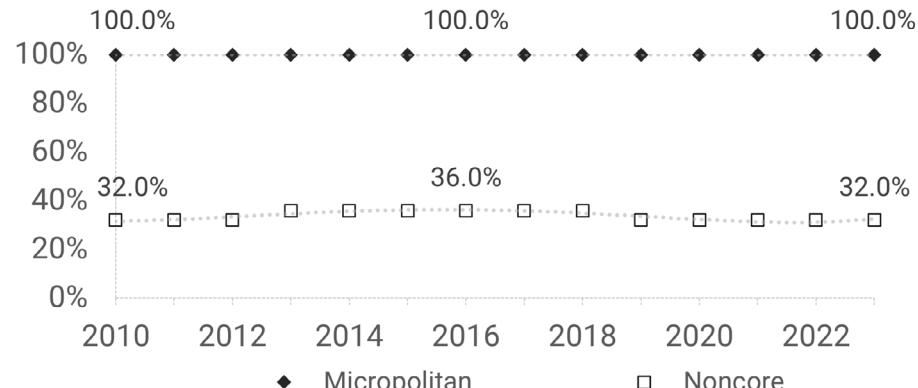


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Alaska rural micropolitan ($n = 2$) and rural noncore ($n = 25$) counties with in-county hospital-based obstetric care, 2010-2023



Arizona

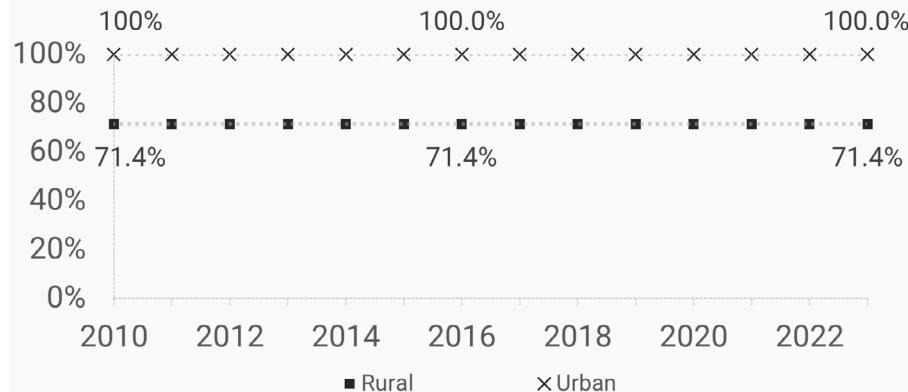
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Arizona.
- In 2023, 29% of rural counties did not have hospital-based obstetric services, compared to 0% of urban counties (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 67% of rural noncore counties (without a town $> 10,000$) in Arizona lacked hospital-based obstetric services (Fig. 2).

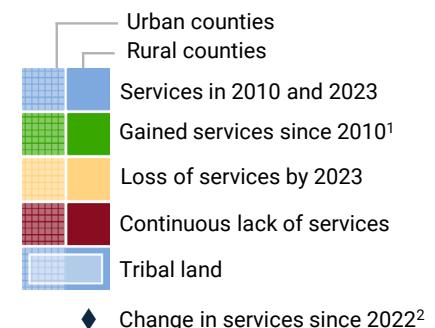
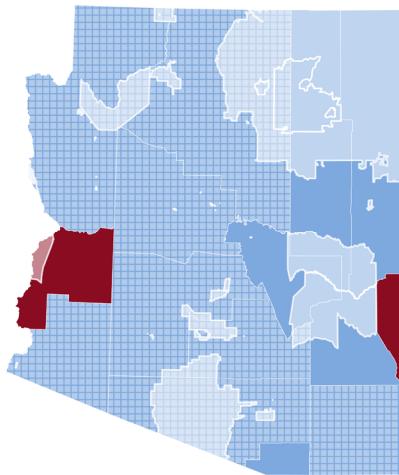
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, county-level access to hospital-based obstetric services did not change in Arizona. During this period, none of Arizona's 15 counties lost all services (Map).
- In 2010, 71% of rural and 100% of urban counties in Arizona had hospital-based obstetric services; these percentages were unchanged in 2023 (Fig. 1).
- Of the 2 counties in Arizona that continuously lacked hospital-based obstetric services between 2010 and 2023, both were rural noncore counties (without a town $> 10,000$) (Map/Fig. 2).

Figure 1: Percentage of Arizona rural ($n = 7$) and urban ($n = 8$) counties with in-county hospital-based obstetric care, 2010-2023

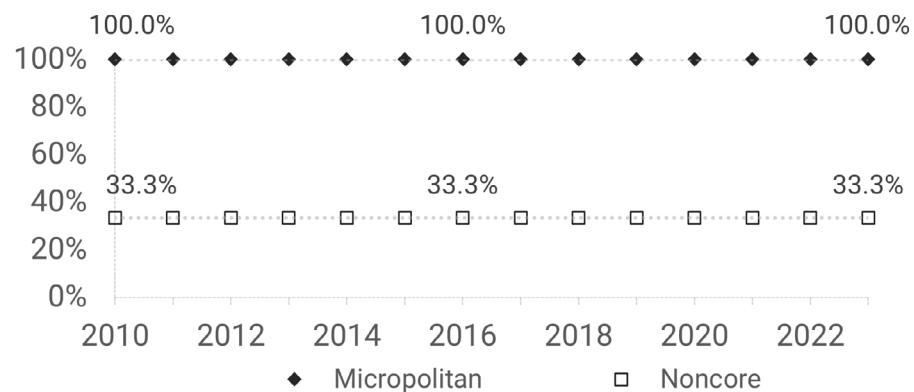


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Arizona rural micropolitan ($n = 4$) and rural noncore ($n = 3$) counties with in-county hospital-based obstetric care, 2010-2023



Arkansas

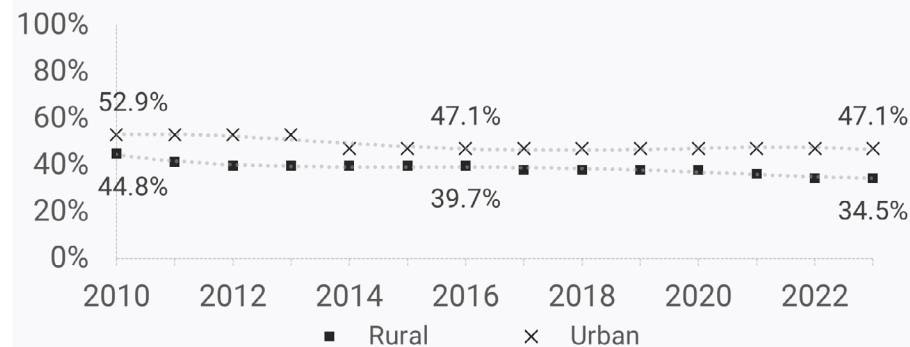
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Arkansas.
- In 2023, 66% of rural and 53% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 80% of rural noncore counties (without a town > 10,000) in Arkansas lacked hospital-based obstetric services (Fig. 2).

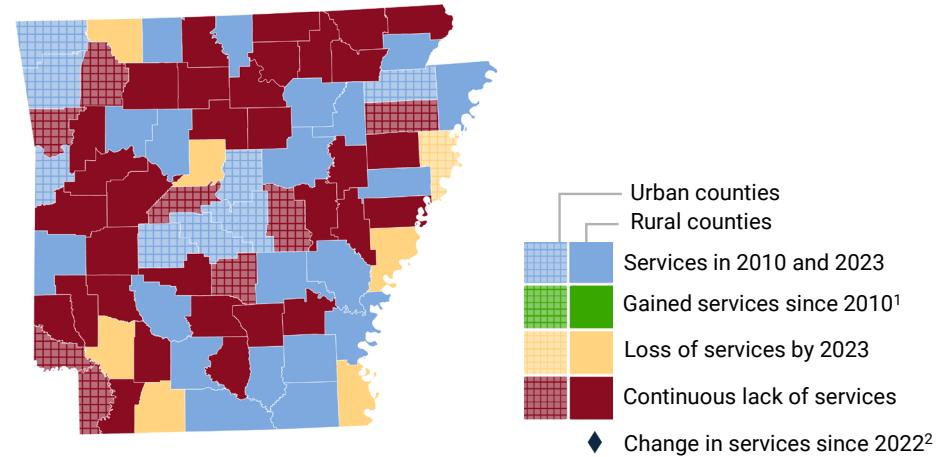
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Arkansas between 2010 and 2023, during which time 7 of Arkansas's 75 counties lost all services (Map).
- In 2010, 45% of rural and 53% of urban counties in Arkansas had hospital-based obstetric services. By 2023, access dropped, and 35% of rural and 47% of urban counties had these services (Fig. 1).
- Of the 6 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 83% were noncore (without a town > 10,000).

Figure 1: Percentage of Arkansas rural (n = 58) and urban (n = 17) counties with in-county hospital-based obstetric care, 2010-2023

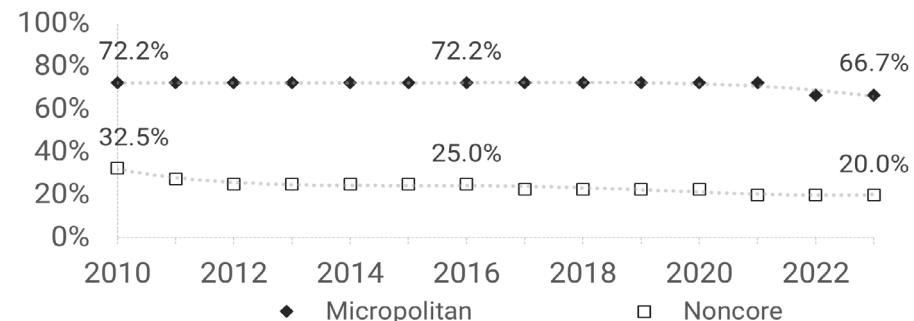


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Arkansas rural micropolitan (n = 18) and rural noncore (n = 40) counties with in-county hospital-based obstetric care, 2010-2023



California

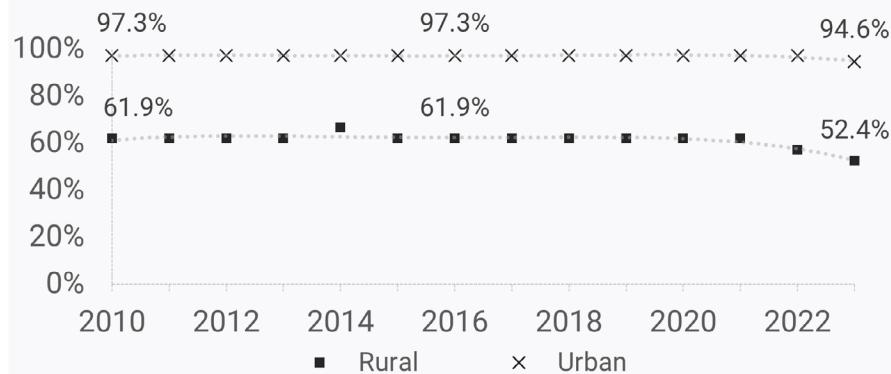
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 2 California counties (1 rural) lost all hospital-based obstetric services (Map).
- In 2023, 48% of rural and 5% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 82% of rural noncore counties (without a town > 10,000) in California lacked hospital-based obstetric services (Fig. 2).

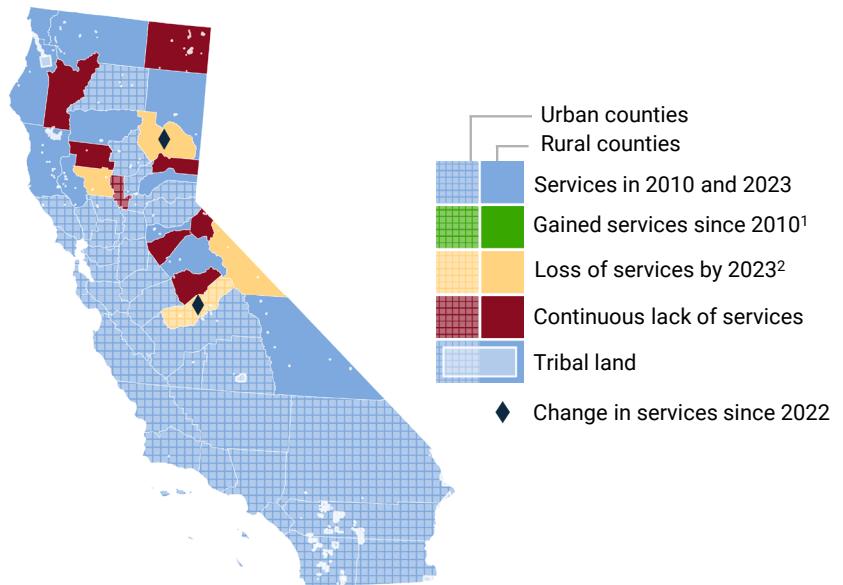
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across California between 2010 and 2023, during which time 4 of California's 58 counties lost all services (Map). Of these, one gained services after 2010 but lost all services by 2023.
- In 2010, 62% of rural and 97% of urban counties in California had hospital-based obstetric services. By 2023, access dropped, and 52% of rural and 95% of urban counties had these services (Fig. 1).
- Of the 3 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 100% were noncore (without a town > 10,000).

Figure 1: Percentage of California rural (n = 21) and urban (n = 37) counties with in-county hospital-based obstetric care, 2010-2023

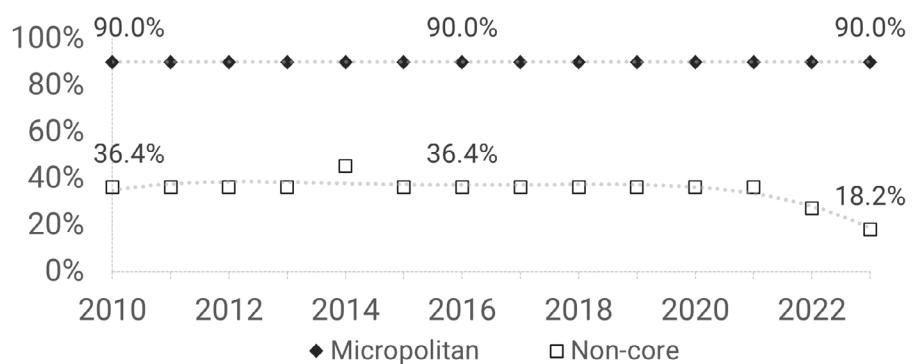


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained hospital-based obstetric services between 2010 and 2023 and maintained these services through 2023.
2. 1 county gained obstetric services after 2010 but then lost those services by 2023.

Figure 2: Percentage of California rural micropolitan (n = 10) and rural non-core (n = 11) counties with in-county hospital-based obstetric care, 2010-2023



Colorado

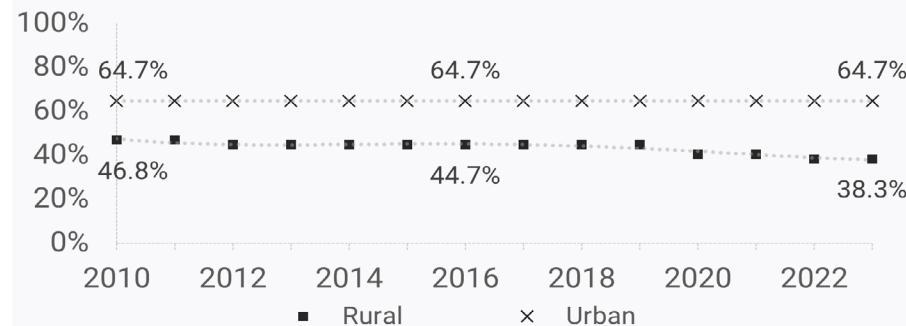
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Colorado.
- In 2023, 62% of rural and 35% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 78% of rural noncore counties (without a town $> 10,000$) in Colorado lacked hospital-based obstetric services (Fig. 2).

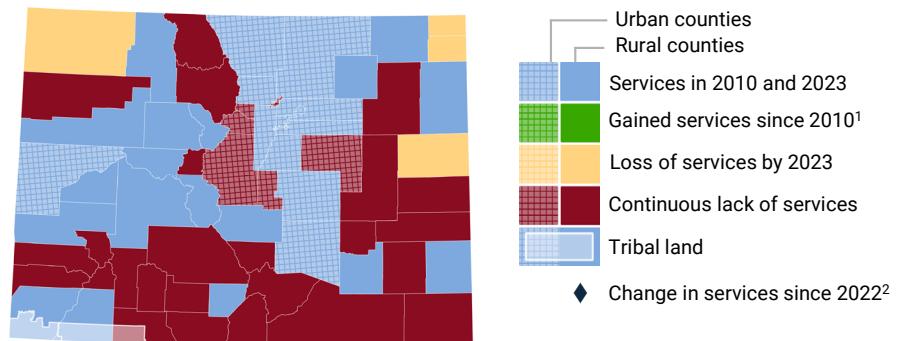
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Colorado counties between 2010 and 2023. During this period, 4 of Colorado's 64 counties lost all hospital-based obstetric services (Map).
- In 2010, 47% of rural and 65% of urban counties in Colorado had hospital-based obstetric services. By 2023, access dropped in rural counties but did not change in urban, so that in 2023, 38% of rural and 65% of urban counties had these services (Fig. 1).
- Of the 4 counties (all rural) that lost all hospital-based obstetric services between 2010 and 2023, 75% were noncore (without a town $> 10,000$).

Figure 1: Percentage of Colorado rural ($n = 47$) and urban ($n = 17$) counties with in-county hospital-based obstetric care, 2010-2023

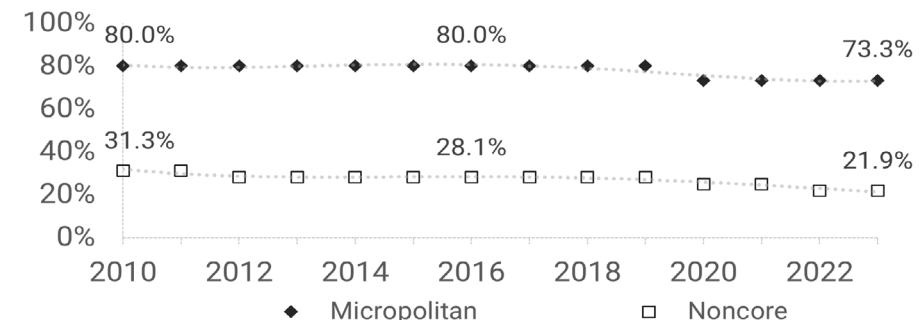


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Colorado rural micropolitan ($n = 15$) and rural noncore ($n = 32$) counties with in-county hospital-based obstetric care, 2010-2023



Connecticut

Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Connecticut.
- In 2023, all counties in Connecticut had hospital-based obstetric services (Fig. 1).

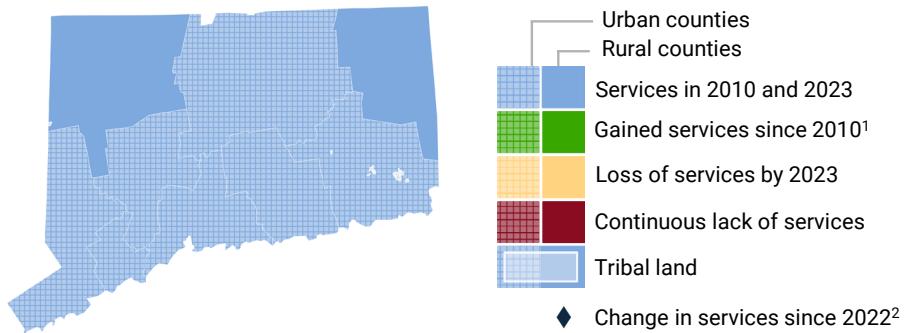
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, county-level access to hospital-based obstetric services did not change in Connecticut. During this period, none of Connecticut's 9 counties lost all hospital-based obstetric services (Map).
- In 2010, 100% of rural and urban counties in Connecticut had hospital-based obstetric services, and in 2023, these percentages remained unchanged (Fig. 1).

Figure 1: Percentage of Connecticut rural (n = 2) and urban (n = 7) counties with in-county hospital-based obstetric care, 2010-2023



Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Connecticut rural micropolitan* (n = 2) counties with in-county hospital-based obstetric care, 2010-2023



*There are no rural noncore counties in Connecticut.

Delaware

Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Delaware.
- In 2023, all counties in Delaware had hospital-based obstetric services (Fig. 1).

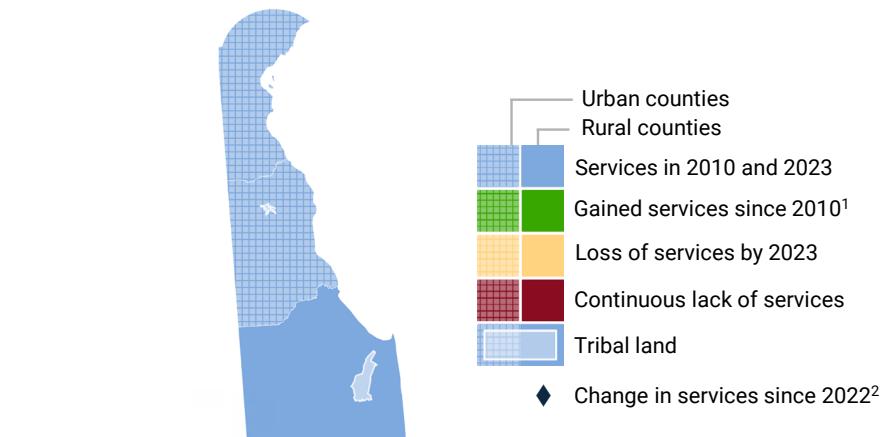
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, county-level access to hospital-based obstetric services did not change in Delaware. During this period, none of Delaware's 9 counties lost all hospital-based obstetric services (Map).
- In 2010, 100% of rural and urban counties in Delaware had hospital-based obstetric services, and in 2023, these percentages remained unchanged (Fig. 1).

Figure 1: Percentage of Delaware rural (n = 1) and urban (n = 2) counties with in-county hospital-based obstetric care, 2010-2023

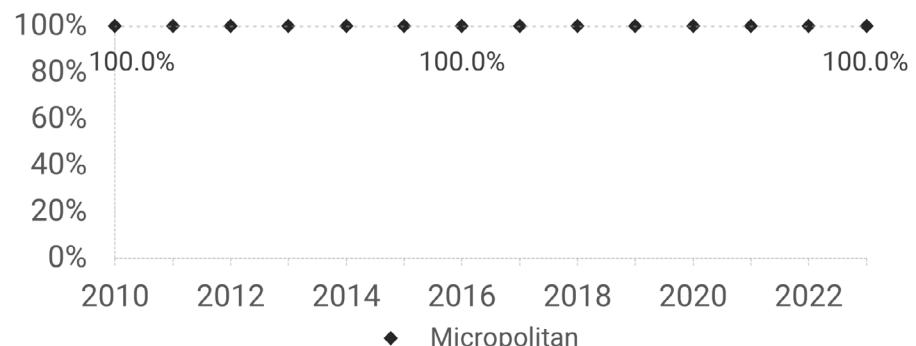


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Delaware rural micropolitan* (n = 1) counties with in-county hospital-based obstetric care, 2010-2023



*There are no rural noncore counties in Delaware.

Florida

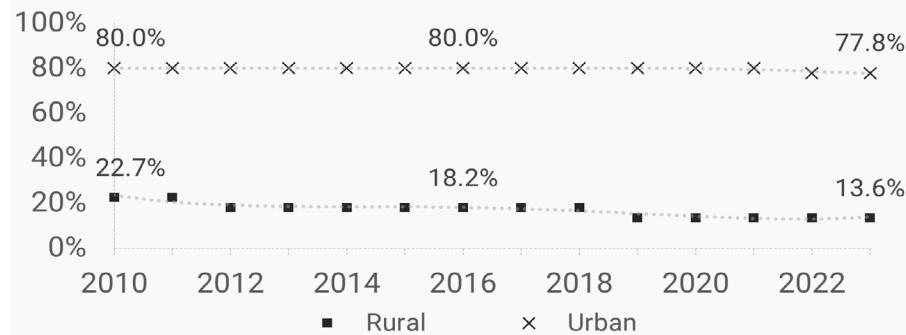
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Florida.
- In 2023, 86% of rural and 22% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 93% of rural noncore counties (without a town $> 10,000$) in Florida lacked hospital-based obstetric services (Fig. 2).

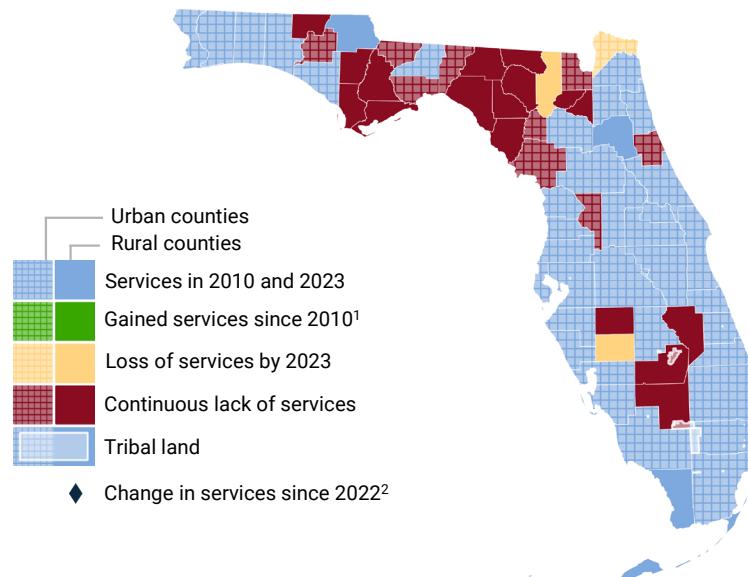
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Florida between 2010 and 2023, during which time 3 of Florida's 67 counties lost all hospital-based obstetric services (Map).
- In 2010, 23% of rural and 80% of urban counties in Florida had hospital-based obstetric services. By 2023, access dropped, and 14% of rural and 78% of urban counties had these services (Fig. 1).
- Of the 2 rural counties that lost all hospital-based obstetric services between 2010 and 2023, both were micropolitan (with a town $> 10,000$).

Figure 1: Percentage of Florida rural (n = 22) and urban (n = 45) counties with in-county hospital-based obstetric care, 2010-2023

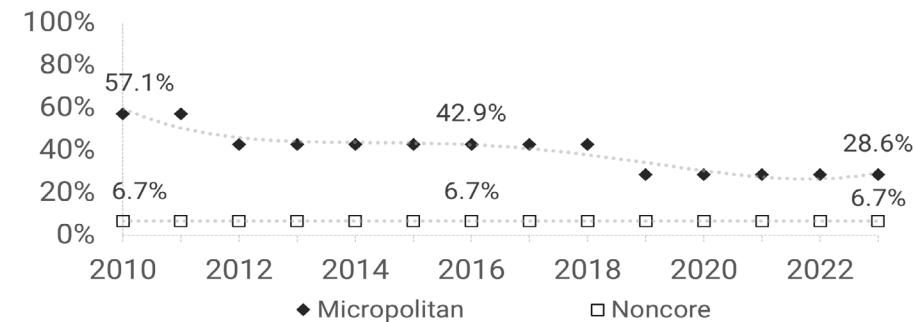


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Florida rural micropolitan (n = 7) and rural noncore (n = 15) counties with in-county hospital-based obstetric care, 2010-2023



Georgia

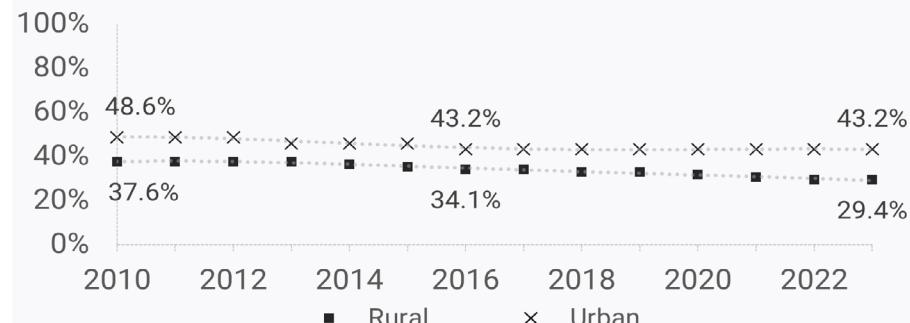
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Georgia.
- In 2023, 71% of rural and 57% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 91% of rural noncore counties (without a town > 10,000) in Georgia lacked hospital-based obstetric services (Fig. 2).

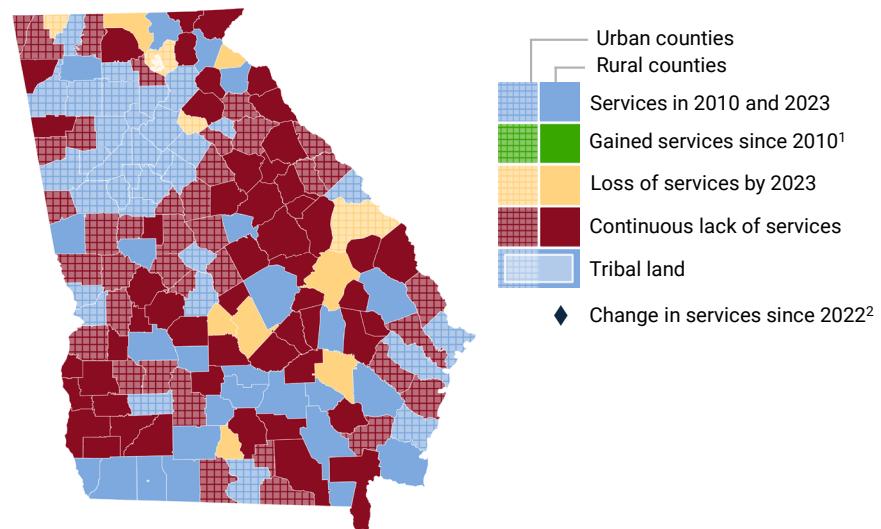
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Georgia between 2010 and 2023, during which time 11 of Georgia's 159 counties lost all services (Map).
- In 2010, 38% of rural and 49% of urban counties in Georgia had hospital-based obstetric services. By 2023, access dropped, and 29% of rural and 43% of urban counties had these services (Fig. 1).
- Of the 7 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 86% were noncore (without a town > 10,000).

Figure 1: Percentage of Georgia rural (n = 85) and urban (n = 74) counties with in-county hospital-based obstetric care, 2010-2023

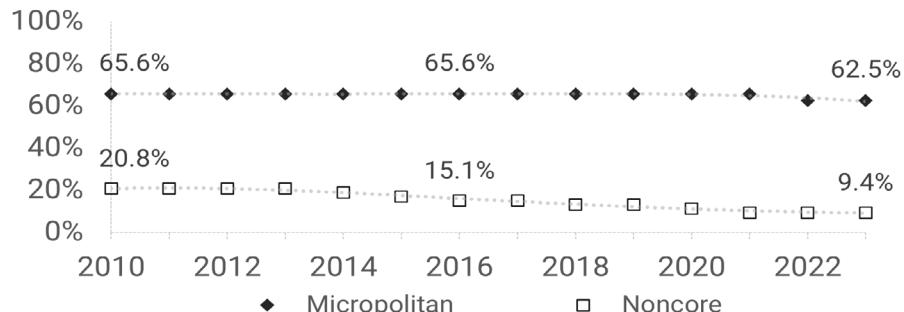


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Georgia rural micropolitan (n = 32) and rural noncore (n = 53) counties with in-county hospital-based obstetric care, 2010-2023



Hawaii

Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Hawaii.
- In 2023, all counties in Hawaii had hospital-based obstetric services (Fig. 1).

Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, county-level access to hospital-based obstetric services did not change in Hawaii. During this period, none of Hawaii's 4 counties* lost all hospital-based obstetric services (Map).
- In 2010, 100% of rural and 100% of urban counties in Hawaii had hospital-based obstetric service, and in 2023, these percentages remained unchanged (Fig. 1).

Figure 1: Percentage of Hawaii rural (n = 2) and urban (n = 2) counties* with in-county hospital-based obstetric care, 2010-2023



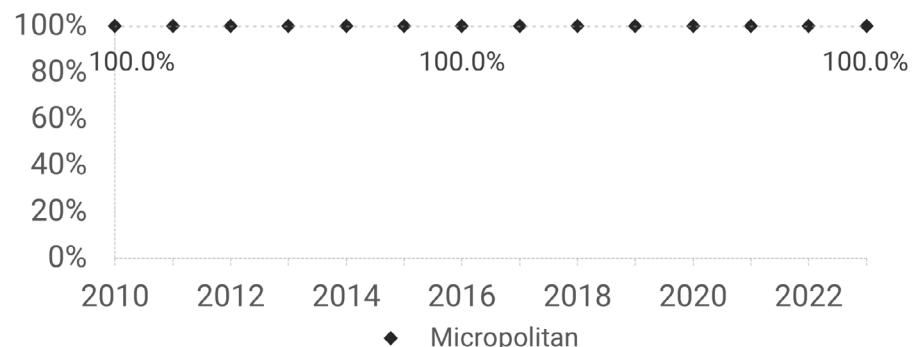
*Due to its small population and unique history, Kalawao County was combined with Maui County for the purpose of this report.

Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Hawaii rural micropolitan[†] (n = 2) counties with in-county hospital-based obstetric care, 2010-2023



[†] There are no rural noncore counties in Hawaii.

Idaho

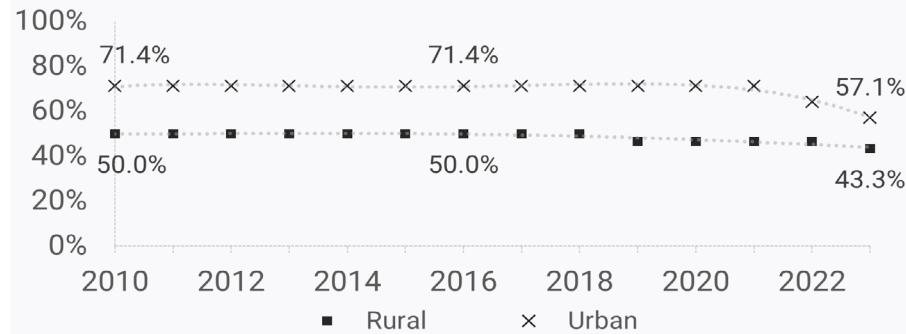
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 2 Idaho counties (both rural) lost all hospital-based obstetric services (Map).
- In 2023, 57% of rural and 43% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 56% of rural noncore counties (without a town $> 10,000$) in Idaho lacked hospital-based obstetric services (Fig. 2).

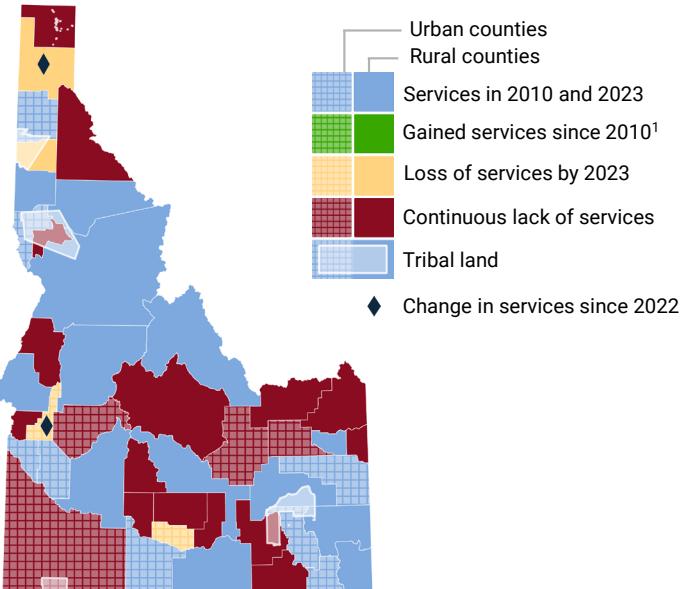
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Idaho between 2010 and 2023, during which time 4 of Idaho's 44 counties lost all services (Map).
- In 2010, 50% of rural and 71% of urban counties in Idaho had hospital-based obstetric services. By 2023, access dropped, and 43% of rural and 57% of urban counties had these services (Fig. 1).
- Of the 2 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 1 was noncore (without a town $> 10,000$).

Figure 1: Percentage of Idaho rural (n = 30) and urban (n = 14) counties with in-county hospital-based obstetric care, 2010-2023

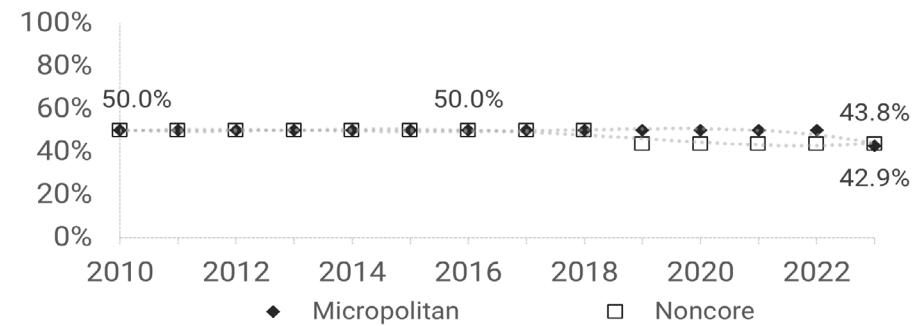


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.

Figure 2: Percentage of Idaho rural micropolitan (n = 14) and rural noncore (n = 16) counties with in-county hospital-based obstetric care, 2010-2023



Illinois

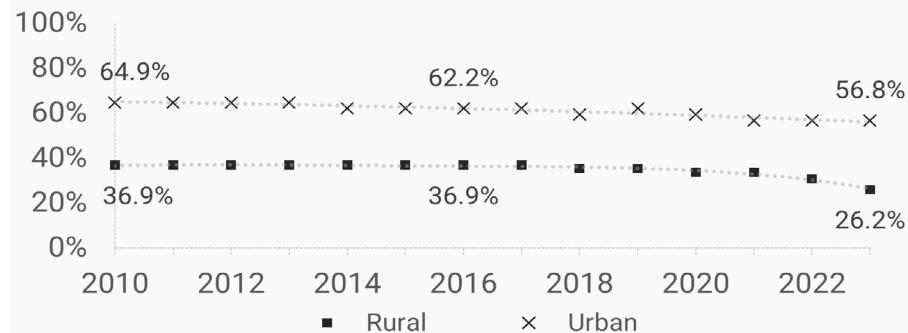
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, several Illinois counties lost all hospital-based obstetric services; 3 counties (all rural) lost all services during this time (Map).
- In 2023, 74% of rural and 43% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 92% of rural noncore counties (without a town $> 10,000$) in Illinois lacked hospital-based obstetric services (Fig. 2).

Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more Illinois counties that lost hospital-based obstetric services than gained. During this period, 11 of Illinois's 102 counties lost all services and 1 county (urban) gained services (Map).
- In 2010, 37% of rural and 65% of urban counties in Illinois had hospital-based obstetric services. By 2023, access dropped, and 26% of rural and 57% of urban counties had these services (Fig. 1).
- Of the 7 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 29% were noncore (without a town $> 10,000$).

Figure 1: Percentage of Illinois rural (n = 65) and urban (n = 37) counties with in-county hospital-based obstetric care, 2010-2023



Availability of Hospital-Based Obstetric Services by County, 2010 - 2023

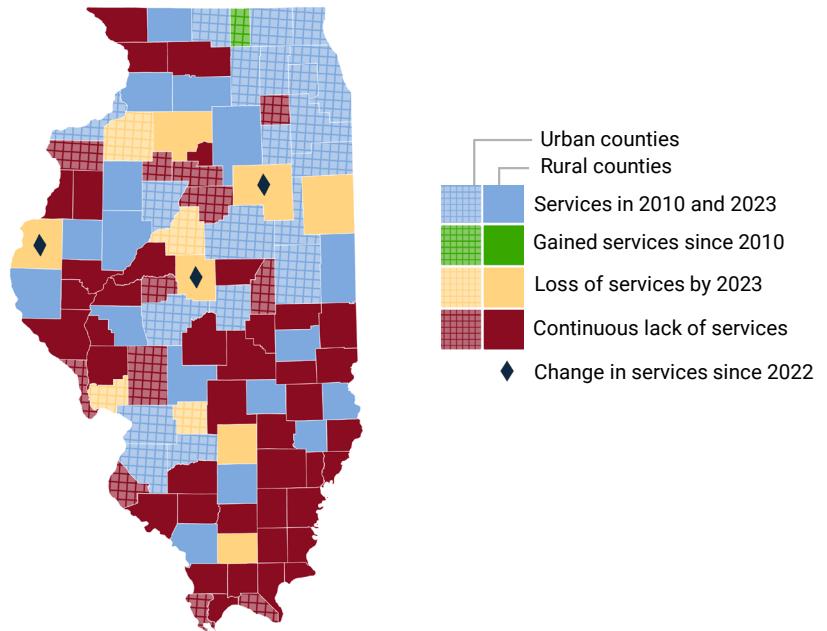
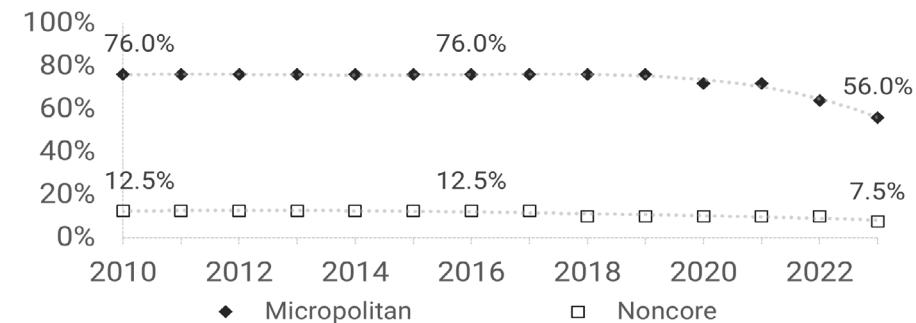


Figure 2: Percentage of Illinois rural micropolitan (n = 25) and rural noncore (n = 40) counties with in-county hospital-based obstetric care, 2010-2023



Indiana

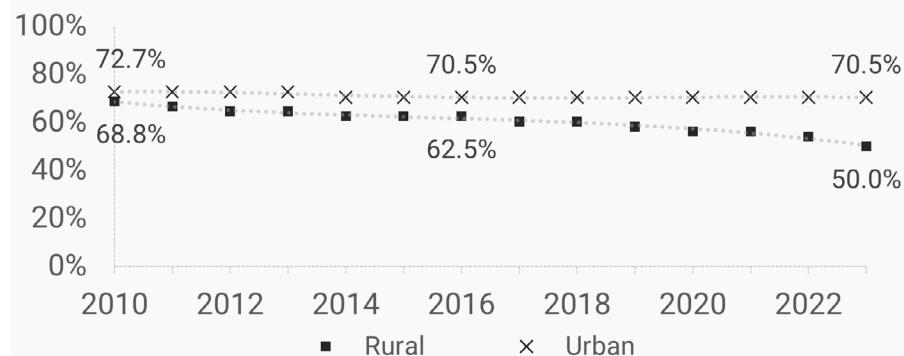
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 2 Indiana counties (both rural) lost all hospital-based obstetric services (Map).
- In 2023, 50% of rural and 29% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 74% of rural noncore counties (without a town $> 10,000$) in Indiana lacked hospital-based obstetric services (Fig. 2).

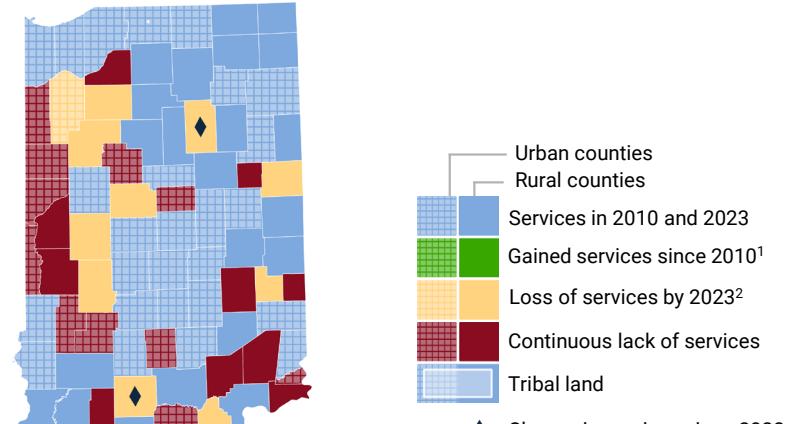
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Indiana between 2010 and 2023, during which time 11 of Indiana's 92 counties lost all services (Map). One of these counties gained services after 2010 but lost all services by 2023.
- In 2010, 69% of rural and 73% of urban counties in Indiana had hospital-based obstetric services. By 2023, access dropped, and 50% of rural and 71% of urban counties had these services (Fig. 1).
- Of the 10 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 70% were micropolitan (with a town $> 10,000$).

Figure 1: Percentage of Indiana rural ($n = 48$) and urban ($n = 44$) counties with in-county hospital-based obstetric care, 2010-2023

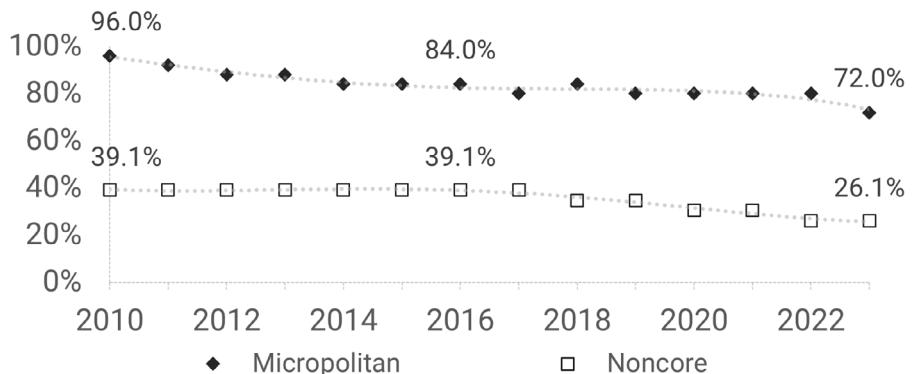


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained hospital-based obstetric services between 2010 and 2023 and maintained these services through 2023.
- 1 county gained obstetric services after 2010 but then lost those services by 2023.

Figure 2: Percentage of Indiana rural micropolitan ($n = 25$) and rural noncore ($n = 23$) counties with in-county hospital-based obstetric care, 2010-2023



Iowa

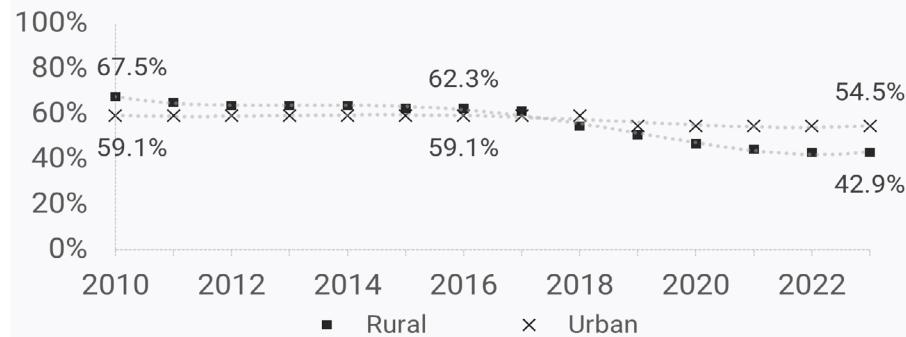
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Iowa.
- In 2023, 57% of rural and 45% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 67% of rural noncore counties (without a town $> 10,000$) in Iowa lacked hospital-based obstetric services (Fig. 2).

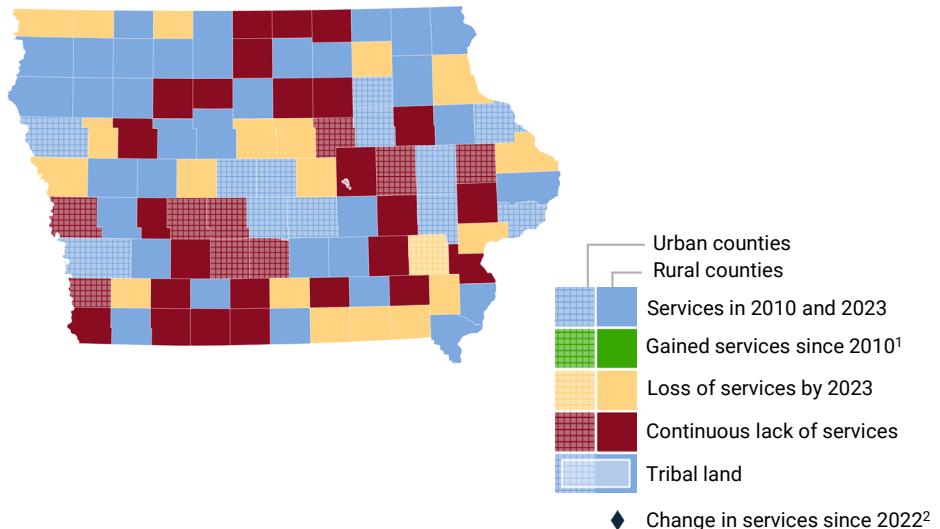
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Iowa between 2010 and 2023, during which time 20 of Iowa's 99 counties lost all services (Map).
- In 2010, 68% of rural and 59% of urban counties in Iowa had hospital-based obstetric services. By 2023, access dropped, and 43% of rural and 55% of urban counties had these services (Fig. 1).
- Of the 19 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 89% were noncore (without a town $> 10,000$).

Figure 1: Percentage of Iowa rural (n = 77) and urban (n = 22) counties with in-county hospital-based obstetric care, 2010-2023

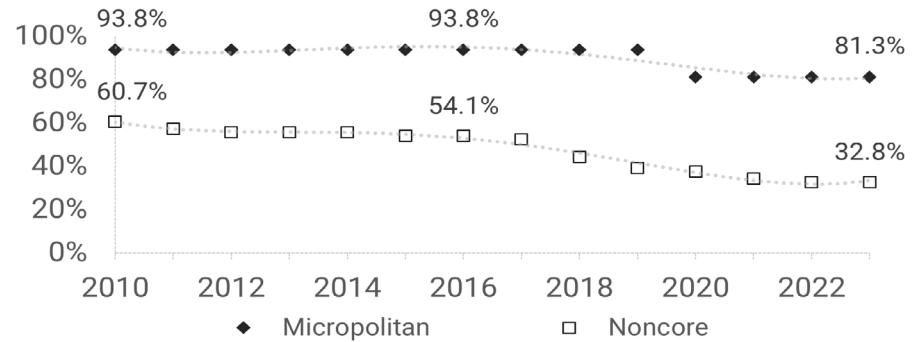


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Iowa rural micropolitan (n = 16) and rural noncore (n = 61) counties with in-county hospital-based obstetric care, 2010-2023



Kansas

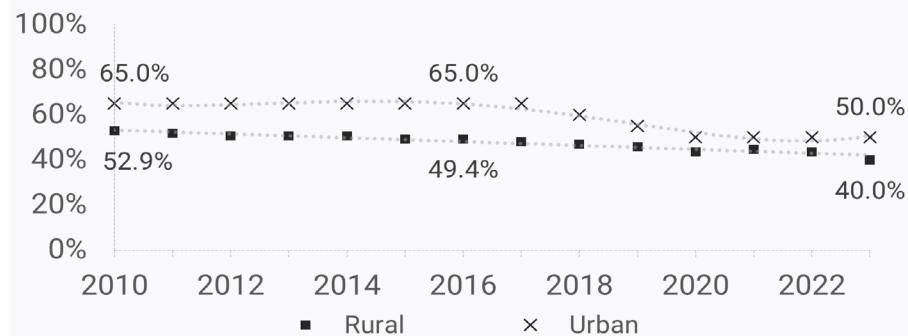
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, several Kansas counties lost hospital-based obstetric services; 3 counties (all rural) lost all services during this time (Map).
- In 2023, 60% of rural and 50% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 70% of rural noncore counties (without a town $> 10,000$) in Kansas lacked hospital-based obstetric services (Fig. 2).

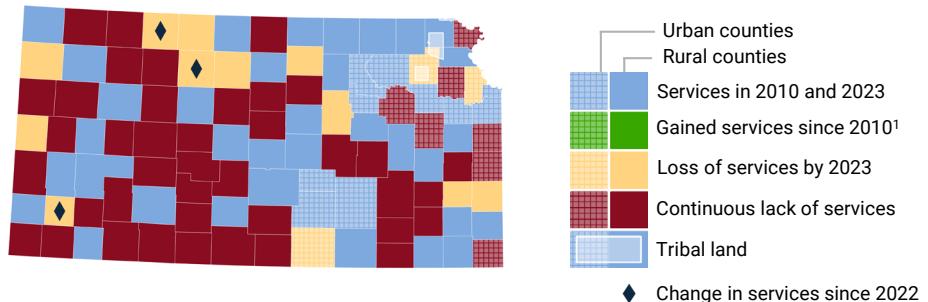
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Kansas between 2010 and 2023, during which time 14 of Kansas's 105 counties lost all services (Map).
- In 2010, 53% of rural and 65% of urban counties in Kansas had hospital-based obstetric services. By 2023, access dropped, and 40% of rural and 50% of urban counties had these services (Fig. 1).
- Of the 11 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 100% were noncore (without a town $> 10,000$).

Figure 1: Percentage of Kansas rural (n = 85) and urban (n = 20) counties with in-county hospital-based obstetric care, 2010-2023

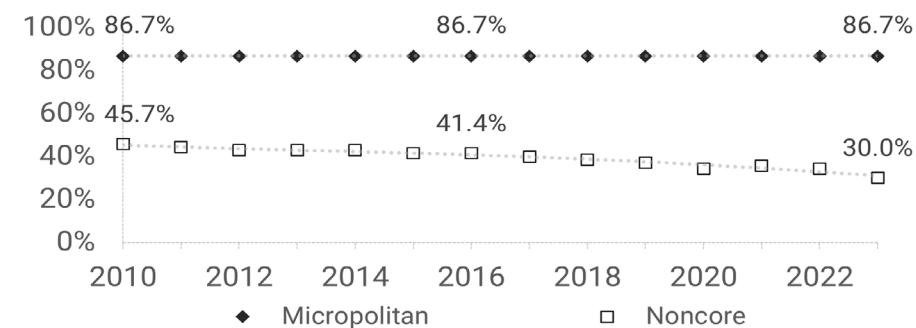


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.

Figure 2: Percentage of Kansas rural micropolitan (n = 15) and rural noncore (n = 70) counties with in-county hospital-based obstetric care, 2010-2023



Kentucky

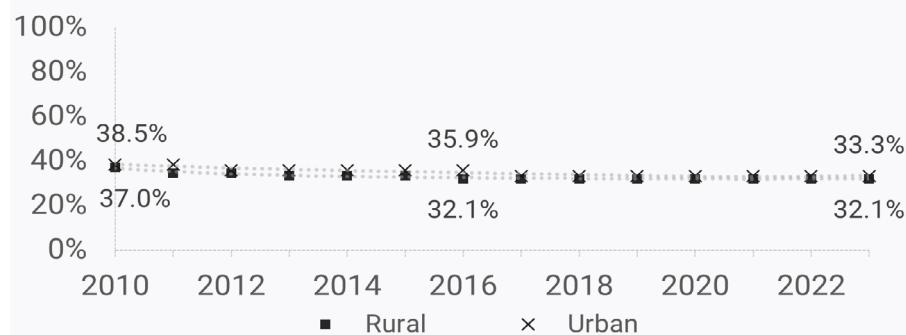
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Kentucky.
- In 2023, 68% of rural and 67% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 85% of rural noncore counties (without a town > 10,000) in Kentucky lacked hospital-based obstetric services (Fig. 2).

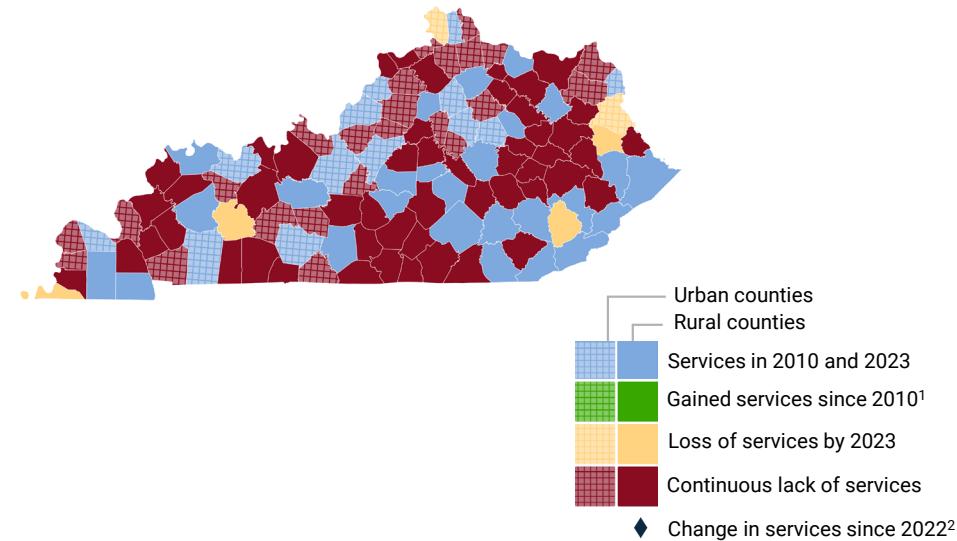
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Kentucky between 2010 and 2023, during which time 6 of Kentucky's 120 counties lost all services (Map).
- In 2010, 37% of rural and 39% of urban counties in Kentucky had hospital-based obstetric services. By 2023, access dropped, and 32% of rural and 33% of urban counties had these services (Fig. 1).
- Of the 4 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 100% were noncore (without a town > 10,000).

Figure 1: Percentage of Kentucky rural (n = 81) and urban (n = 39) counties with in-county hospital-based obstetric care, 2010-2023

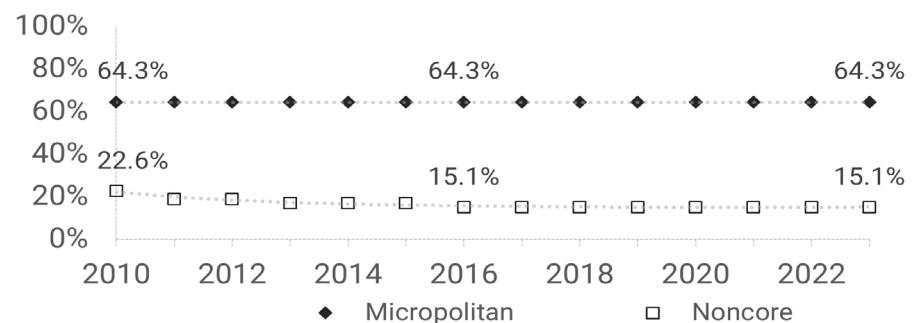


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Kentucky rural micropolitan (n = 28) and rural noncore (n = 53) counties with in-county hospital-based obstetric care, 2010-2023



Louisiana

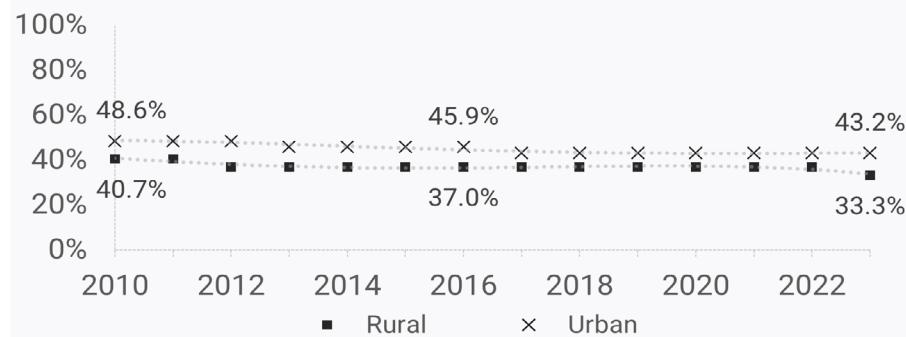
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 1 Louisiana county (rural) lost all hospital-based obstetric services (Map).
- In 2023, 67% of rural and 57% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 94% of rural noncore counties (without a town > 10,000) in Louisiana lacked hospital-based obstetric services (Fig. 2).

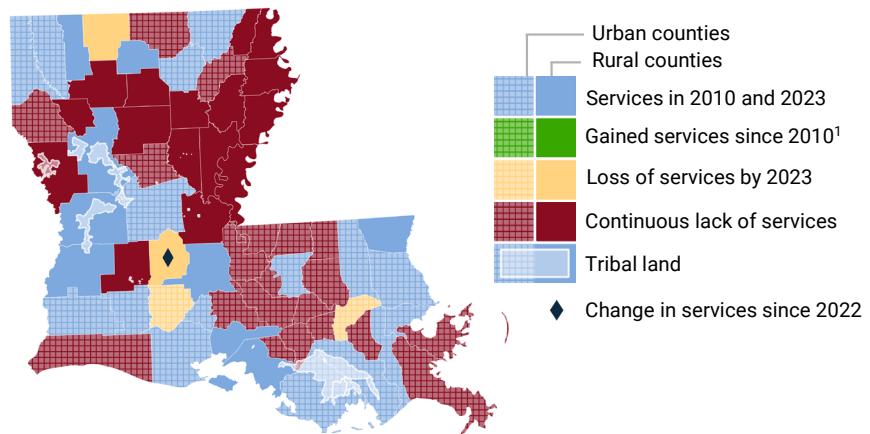
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Louisiana between 2010 and 2023, during which time 4 of Louisiana's 64 counties lost all services (Map).
- In 2010, 41% of rural and 49% of urban counties in Louisiana had hospital-based obstetric services. By 2023, access dropped, and 33% of rural and 43% of urban counties had these services (Fig. 1).
- Of the 2 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 100% were noncore (without a town > 10,000).

Figure 1: Percentage of Louisiana rural (n = 27) and urban (n = 37) counties with in-county hospital-based obstetric care, 2010-2023

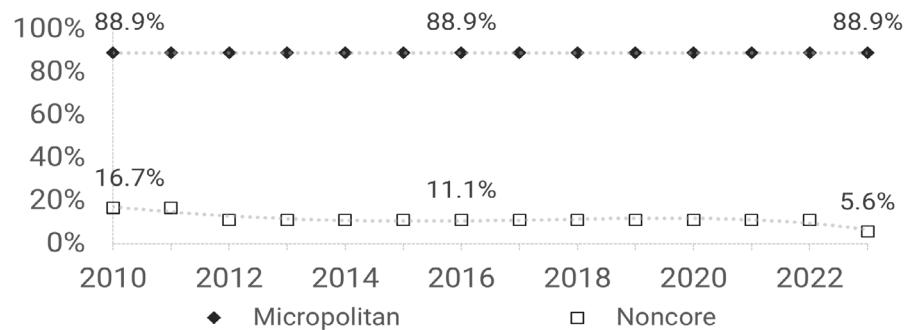


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.

Figure 2: Percentage of Louisiana rural micropolitan (n = 9) and rural noncore (n = 18) counties with in-county hospital-based obstetric care, 2010-2023



Maine

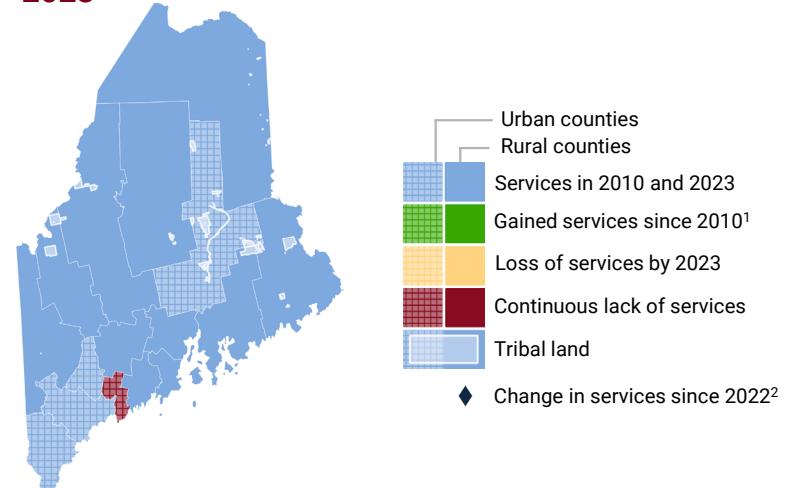
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Maine.
- In 2023, 20% of urban counties did not have hospital-based obstetric services, compared to 0% in rural (Fig. 1).

Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, county-level access to hospital-based obstetric services did not change in Maine. During this period, none of Maine's 16 counties lost all hospital-based obstetric services (Map).
- In 2010, 100% of rural and 80% of urban counties in Maine had hospital-based obstetric services; in 2023, these percentages remained unchanged (Fig. 1).

Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 1: Percentage of Maine rural (n = 11) and urban (n = 5) counties with in-county hospital-based obstetric care, 2010-2023

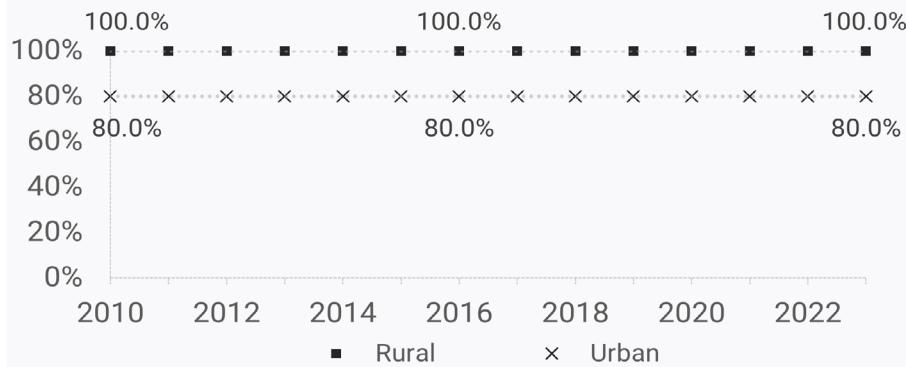
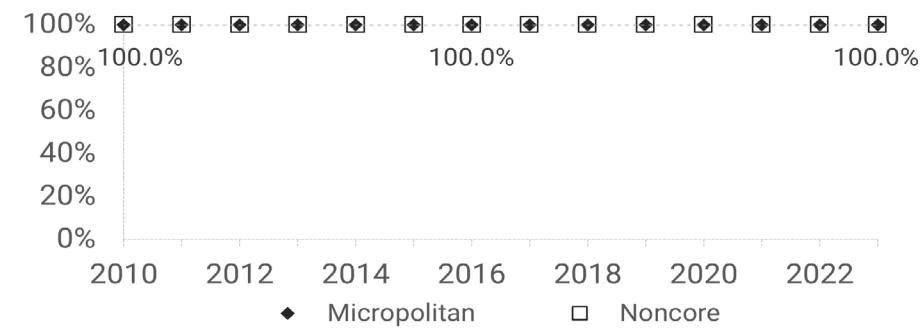


Figure 2: Percentage of Maine rural micropolitan (n = 1) and rural noncore (n = 10) counties with in-county hospital-based obstetric care, 2010-2023



Maryland

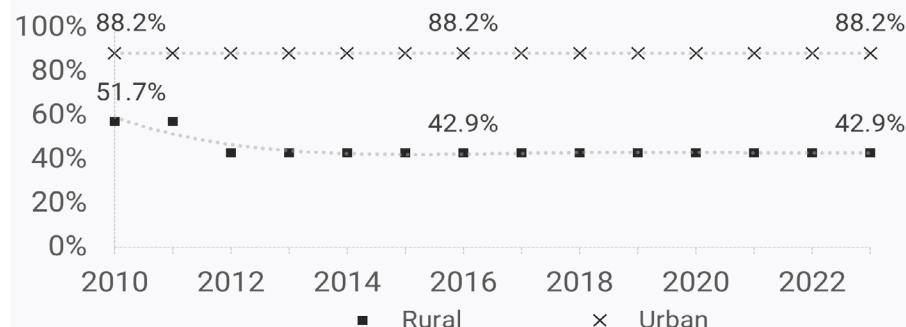
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Maryland.
- In 2023, 57% of rural and 12% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 67% of rural noncore counties (without a town $> 10,000$) in Maryland lacked hospital-based obstetric services (Fig. 2).

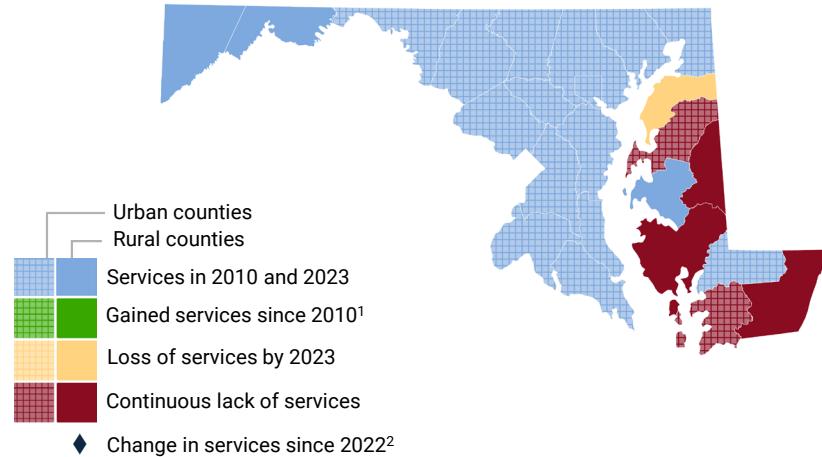
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Maryland between 2010 and 2023, during which time 1 of Maryland's 24 counties lost all services (Map).
- In 2010, 52% of rural and 88% of urban counties in Maryland had hospital-based obstetric services. By 2023, access dropped in rural counties and did not change in urban, so that in 2023, 43% of rural and 88% of urban counties had these services (Fig. 1).
- The county that lost all hospital-based obstetric services between 2010 and 2023 was a rural noncore county (without a town $> 10,000$).

Figure 1: Percentage of Maryland rural (n = 7) and urban (n = 17) counties with in-county hospital-based obstetric care, 2010-2023

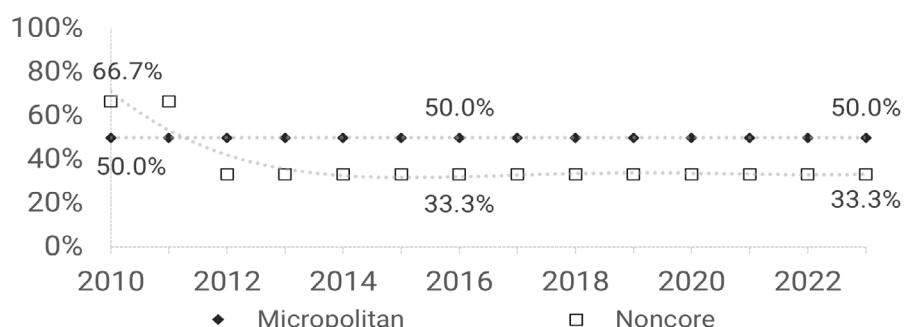


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Maryland rural micropolitan (n = 4) and rural noncore (n = 3) counties with in-county hospital-based obstetric care, 2010-2023



Massachusetts

Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Massachusetts.
- In 2023, all counties in Massachusetts had hospital-based obstetric services (Fig. 1).

Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, county-level access to hospital-based obstetric services did not change in Massachusetts. During this period, none of Massachusetts's 14 counties lost all hospital-based obstetric services (Map)
- In 2010, 100% of rural and urban counties in Massachusetts had hospital-based obstetric services, and in 2023, these percentages remained unchanged (Fig. 1).

Figure 1: Percentage of Massachusetts rural (n = 3) and urban (n = 11) counties with in-county hospital-based obstetric care, 2010-2023

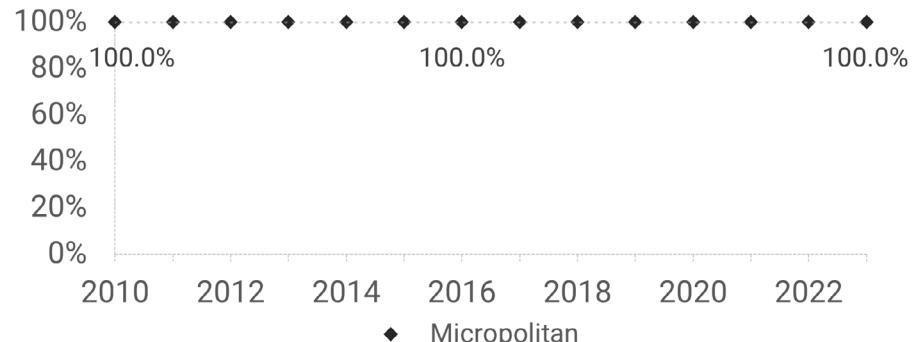


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Massachusetts rural micropolitan* (n = 3) counties with in-county hospital-based obstetric care, 2010-2023



*There are no rural noncore counties in Massachusetts.

Michigan

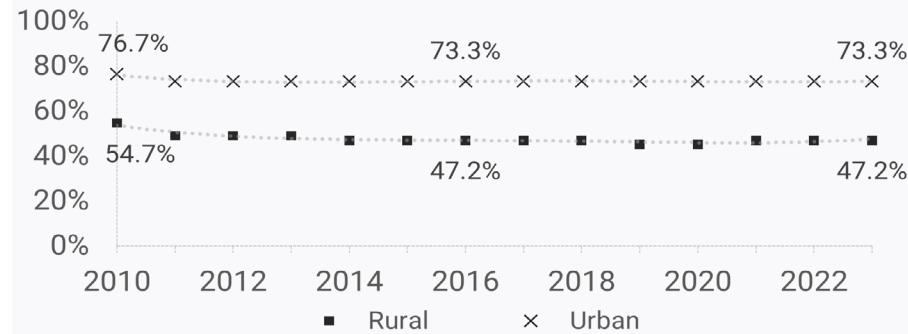
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Michigan.
- In 2023, 53% of rural and 27% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 75% of rural noncore counties (without a town > 10,000) in Michigan lacked hospital-based obstetric services (Fig. 2).

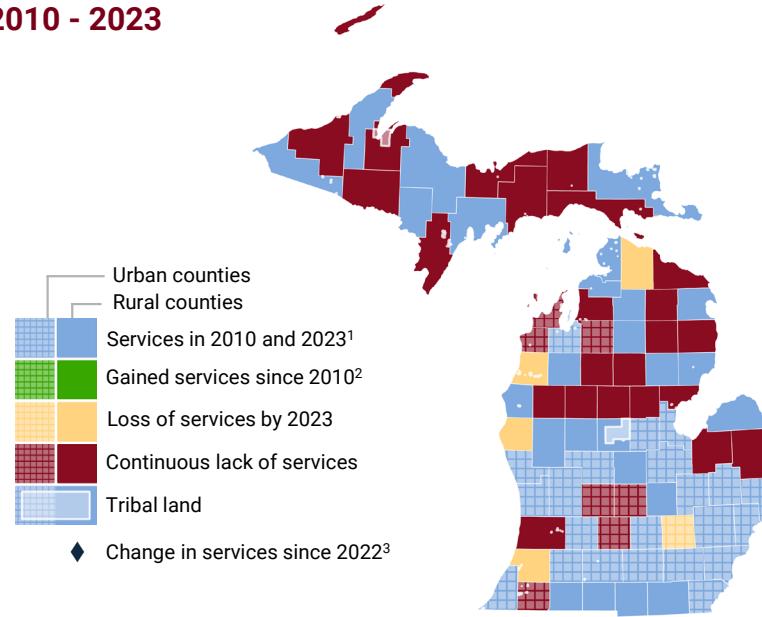
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Michigan between 2010 and 2023, during which time 5 of Michigan's 83 counties lost all services (Map).
- In 2010, 55% of rural and 77% of urban counties in Michigan had hospital-based obstetric services. By 2023, access dropped, and 47% of rural and 73% of urban counties had these services (Fig. 1).
- Of the 4 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 100% were noncore (without a town > 10,000).

Figure 1: Percentage of Michigan rural (n = 53) and urban (n = 30) counties with in-county hospital-based obstetric care, 2010-2023

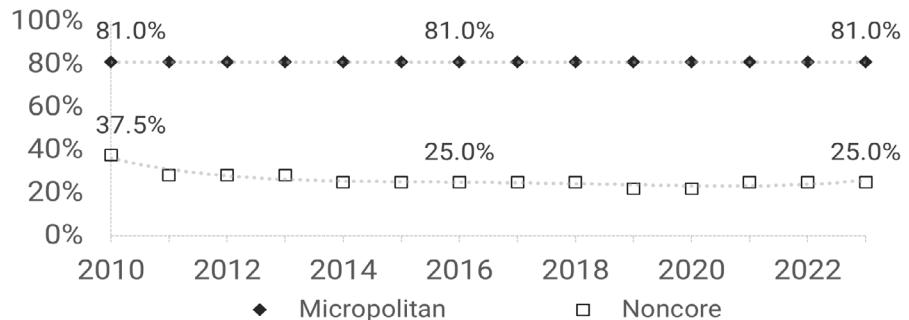


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- 1 county had a period between 2010 and 2023 when services were temporarily not available.
- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Michigan rural micropolitan (n = 21) and rural noncore (n = 32) counties with in-county hospital-based obstetric care, 2010-2023



Minnesota

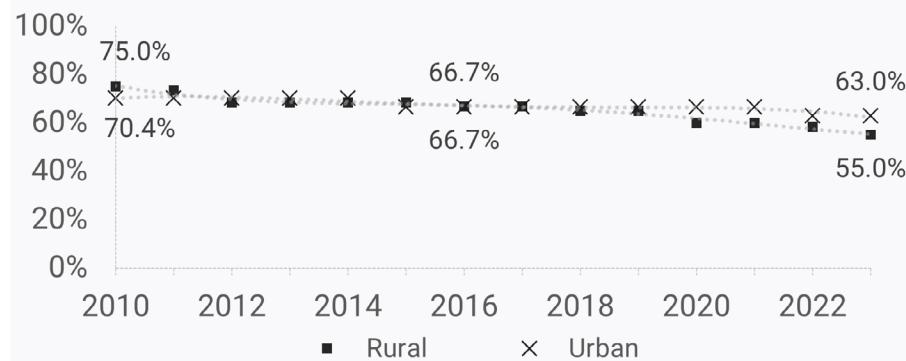
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 2 Minnesota counties (both rural) lost all hospital-based obstetric services (Map).
- In 2023, 45% of rural and 37% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 60% of rural noncore counties (without a town > 10,000) in Minnesota lacked hospital-based obstetric services (Fig. 2).

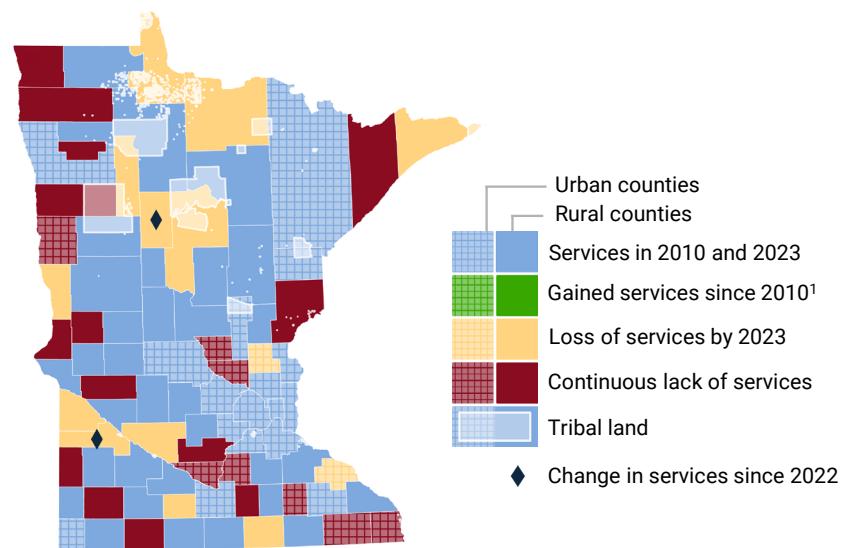
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Minnesota between 2010 and 2023, during which time 14 of Minnesota's 87 counties lost all services (Map).
- In 2010, 75% of rural and 70% of urban counties in Minnesota had hospital-based obstetric services. By 2023, access dropped, and 55% of rural and 63% of urban counties had these services (Fig. 1).
- Of the 12 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 75% were noncore (without a town > 10,000).

Figure 1: Percentage of Minnesota rural (n = 60) and urban (n = 27) counties with in-county hospital-based obstetric care, 2010-2023

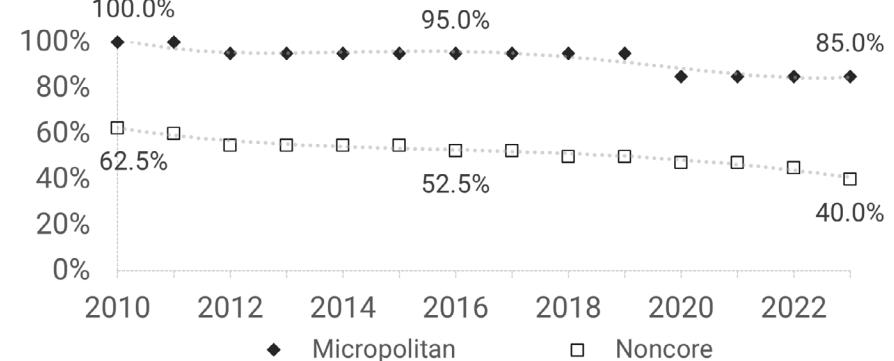


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.

Figure 2: Percentage of Minnesota rural micropolitan (n = 20) and rural noncore (n = 40) counties with in-county hospital-based obstetric care, 2010-2023



Mississippi

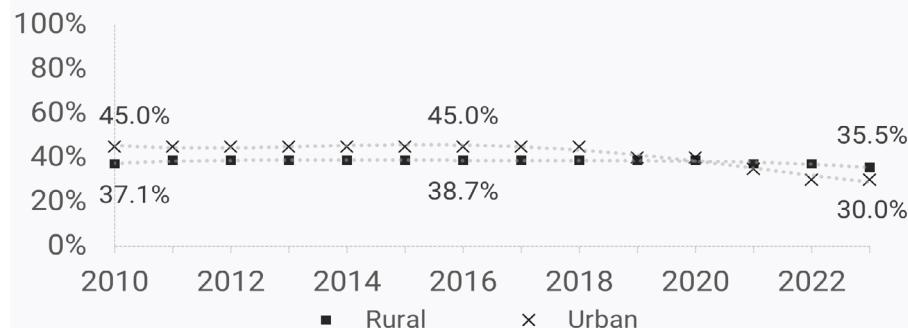
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 1 Mississippi county (rural) lost all hospital-based obstetric services (Map).
- In 2023, 64% of rural and 70% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 82% of rural noncore counties (without a town $> 10,000$) in Mississippi lacked hospital-based obstetric services (Fig. 2).

Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more Mississippi counties that lost hospital-based obstetric services than gained. During this period, 5 of Mississippi's 82 counties lost all services, while 1 county (rural) gained services (Map).
- In 2010, 37% of rural and 45% of urban counties in Mississippi had hospital-based obstetric services. By 2023, access remained relatively stable in rural counties (36%) and decreased in urban counties (30%) (Fig. 1).
- Of the 2 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 1 was noncore (without a town $> 10,000$). The county that gained services was also a rural noncore county.

Figure 1: Percentage of Mississippi rural ($n = 62$) and urban ($n = 20$) counties with in-county hospital-based obstetric care, 2010-2023



Availability of Hospital-Based Obstetric Services by County, 2010 - 2023

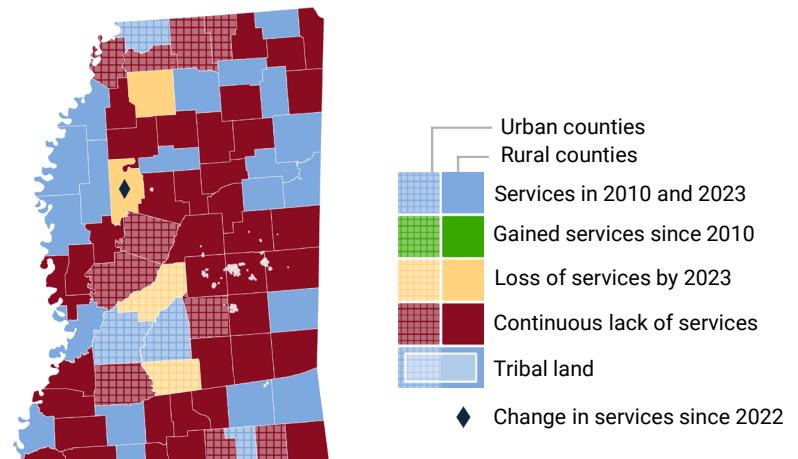
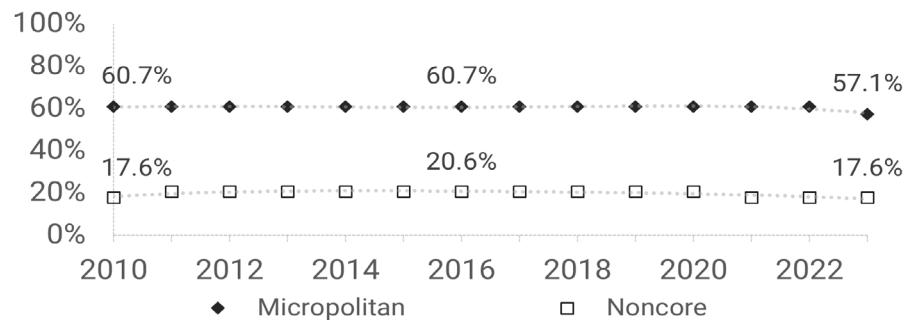


Figure 2: Percentage of Mississippi rural micropolitan ($n = 28$) and rural noncore ($n = 34$) counties with in-county hospital-based obstetric care, 2010-2023



Missouri

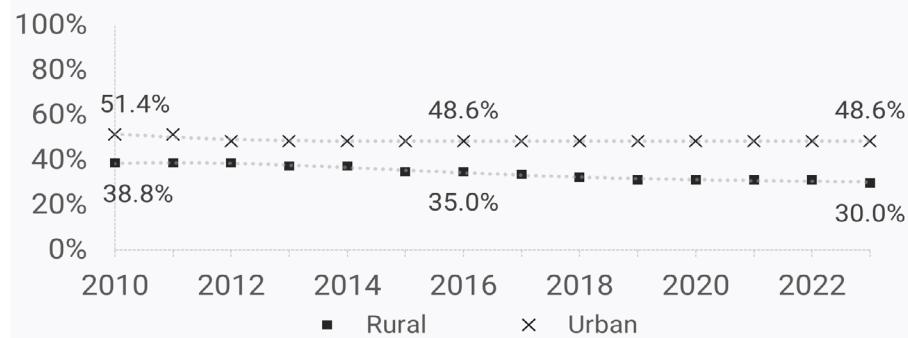
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 1 Missouri county (rural) lost all hospital-based obstetric services (Map).
- In 2023, 70% of rural and 51% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 83% of rural noncore counties (without a town > 10,000) in Missouri lacked hospital-based obstetric services (Fig. 2).

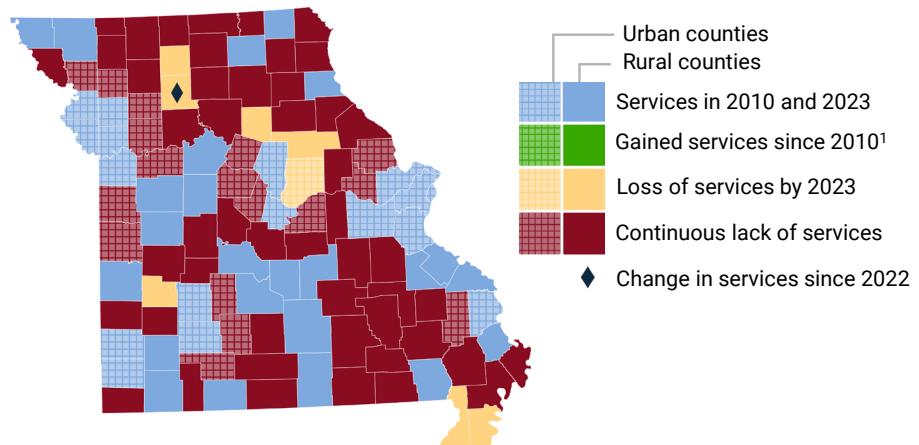
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Missouri between 2010 and 2023, during which time 8 of Missouri's 115 counties lost all services (Map).
- In 2010, 39% of rural and 51% of urban counties in Missouri had hospital-based obstetric services. By 2023, access dropped, and 30% of rural and 49% of urban counties had these services (Fig. 1).
- Of the 7 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 57% were noncore (without a town > 10,000).

Figure 1: Percentage of Missouri rural (n = 80) and urban (n = 35) counties with in-county hospital-based obstetric care, 2010-2023

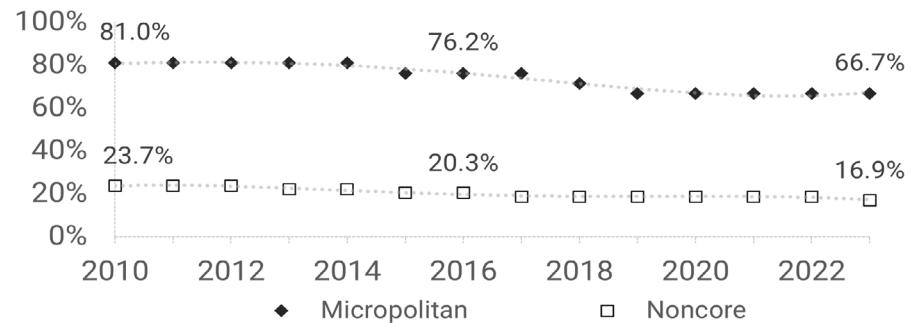


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.

Figure 2: Percentage of Missouri rural micropolitan (n = 21) and rural noncore (n = 59) counties with in-county hospital-based obstetric care, 2010-2023



Montana

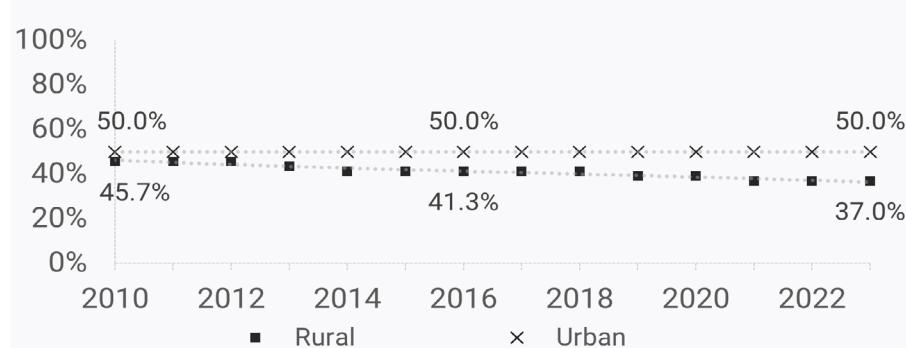
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Montana.
- In 2023, 63% of rural and 50% of urban counties did not have hospital-based obstetric services (Fig.1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 66% of rural noncore counties (without a town $> 10,000$) in Montana lacked hospital-based obstetric services (Fig. 2).

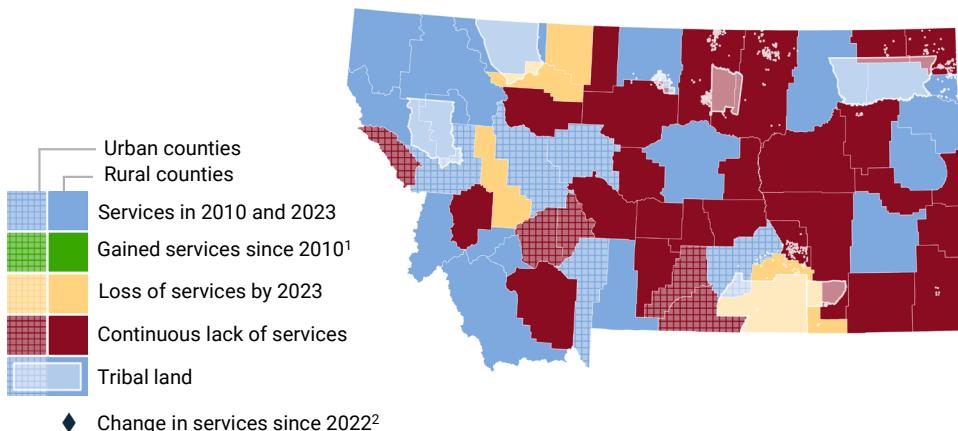
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Montana between 2010 and 2023, during which time 4 of Montana's 56 counties lost all services (Map).
- In 2010, 46% of rural and 50% of urban counties in Montana had hospital-based obstetric services. By 2023, access dropped in rural counties (37%) and did not change in urban counties (Fig. 1).
- Of the 4 counties (all rural) that lost all hospital-based obstetric services between 2010 and 2023, 100% were noncore (without a town $> 10,000$).

Figure 1: Percentage of Montana rural ($n = 46$) and urban ($n = 10$) counties with in-county hospital-based obstetric care, 2010-2023

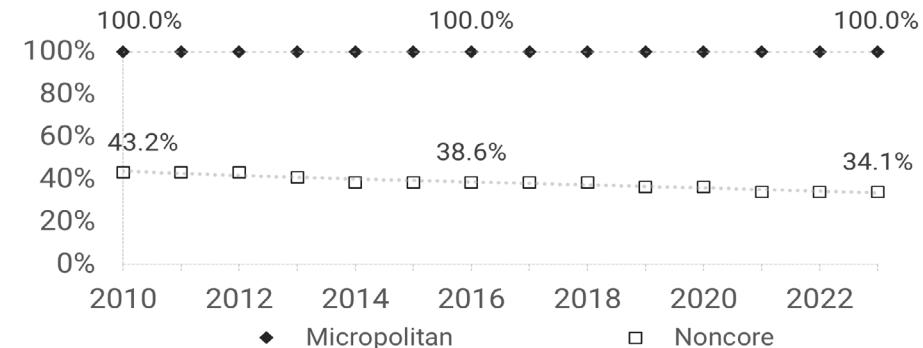


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Montana rural micropolitan ($n = 2$) and rural noncore ($n = 44$) counties with in-county hospital-based obstetric care, 2010-2023



Nebraska

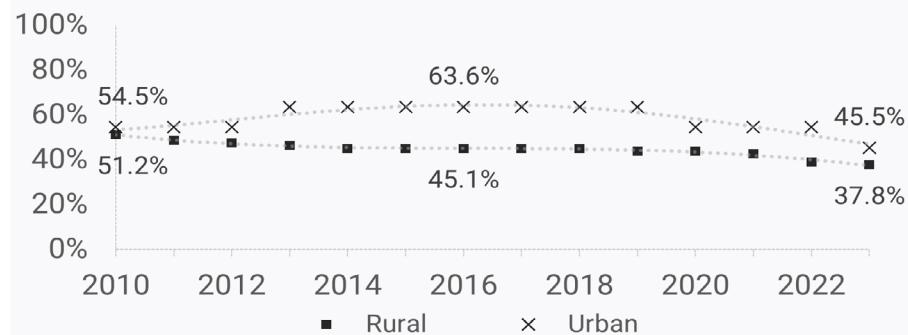
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 2 Nebraska counties (1 rural) lost all hospital-based obstetric services (Map).
- In 2023, 62% of rural and 55% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 66% of rural noncore counties (without a town > 10,000) in Nebraska lacked hospital-based obstetric services (Fig. 2).

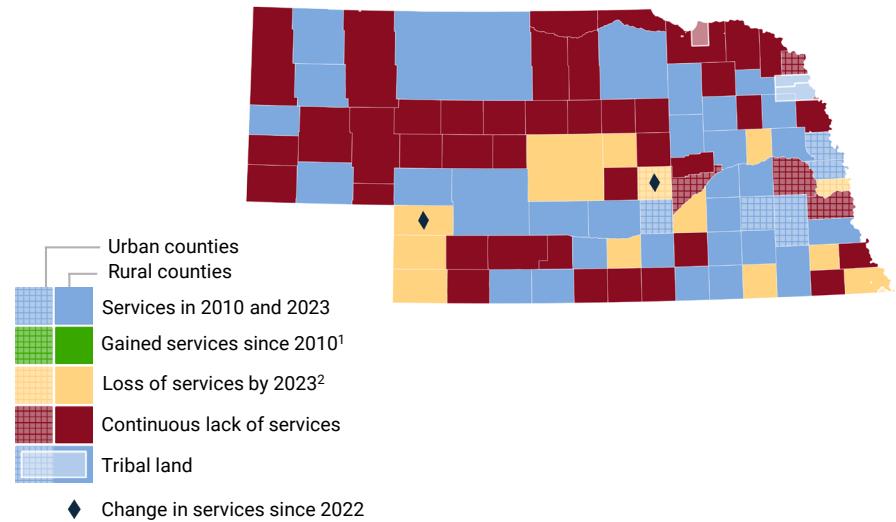
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Nebraska between 2010 and 2023, during which time 13 of Nebraska's 93 counties lost all services (Map). One of these counties gained services after 2010 but lost all services by 2023.
- In 2010, 51% of rural and 55% of urban counties in Nebraska had hospital-based obstetric services. By 2023, access dropped, and 38% of rural and 45% of urban counties had these services (Fig. 1).
- Of the 11 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 82% were noncore (without a town > 10,000).

Figure 1: Percentage of Nebraska rural (n = 82) and urban (n = 11) counties with in-county hospital-based obstetric care, 2010-2023

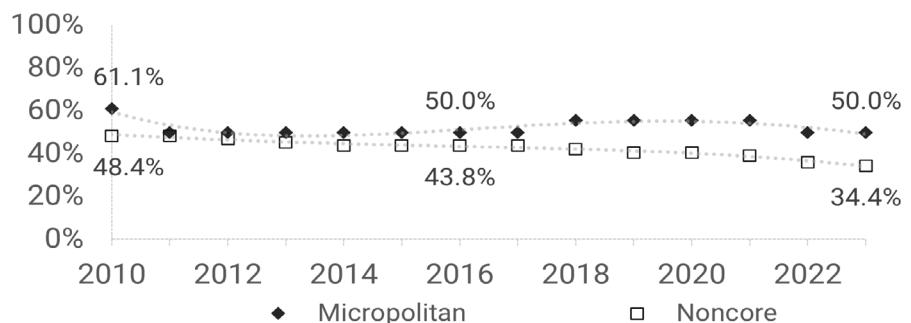


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained hospital-based obstetric services between 2010 and 2023 and maintained these services through 2023.
2. 1 county gained obstetric services after 2010 but then lost those services by 2023.

Figure 2: Percentage of Nebraska rural micropolitan (n = 18) and rural noncore (n = 64) counties with in-county hospital-based obstetric care, 2010-2023



Nevada

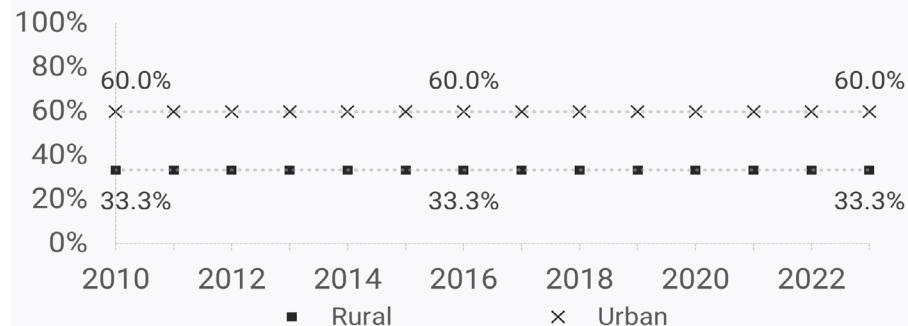
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Nevada.
- In 2023, 67% of rural and 40% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 83% of rural noncore counties (without a town $> 10,000$) in Nevada lacked hospital-based obstetric services (Fig. 2).

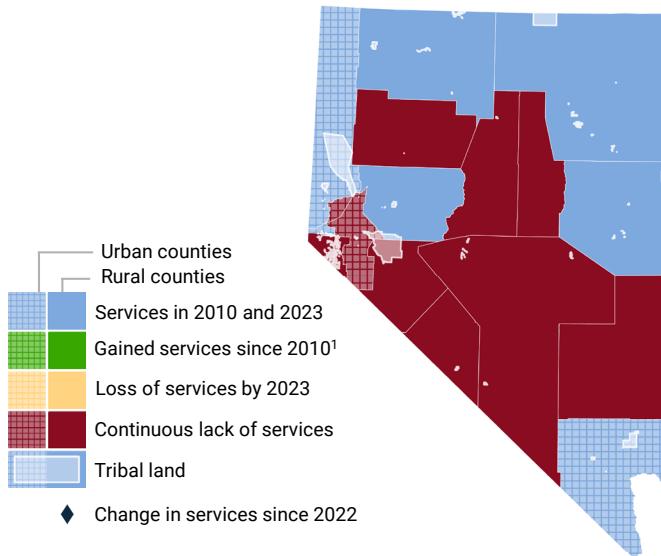
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, county-level access to hospital-based obstetric services did not change in Nevada. During this period, none of Nevada's 17 counties lost all services (Map).
- In 2010, 33% of rural and 60% of urban counties in Nevada had hospital-based obstetric services; in 2023, these percentages remained unchanged (Fig. 1).
- Of the 8 rural counties in Nevada that continuously lacked hospital-based obstetric services between 2010 and 2023, 63% were noncore (without a town $> 10,000$) (Map/Fig. 2).

Figure 1: Percentage of Nevada rural (n = 12) and urban (n = 5) counties with in-county hospital-based obstetric care, 2010-2023

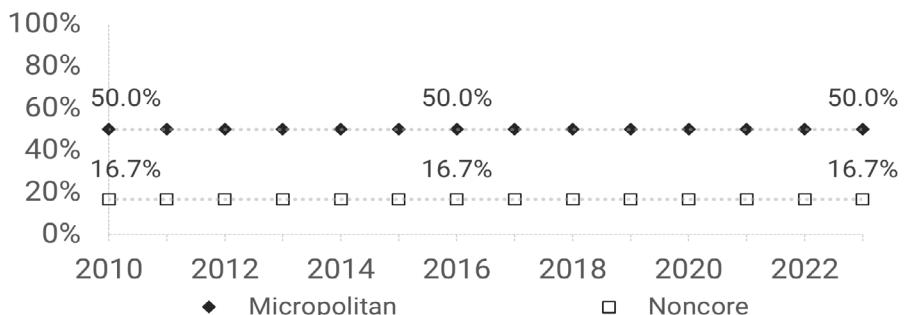


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.

Figure 2: Percentage of Nevada rural micropolitan (n = 6) and rural noncore (n = 6) counties with in-county hospital-based obstetric care, 2010-2023



New Hampshire

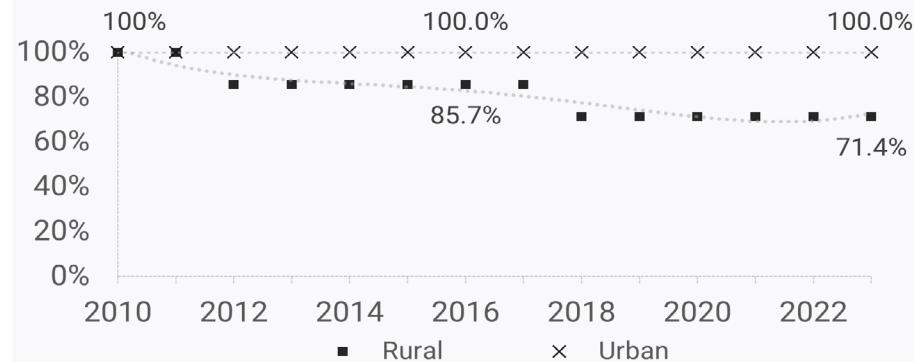
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in New Hampshire.
- In 2023, 29% of rural counties did not have hospital-based obstetric services, compared to 0% of urban counties (Fig. 1).

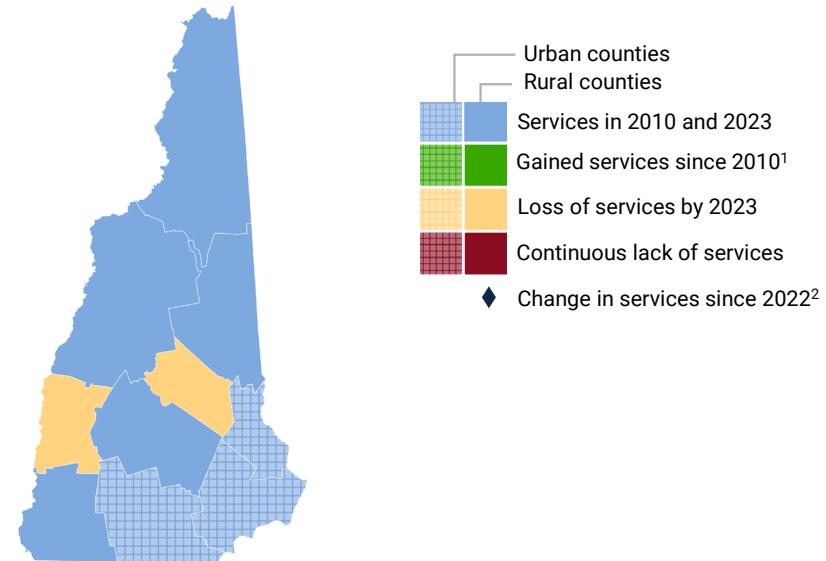
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across New Hampshire between 2010 and 2023, during which time 2 of New Hampshire's 10 counties lost all services (Map).
- In 2010, 100% of rural and 100% of urban counties in New Hampshire had hospital-based obstetric services. By 2023, access dropped in rural counties and did not change in urban, so that in 2023, 71% of rural and 100% of urban counties had these services (Fig. 1).
- Of the 2 counties (both rural) that lost all hospital-based obstetric services between 2010 and 2023, both were micropolitan (with a town > 10,000).

Figure 1: Percentage of New Hampshire rural (n = 7) and urban (n = 3) counties with in-county hospital-based obstetric care, 2010-2023

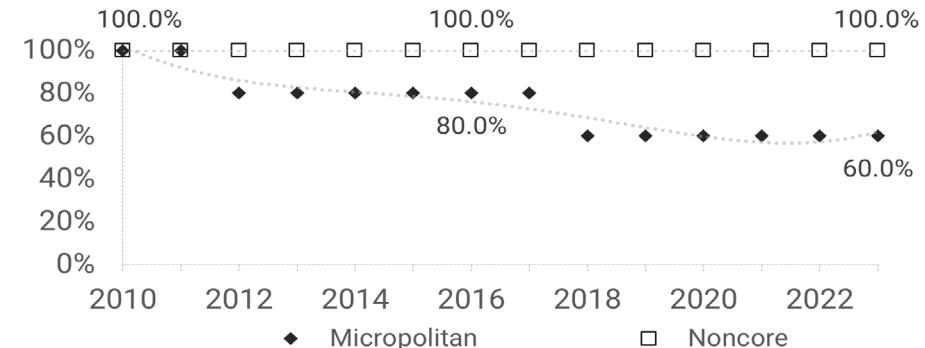


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of New Hampshire rural micropolitan (n = 5) and rural noncore (n = 2) counties with in-county hospital-based obstetric care, 2010-2023



New Jersey

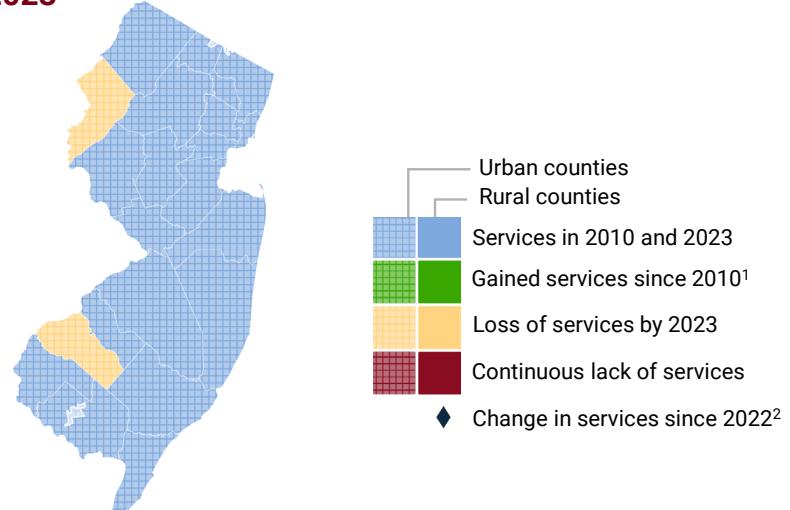
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in New Jersey.
- New Jersey's 21 counties are all urban.
- In 2023, 9% of counties in New Jersey lacked hospital-based obstetric services (Fig. 1).

Changes in hospital-based obstetric services availability, 2010-2023

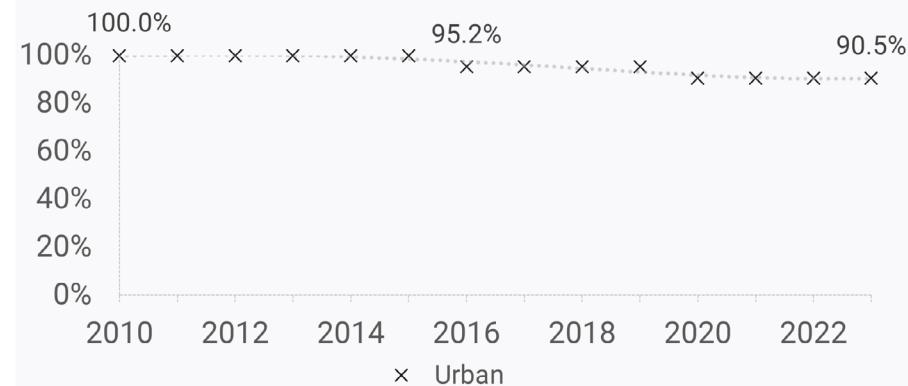
- Access to hospital-based obstetric services declined across New Jersey between 2010 and 2023, during which time 2 of New Jersey's 21 counties lost all services (Map).
- In 2010, 100% of counties in New Jersey had hospital-based obstetric services. By 2023, access dropped, and 91% of counties had these services (Fig. 1). There are no rural counties in New Jersey.

Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 1: Percentage of New Jersey urban counties* (n = 21) with in-county hospital-based obstetric care, 2010-2023



*New Jersey does not have rural counties.

New Mexico

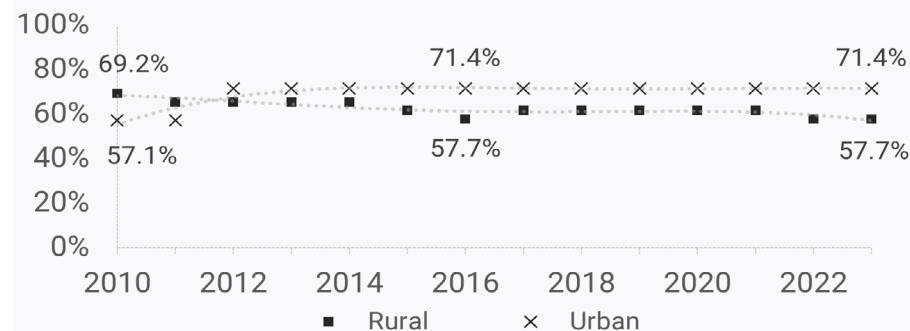
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in New Mexico.
- In 2023, 42% of rural and 29% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 73% of rural noncore counties (without a town $> 10,000$) in New Mexico lacked hospital-based obstetric services (Fig. 2).

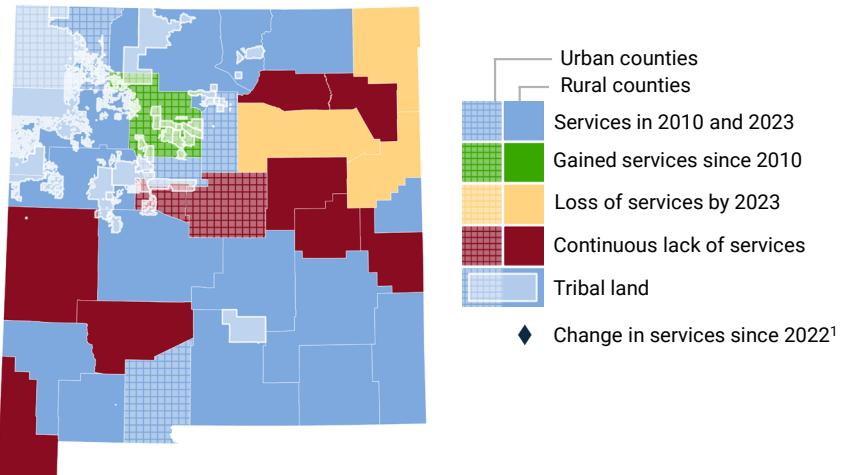
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more New Mexico counties that lost hospital-based obstetric services than gained. During this period, 3 of New Mexico's 33 counties lost all services, while 1 county (urban) gained services (Map).
- In 2010, 69% of rural and 57% of urban counties in New Mexico had hospital-based obstetric services. By 2023, access dropped in rural counties (58%) and increased in urban counties (71%) (Fig. 1).
- Of the 3 counties (all rural) that lost all hospital-based obstetric services between 2010 and 2023, 67% were noncore (without a town $> 10,000$).

Figure 1: Percentage of New Mexico rural ($n = 26$) and urban ($n = 7$) counties with in-county hospital-based obstetric care, 2010-2023

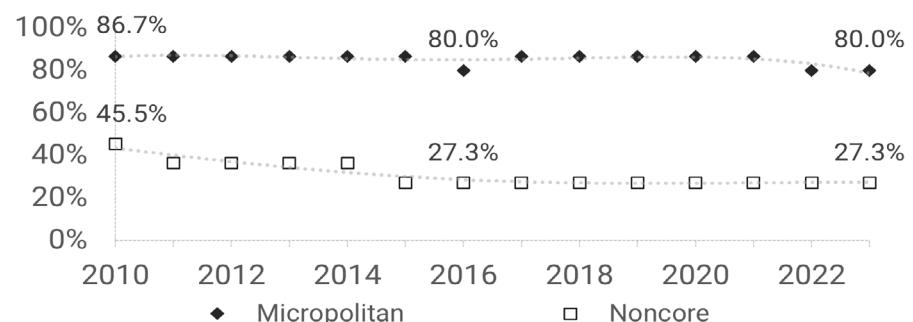


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of New Mexico rural micropolitan ($n = 15$) and rural noncore ($n = 11$) counties with in-county hospital-based obstetric care, 2010-2023



New York

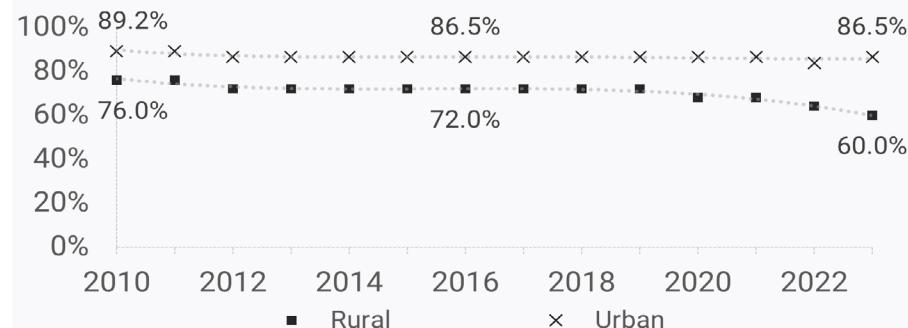
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 1 New York county (rural) lost all hospital-based obstetric services (Map).
- In 2023, 40% of rural and 14% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 73% of rural noncore counties (without a town > 10,000) in New York lacked hospital-based obstetric services (Fig. 2).

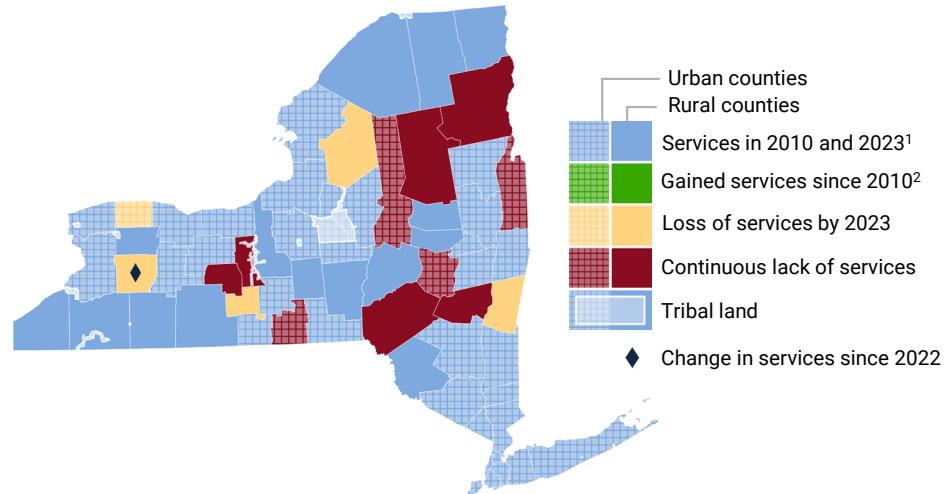
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across New York between 2010 and 2023, during which time 5 of New York's 62 counties lost all services (Map).
- In 2010, 76% of rural and 89% of urban counties in New York had hospital-based obstetric services. By 2023, access dropped, and 60% of rural and 87% of urban counties had these services (Fig. 1).
- Of the 4 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 75% were noncore (without a town > 10,000).

Figure 1: Percentage of New York rural (n = 25) and urban (n = 37) counties with in-county hospital-based obstetric care, 2010-2023

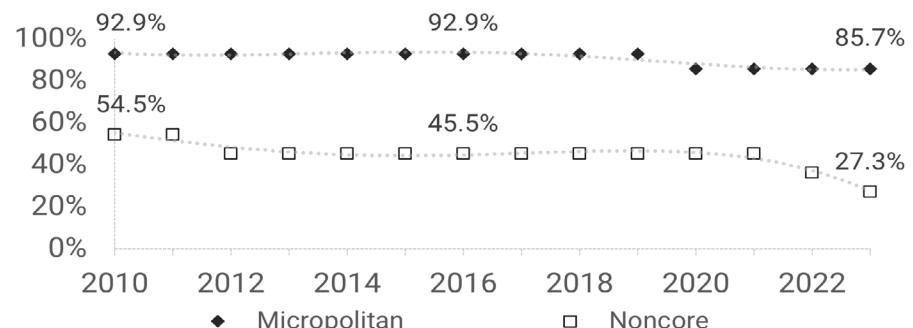


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- 1 county had a period between 2010 and 2023 when services were temporarily not available.
- There were no counties that gained services between 2010 and 2023.

Figure 2: Percentage of New York rural micropolitan (n = 14) and rural noncore (n = 11) counties with in-county hospital-based obstetric care, 2010-2023



North Carolina

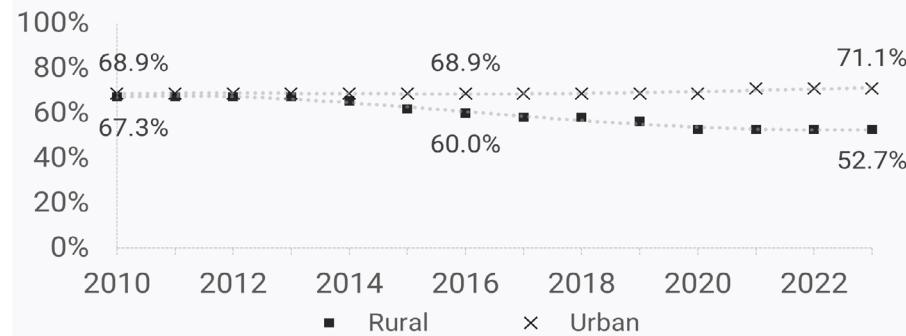
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in North Carolina.
- By 2023, 47% of rural and 29% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 72% of rural noncore counties (without a town $> 10,000$) in North Carolina lacked hospital-based obstetric services (Fig. 2).

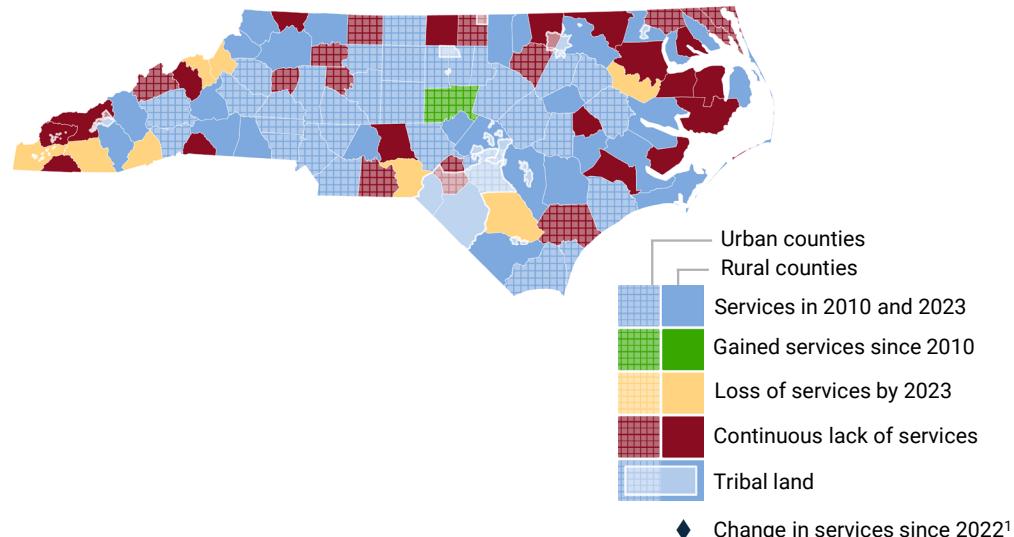
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more North Carolina counties that lost hospital-based obstetric services than gained. During this period, 8 of North Carolina's 100 counties lost all services, while 1 county (urban) gained services (Map).
- In 2010, 67% of rural and 69% of urban counties in North Carolina had hospital-based obstetric services. By 2023, access dropped in rural counties (53%) and increased in urban counties (71%) (Fig. 1).
- Of the 8 counties (all rural) that lost all hospital-based obstetric services between 2010 and 2023, 75% were noncore (without a town $> 10,000$).

Figure 1: Percentage of North Carolina rural ($n = 55$) and urban ($n = 45$) counties with in-county hospital-based obstetric care, 2010-2023

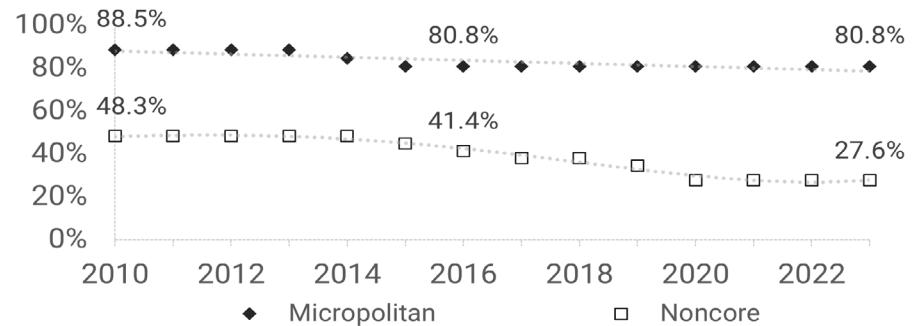


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of North Carolina rural micropolitan ($n = 26$) and rural noncore ($n = 29$) counties with in-county hospital-based obstetric care, 2010-2023



North Dakota

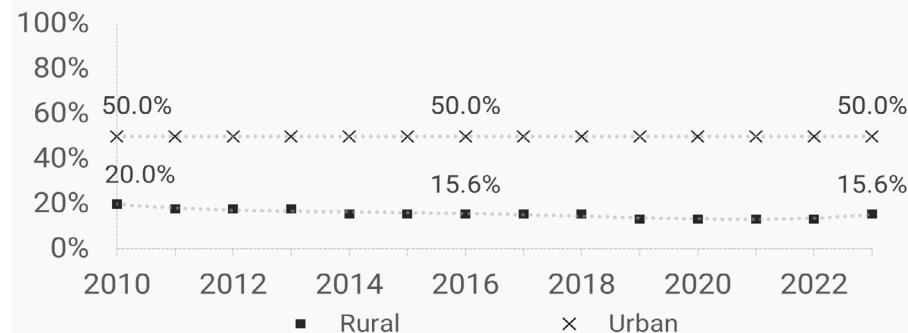
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 1 North Dakota county (rural) gained hospital-based obstetric services (Map).
- In 2023, 84% of rural and 50% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 90% of rural noncore counties (without a town $> 10,000$) in North Dakota lacked hospital-based obstetric services (Fig. 2).

Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more North Dakota counties that lost hospital-based obstetric services than gained. During this period, 3 of North Dakota's 53 counties lost all services, while 1 county (rural) gained services (Map).
- In 2010, 20% of rural and 50% of urban counties in North Dakota had hospital-based obstetric services. By 2023, access dropped in rural counties (16%) and did not change in urban counties (Fig. 1).
- Of the 3 counties (all rural) that lost all hospital-based obstetric services between 2010 and 2023, 100% were noncore (without a town $> 10,000$). The county that gained services was also noncore.

Figure 1: Percentage of North Dakota rural ($n = 45$) and urban ($n = 8$) counties with in-county hospital-based obstetric care, 2010-2023



Availability of Hospital-Based Obstetric Services by County, 2010 - 2023

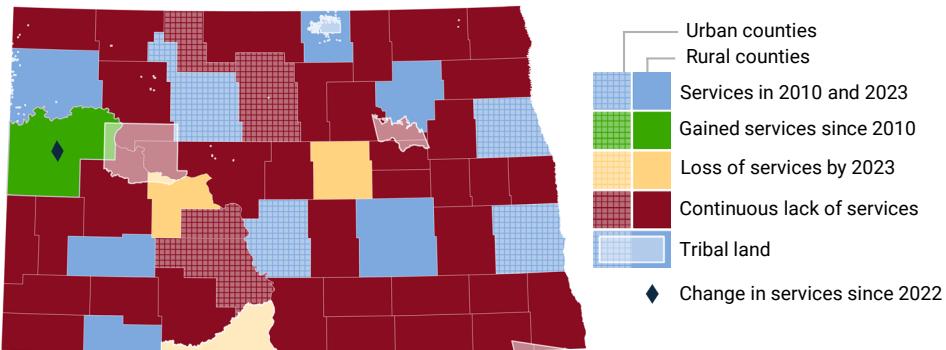
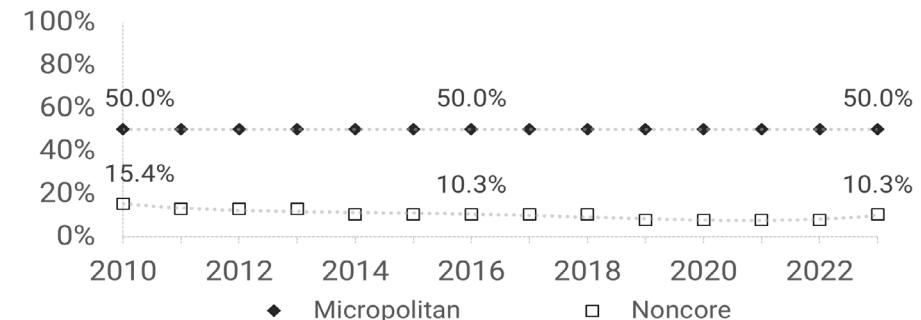


Figure 2: Percentage of North Dakota rural micropolitan ($n = 6$) and rural noncore ($n = 39$) counties with in-county hospital-based obstetric care, 2010-2023



Ohio

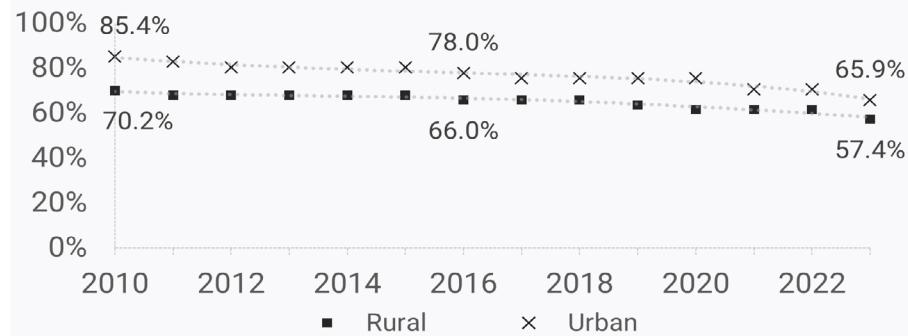
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, several Ohio counties lost hospital-based obstetric services; 4 counties (2 rural) lost all services during this time (Map).
- In 2023, 42% of rural and 34% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 89% of rural noncore counties (without a town $> 10,000$) in Ohio lacked hospital-based obstetric services (Fig. 2).

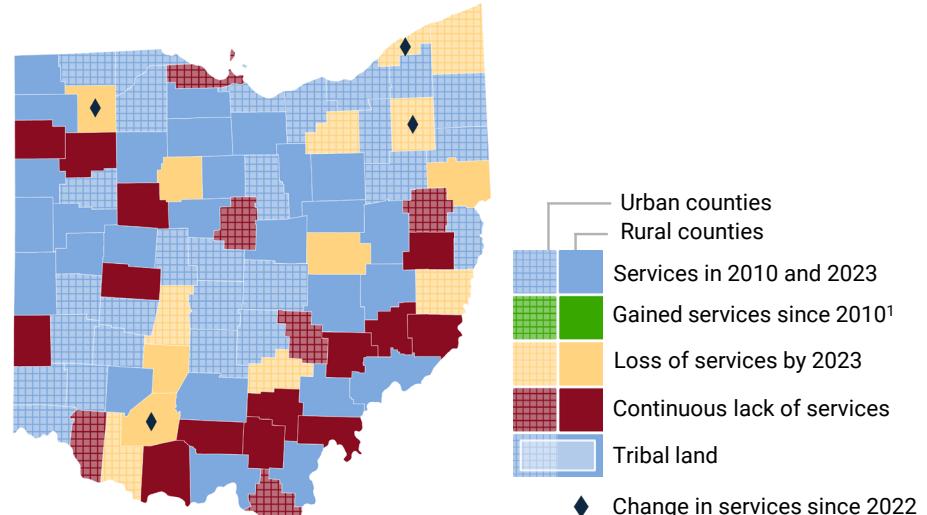
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Ohio between 2010 and 2023, during which time 14 of Ohio's 88 counties lost all services (Map).
- In 2010, 70% of rural and 85% of urban counties in Ohio had hospital-based obstetric services. By 2023, access dropped, and 57% of rural and 66% of urban counties had these services (Fig. 1).
- Of the 6 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 50% were noncore (without a town $> 10,000$).

Figure 1: Percentage of Ohio rural ($n = 47$) and urban ($n = 41$) counties with in-county hospital-based obstetric care, 2010-2023

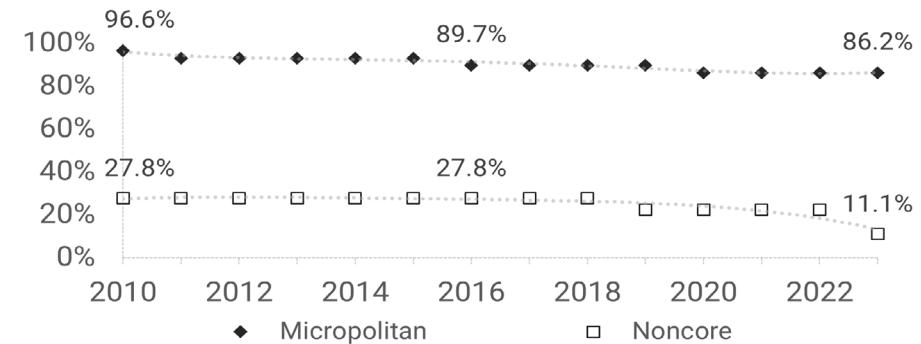


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.

Figure 2: Percentage of Ohio rural micropolitan ($n = 29$) and rural non-core ($n = 18$) counties with in-county hospital-based obstetric care, 2010-2023



Oklahoma

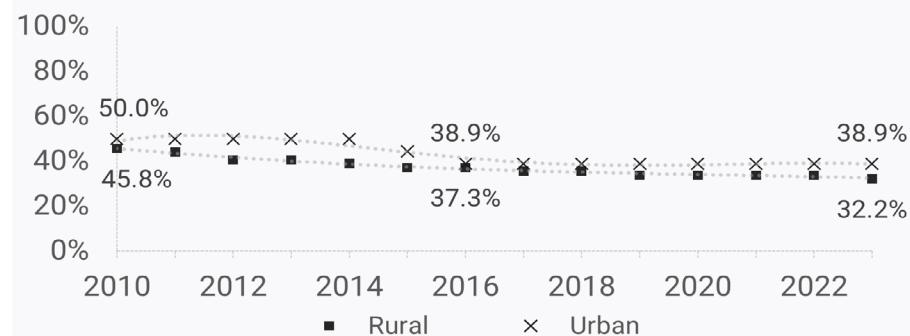
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 1 Oklahoma county (rural) lost all hospital-based obstetric services (Map).
- In 2023, 68% of rural and 61% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 93% of rural noncore counties (without a town > 10,000) in Oklahoma lacked hospital-based obstetric services (Fig. 2).

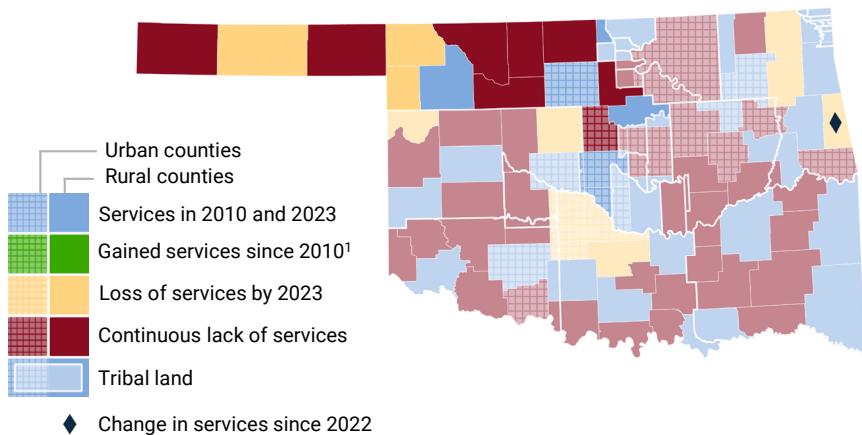
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Oklahoma between 2010 and 2023, during which time 10 of Oklahoma's 77 counties lost all services (Map).
- In 2010, 46% of rural and 50% of urban counties in Oklahoma had hospital-based obstetric services. By 2023, access dropped, and 32% of rural and 39% of urban counties had these services (Fig. 1).
- Of the 8 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 88% were noncore (without a town > 10,000).

Figure 1: Percentage of Oklahoma rural (n = 59) and urban (n = 18) counties with in-county hospital-based obstetric care, 2010-2023

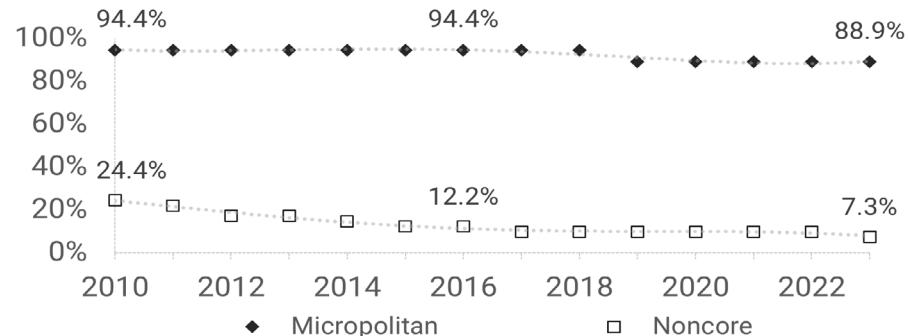


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.

Figure 2: Percentage of Oklahoma rural micropolitan (n = 18) and rural noncore (n = 41) counties with in-county hospital-based obstetric care, 2010-2023



Oregon

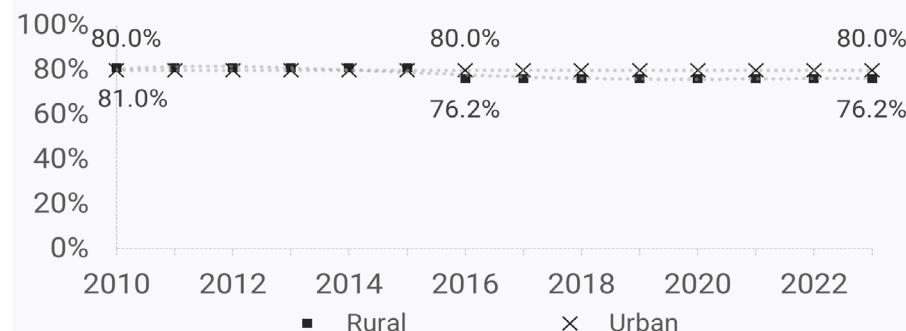
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Oregon.
- In 2023, 24% of rural and 20% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 38% of rural noncore counties (without a town $> 10,000$) in Oregon lacked hospital-based obstetric services (Fig. 2).

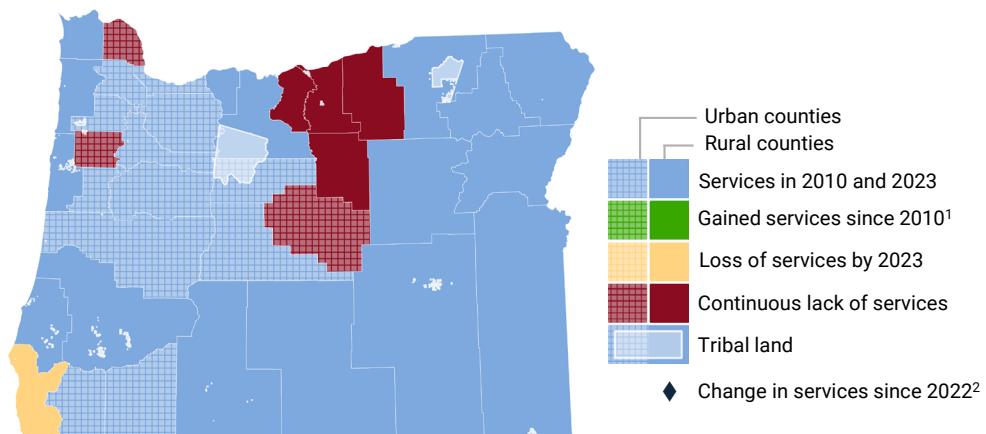
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Oregon between 2010 and 2023, during which time 1 of Oregon's 36 counties lost all services (Map).
- In 2010, 81% of rural and 80% of urban counties in Oregon had hospital-based obstetric services. By 2023, access dropped in rural counties and did not change in urban, so that in 2023, 76% of rural and 80% of urban counties had these services (Fig. 1).
- The county that lost all hospital-based obstetric services was a rural micropolitan county (with a town $> 10,000$).

Figure 1: Percentage of Oregon rural (n = 21) and urban (n = 15) counties with in-county hospital-based obstetric care, 2010-2023

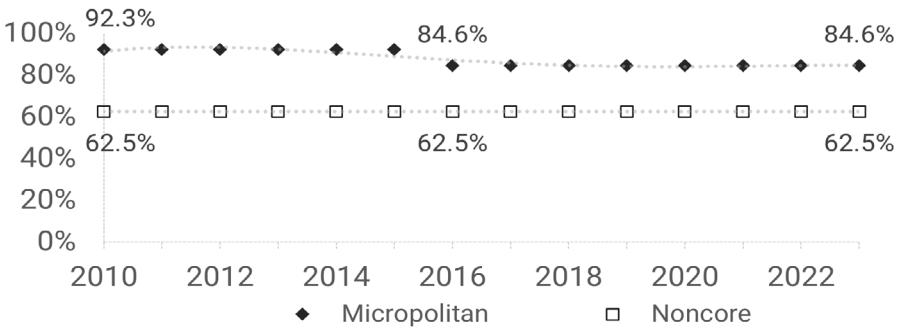


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Oregon rural micropolitan (n = 13) and rural noncore (n = 8) counties with in-county hospital-based obstetric care, 2010-2023



Pennsylvania

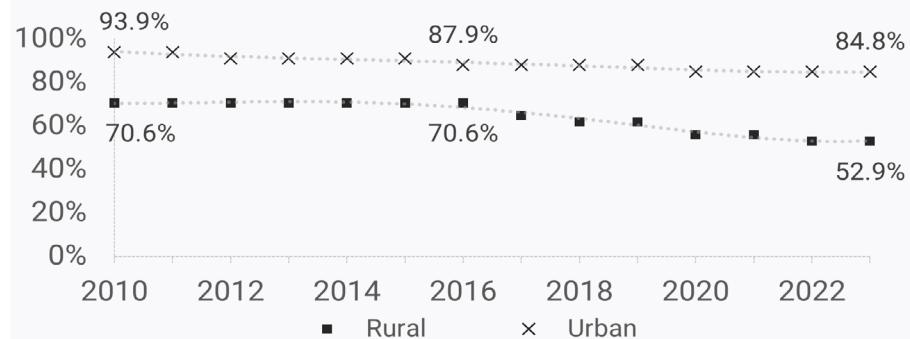
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Pennsylvania.
- In 2023, 47% of rural and 15% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 69% of rural noncore counties (without a town $> 10,000$) in Pennsylvania lacked hospital-based obstetric services (Fig. 2).

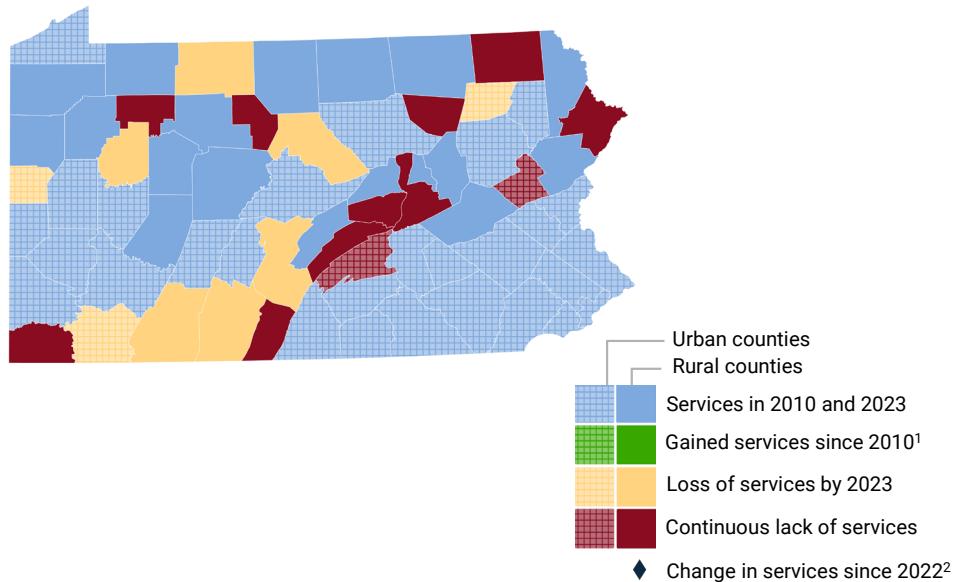
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Pennsylvania between 2010 and 2023, during which time 9 of Pennsylvania's 67 counties lost all services (Map).
- In 2010, 71% of rural and 94% of urban counties in Pennsylvania had hospital-based obstetric services. By 2023, access dropped, and 53% of rural and 85% of urban counties had these services (Fig. 1).
- Of the 6 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 67% were micropolitan (with a town $> 10,000$).

Figure 1: Percentage of Pennsylvania rural ($n = 34$) and urban ($n = 33$) counties with in-county hospital-based obstetric care, 2010-2023

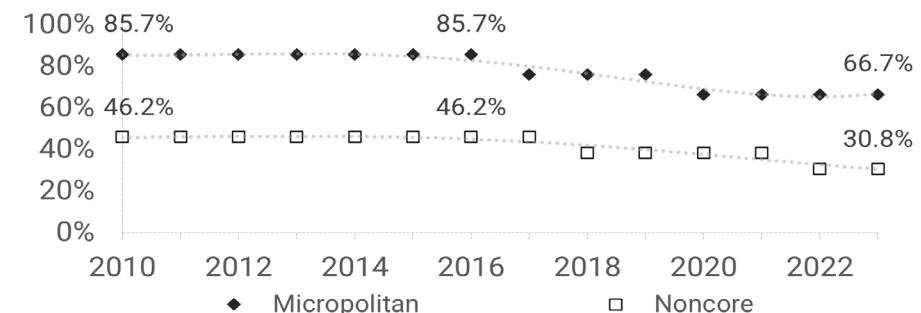


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Pennsylvania rural micropolitan ($n = 21$) and rural noncore ($n = 13$) counties with in-county hospital-based obstetric care, 2010-2023



Rhode Island

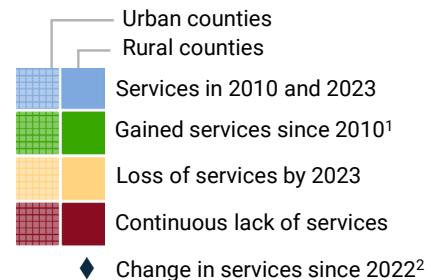
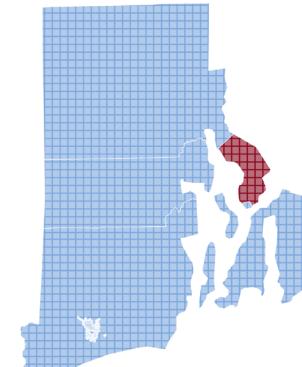
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Rhode Island.
- Rhode Island's 5 counties are all urban.
- In 2023, 1 of Rhode Island's 5 counties (20%) had no hospital-based obstetric services (Fig. 1).

Changes in hospital-based obstetric services availability, 2010-2023

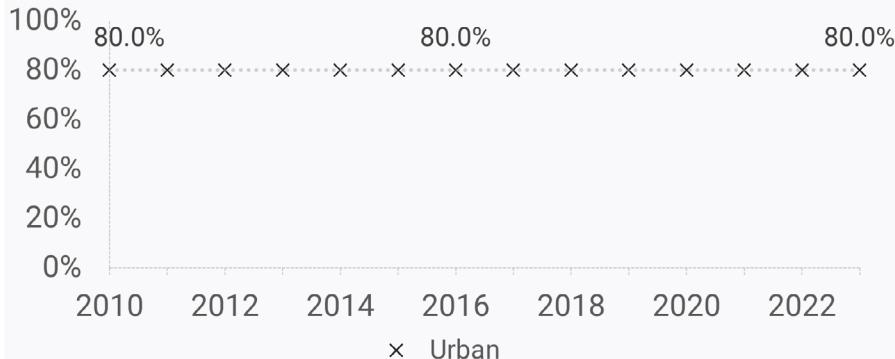
- Between 2010 and 2023, county-level access to hospital-based obstetric services did not change in Rhode Island. During this period, none of Rhode Island's 5 counties lost all hospital-based obstetric services (Map).
- In 2010, 80% of counties in Rhode Island had hospital-based obstetric services, and in 2023, this percentage remained unchanged (Fig. 1). There are no rural counties in Rhode Island.

Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 1: Percentage of Rhode Island urban counties* (n = 5) with in-county hospital-based obstetric care, 2010-2023



*Rhode Island does not have rural counties.

South Carolina

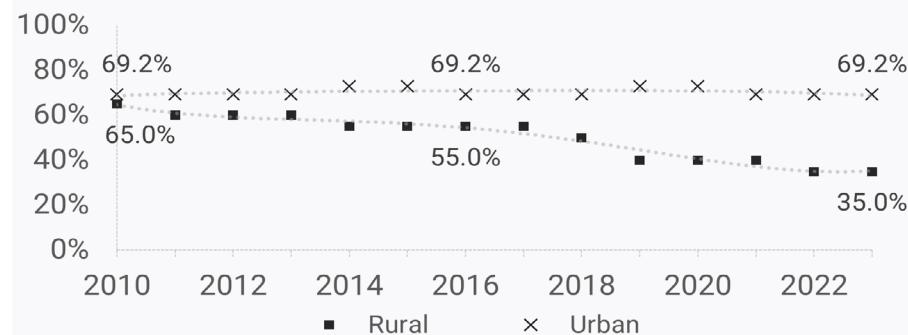
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in South Carolina.
- In 2023, 65% of rural and 31% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 77% of rural noncore counties (without a town $> 10,000$) in South Carolina lacked hospital-based obstetric services (Fig. 2).

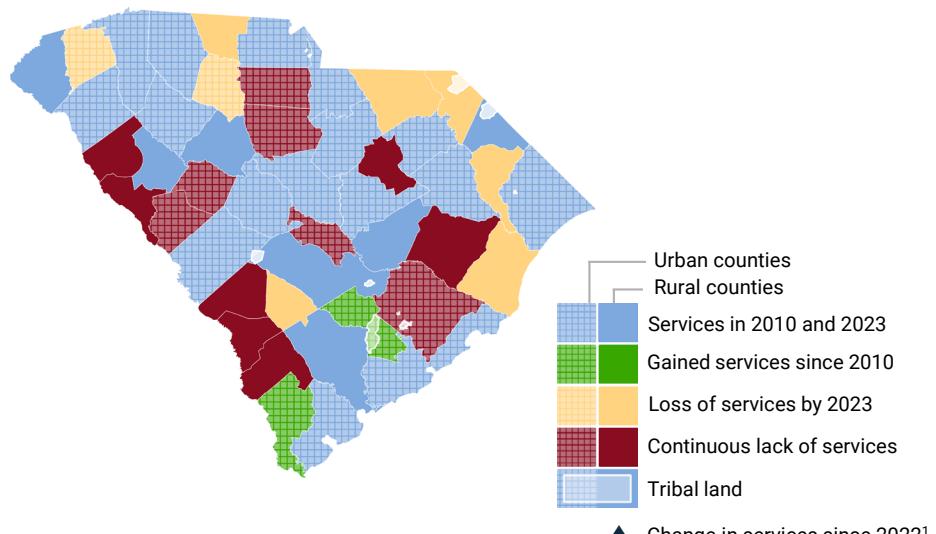
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more South Carolina counties that lost hospital-based obstetric services than gained. During this period, 8 of South Carolina's 46 counties lost all services, while 2 counties (both urban) gained services (Map).
- In 2010, 65% of rural and 69% of urban counties in South Carolina had hospital-based obstetric services. By 2023, access dropped in rural counties (35%) and did not change in urban counties (Fig. 1).
- Of the 6 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 67% were noncore (without a town $> 10,000$).

Figure 1: Percentage of South Carolina rural ($n = 20$) and urban ($n = 26$) counties with in-county hospital-based obstetric care, 2010-2023

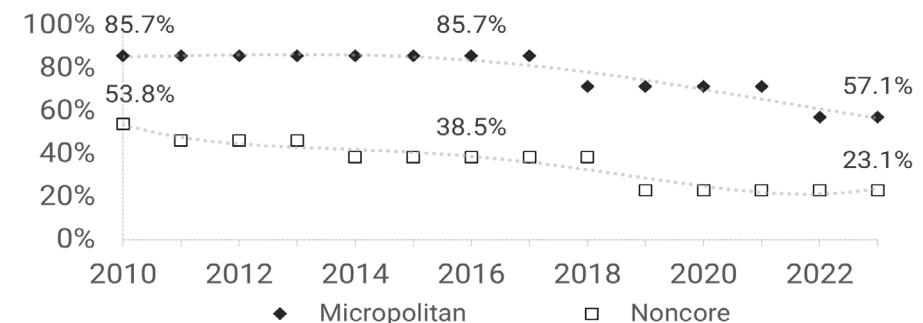


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of South Carolina rural micropolitan ($n = 7$) and rural noncore ($n = 13$) counties with in-county hospital-based obstetric care, 2010-2023



South Dakota

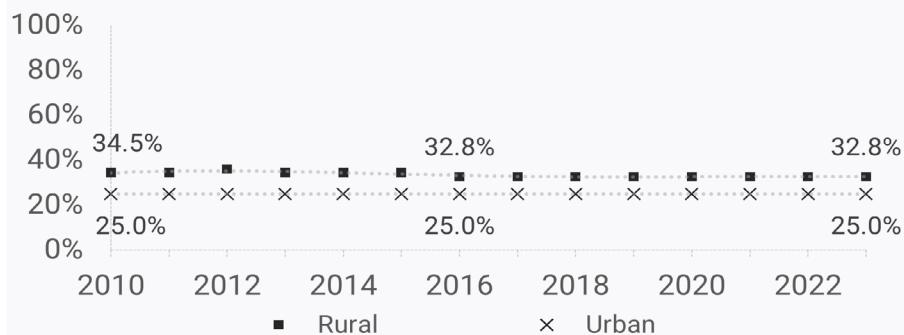
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in South Dakota.
- In 2023, 67% of rural and 75% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 78% of rural noncore counties (without a town $> 10,000$) in South Dakota lacked hospital-based obstetric service.

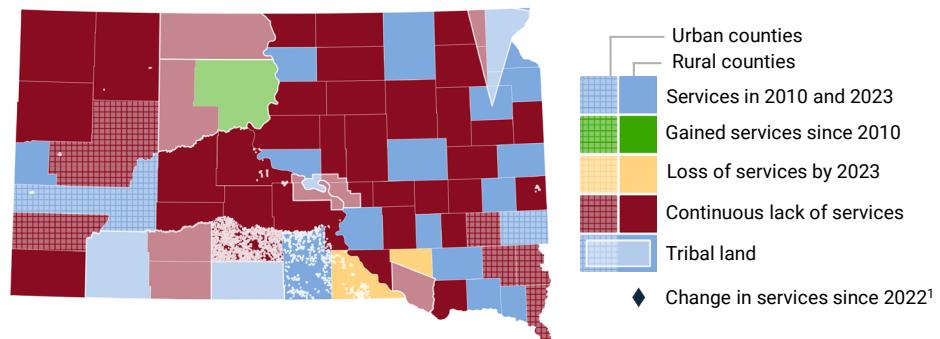
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more South Dakota counties that lost hospital-based obstetric services than gained. During this period, 2 of South Dakota's 66 counties lost all services, while 1 county (rural) gained services (Map).
- In 2010, 35% of rural and 25% of urban counties in South Dakota had hospital-based obstetric services. By 2023, access remained relatively stable in rural counties (33%) and did not change in urban counties (Fig. 1).
- Of the 2 counties (both rural) that lost all hospital-based obstetric services between 2010 and 2023, both were noncore (without a town $> 10,000$). The county that gained services was also a rural noncore county.

Figure 1: Percentage of South Dakota rural ($n = 58$) and urban ($n = 8$) counties with in-county hospital-based obstetric care, 2010-2023

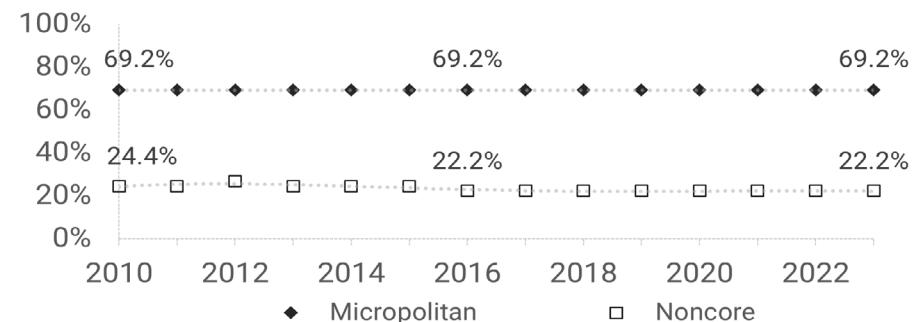


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of South Dakota rural micropolitan ($n = 13$) and rural noncore ($n = 45$) counties with in-county hospital-based obstetric care, 2010-2023



Tennessee

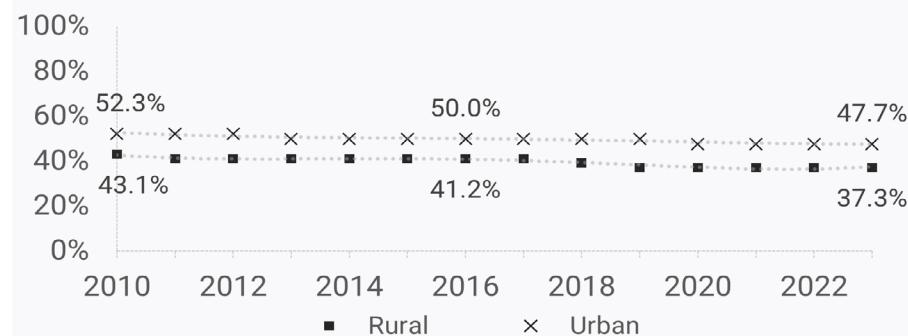
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Tennessee.
- In 2023, 63% of rural and 52% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 90% of rural noncore counties (without a town $> 10,000$) in Tennessee lacked hospital-based obstetric services (Fig. 2).

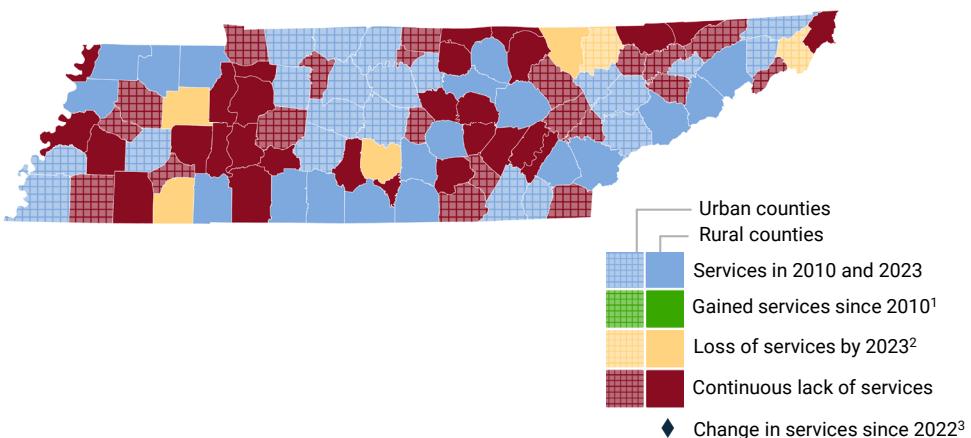
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Tennessee between 2010 and 2023, during which time 6 of Tennessee's 95 counties lost all services (Map). One of these counties gained services after 2010 but lost all services by 2023.
- In 2010, 43% of rural and 52% of urban counties in Tennessee had hospital-based obstetric services. By 2023, access dropped, and 37% of rural and 48% of urban counties had these services (Fig. 1).
- Of the 4 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 75% were noncore (without a town $> 10,000$).

Figure 1: Percentage of Tennessee rural ($n = 51$) and urban ($n = 44$) counties with in-county hospital-based obstetric care, 2010-2023

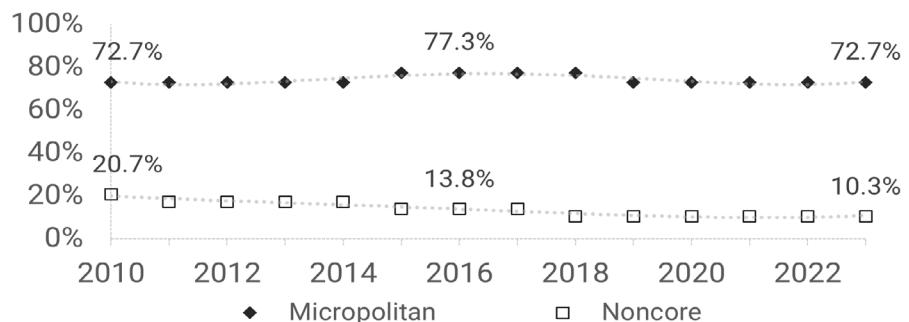


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained hospital-based obstetric services between 2010 and 2023 and maintained these services through 2023.
2. 1 county gained obstetric services after 2010 but then lost those services by 2023.
3. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Tennessee rural micropolitan ($n = 22$) and rural noncore ($n = 29$) counties with in-county hospital-based obstetric care, 2010-2023



Texas

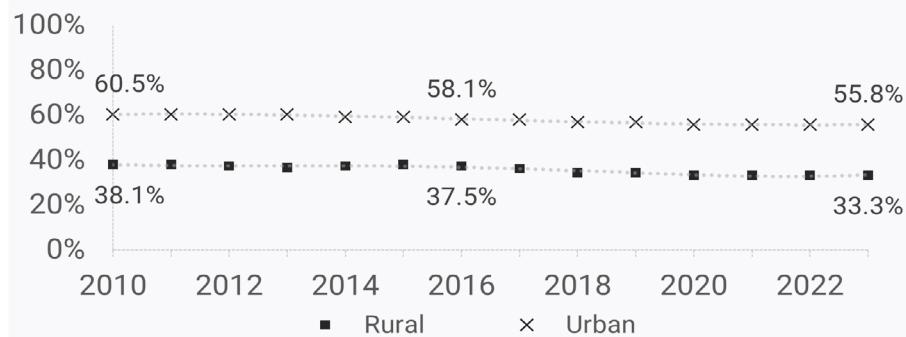
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Texas.
- In 2023, 67% of rural and 44% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 83% of rural noncore counties (without a town $> 10,000$) in Texas lacked hospital-based obstetric services (Fig. 2).

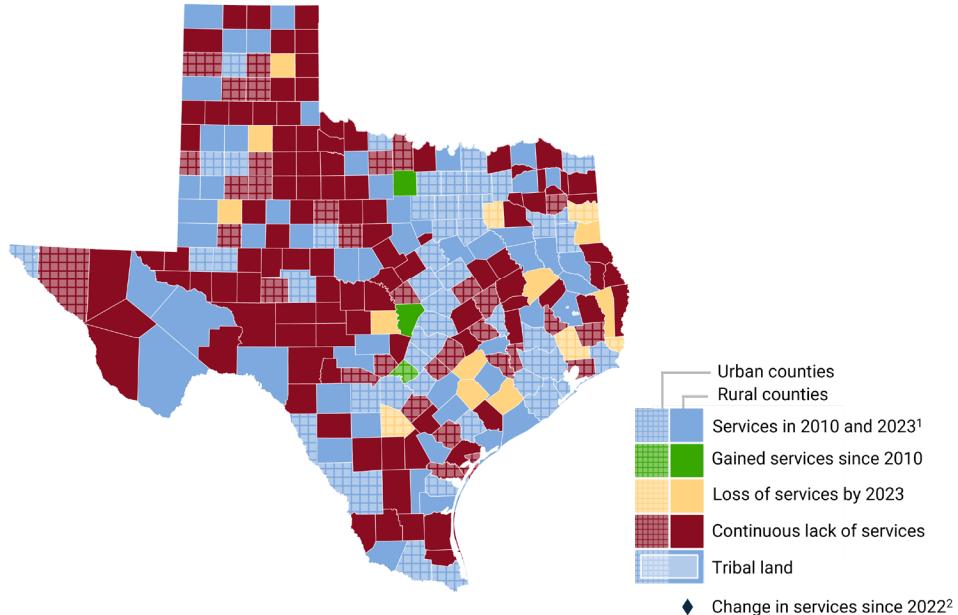
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more Texas counties that lost hospital-based obstetric services than gained. During this period, 15 of Texas's 254 counties lost all services, while 3 counties (2 rural and 1 urban) gained (Map).
- In 2010, 38% of rural and 61% of urban counties in Texas had hospital-based obstetric services. By 2023, access dropped, and 33% of rural and 56% of urban counties had these services (Fig. 1).
- Of the 10 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 70% were noncore (without a town $> 10,000$). The 2 rural counties that gained services were also noncore counties.

Figure 1: Percentage of Texas rural (n = 168) and urban (n = 86) counties with in-county hospital-based obstetric care, 2010-2023

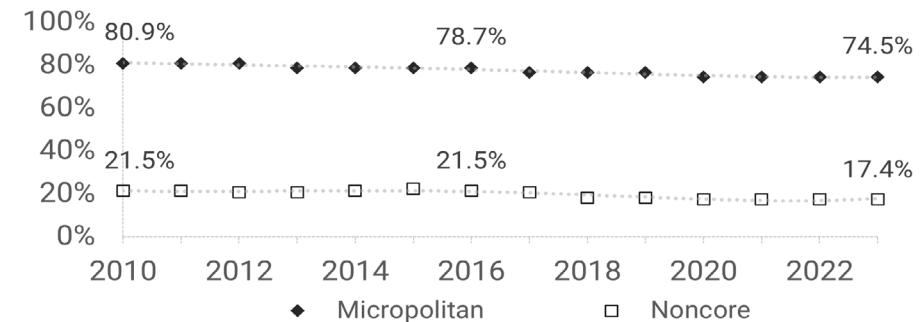


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- 1 county had a period between 2010 and 2023 when services were temporarily not available.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Texas rural micropolitan (n = 47) and rural noncore (n = 121) counties with in-county hospital-based obstetric care, 2010-2023



Utah

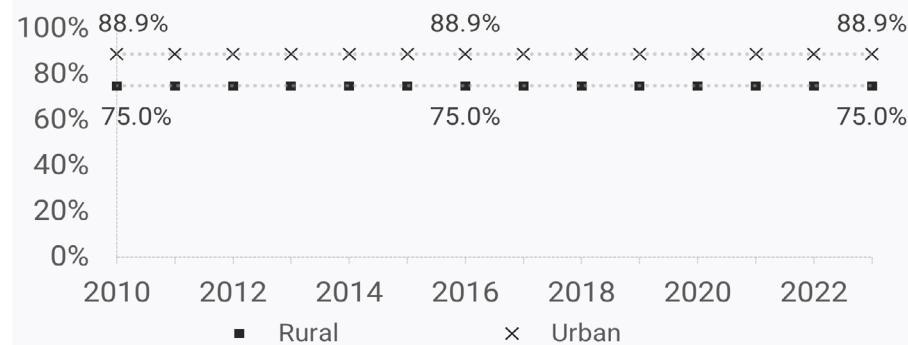
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Utah.
- In 2023, 25% of rural and 11% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 31% of rural noncore counties (without a town $> 10,000$) in Utah lacked hospital-based obstetric services (Fig. 2).

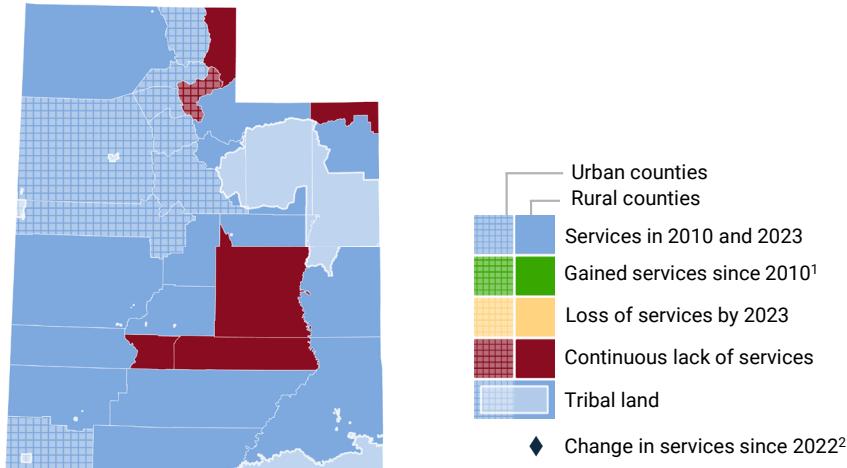
Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, county-level access to hospital-based obstetric services did not change in Utah. During this period, none of Utah's 29 counties lost all services (Map).
- In 2010, 75% of rural and 89% of urban counties in Utah had hospital-based obstetric services; in 2023, these percentages remained unchanged (Fig. 1).
- Of the 5 rural counties in Utah that continuously lacked hospital-based obstetric services between 2010 and 2023, 80% were noncore (without a town $> 10,000$) (Map/Fig. 2).

Figure 1: Percentage of Utah rural (n = 20) and urban (n = 9) counties with in-county hospital-based obstetric care, 2010-2023

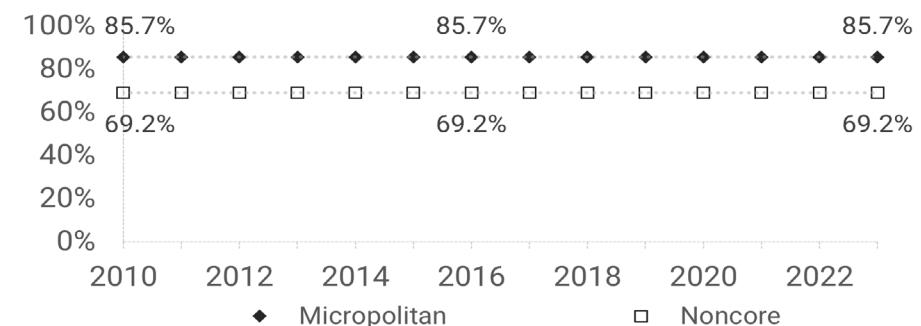


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Utah rural micropolitan (n = 7) and rural non-core (n = 13) counties with in-county hospital-based obstetric care, 2010-2023



Vermont

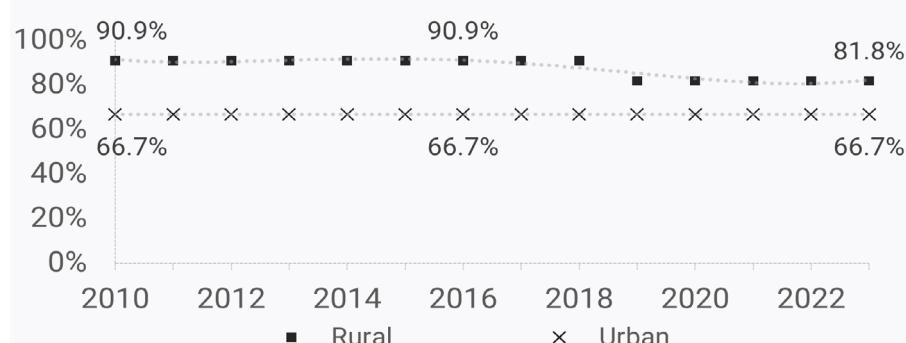
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Vermont.
- In 2023, 82% of rural and 67% of urban counties did not have hospital-based obstetric services (Fig. 1).
- In 2023, 20% of rural noncore counties (without a town > 10,000) in Vermont lacked hospital-based obstetric services (Fig. 2).

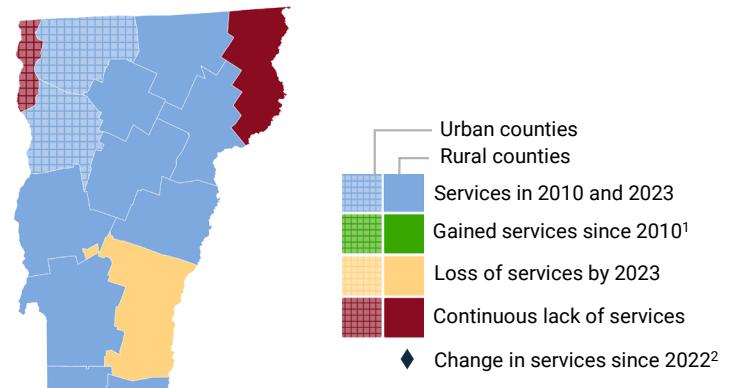
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Vermont between 2010 and 2023, during which time 1 of Vermont's 14 counties lost all services (Map).
- In 2010, 91% of rural and 67% of urban counties in Vermont had hospital-based obstetric services. By 2023, access dropped in rural counties and did not change in urban, so that in 2023, 82% of rural and 67% of urban counties had these services (Fig. 1).
- The county that lost all hospital-based obstetric services between 2010 and 2023 was a rural micropolitan county (with a town > 10,000).

Figure 1: Percentage of Vermont rural (n = 11) and urban (n = 3) counties with in-county hospital-based obstetric care, 2010-2023

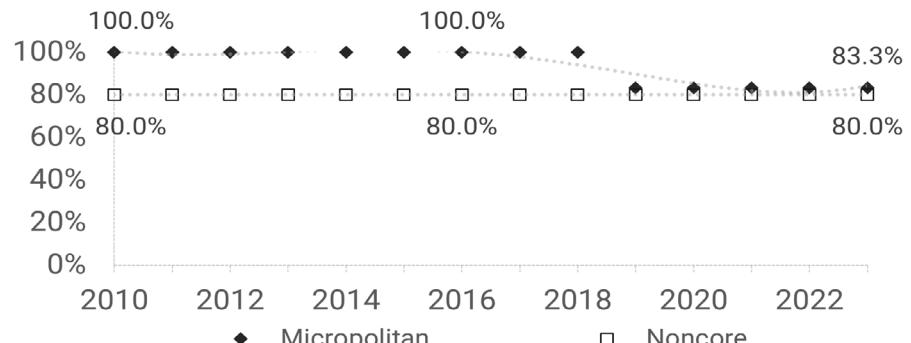


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Vermont rural micropolitan (n = 6) and rural noncore (n = 5) counties with in-county hospital-based obstetric care, 2010-2023



Virginia

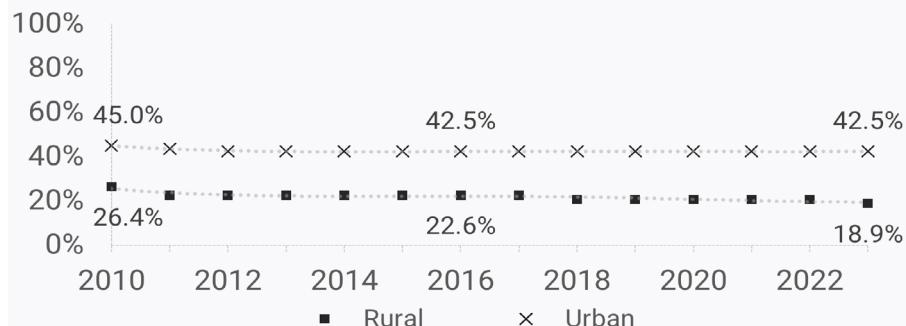
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, 1 Virginia county (rural) lost all hospital-based obstetric services (Map).
- In 2023, 81% of rural and 58% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 85% of rural noncore counties (without a town $> 10,000$) in Virginia lacked hospital-based obstetric services (Fig. 2).

Changes in hospital-based obstetric services availability, 2010-2023

- Between 2010 and 2023, there were more Virginia counties that lost hospital-based obstetric services than gained. During this period, 8 of Virginia's 133 counties lost all services, while 2 counties (both urban) gained services (Map).
- In 2010, 26% of rural and 45% of urban counties in Virginia had hospital-based obstetric services. By 2023, access dropped, and 19% of rural and 43% of urban counties had these services (Fig. 1).
- Of the 4 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 100% were noncore (without a town $> 10,000$).

Figure 1: Percentage of Virginia rural ($n = 53$) and urban ($n = 80$) counties with in-county hospital-based obstetric care, 2010-2023



Availability of Hospital-Based Obstetric Services by County, 2010 - 2023

- Urban counties
- Rural counties
- Services in 2010 and 2023
- Gained services since 2010
- Loss of services by 2023
- Continuous lack of services
- Tribal land
- Change in services since 2022

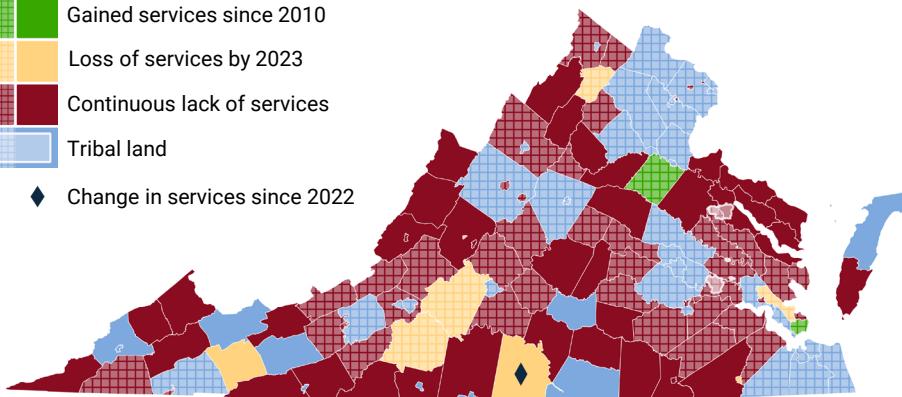
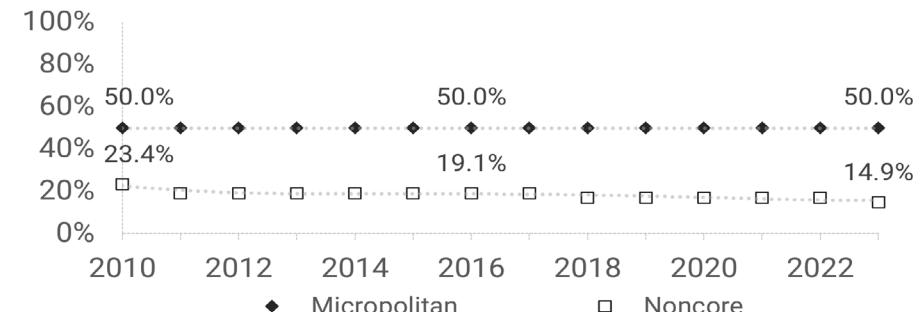


Figure 2: Percentage of Virginia rural micropolitan ($n = 6$) and rural noncore ($n = 47$) counties with in-county hospital-based obstetric care, 2010-2023



Washington

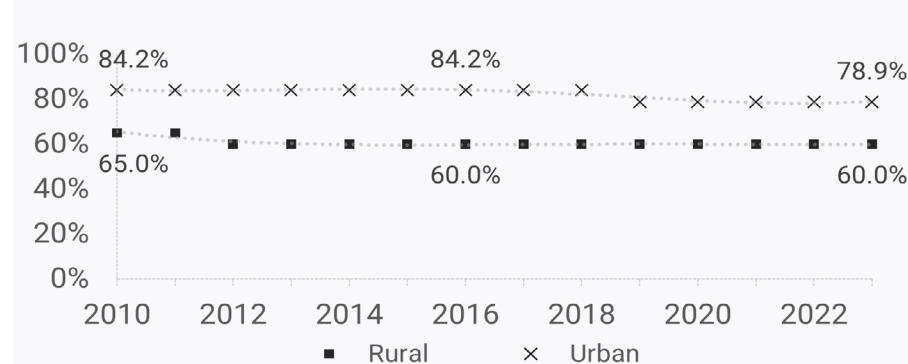
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Washington.
- In 2023, 40% of rural and 21% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 80% of rural noncore counties (without a town > 10,000) in Washington lacked hospital-based obstetric services (Fig. 2).

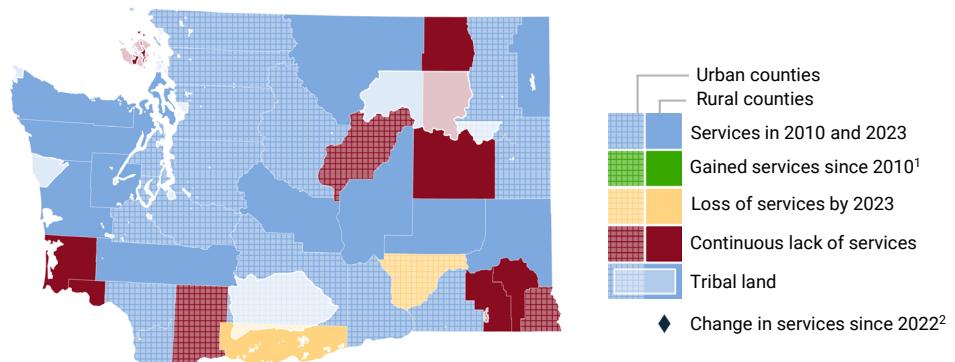
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Washington between 2010 and 2023, during which time 2 of Washington's 39 counties lost all services (Map).
- In 2010, 65% of rural and 84% of urban counties in Washington had hospital-based obstetric services. By 2023, access dropped, and 60% of rural and 79% of urban counties had these services (Fig. 1).
- The rural county that lost all hospital-based obstetric services was noncore (without a town > 10,000).

Figure 1: Percentage of Washington rural (n = 20) and urban (n = 19) counties with in-county hospital-based obstetric care, 2010-2023

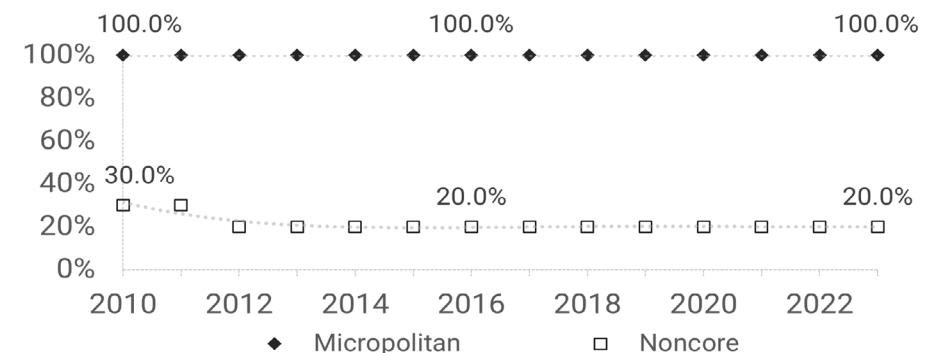


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Washington rural micropolitan (n = 10) and rural non-core (n = 10) counties with in-county hospital-based obstetric care, 2010-2023



West Virginia

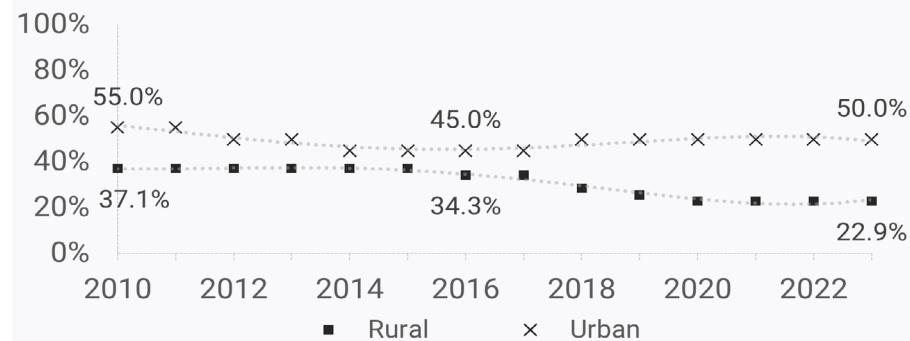
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in West Virginia.
- In 2023, 77% of rural and 50% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 82% of rural noncore counties (without a town $> 10,000$) in West Virginia lacked hospital-based obstetric services (Fig. 2).

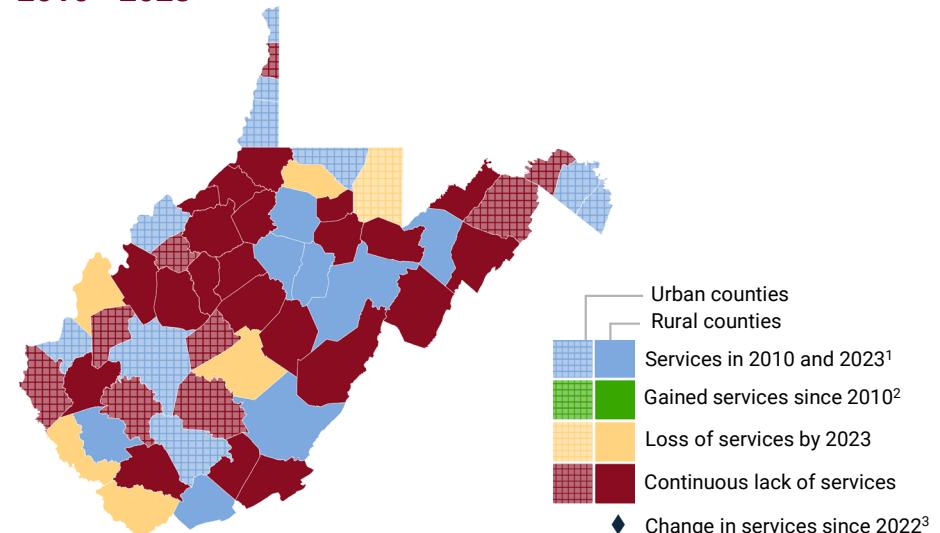
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across West Virginia between 2010 and 2023, during which time 6 of West Virginia's 55 counties lost all services (Map).
- In 2010, 37% of rural and 55% of urban counties in West Virginia had hospital-based obstetric services. By 2023, access dropped, and 23% of rural and 50% of urban counties had these services (Fig. 1).
- Of the 5 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 80% were noncore (without a town $> 10,000$).

Figure 1: Percentage of West Virginia rural ($n = 35$) and urban ($n = 20$) counties with in-county hospital-based obstetric care, 2010-2023

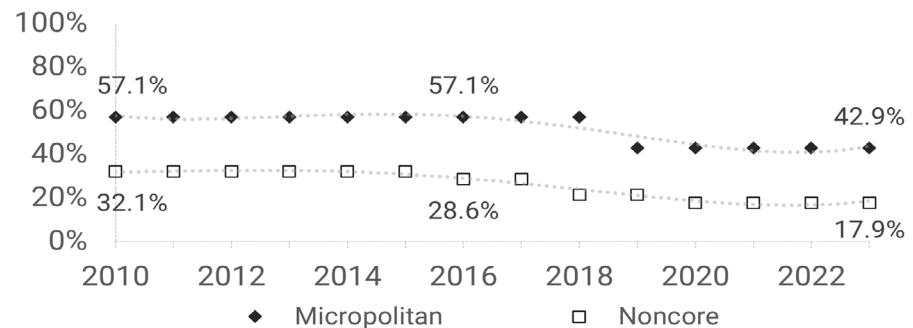


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- 1 county had a period between 2010 and 2023 when services were temporarily not available.
- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of West Virginia rural micropolitan ($n = 7$) and rural noncore ($n = 28$) counties with in-county hospital-based obstetric care, 2010-2023



Wisconsin

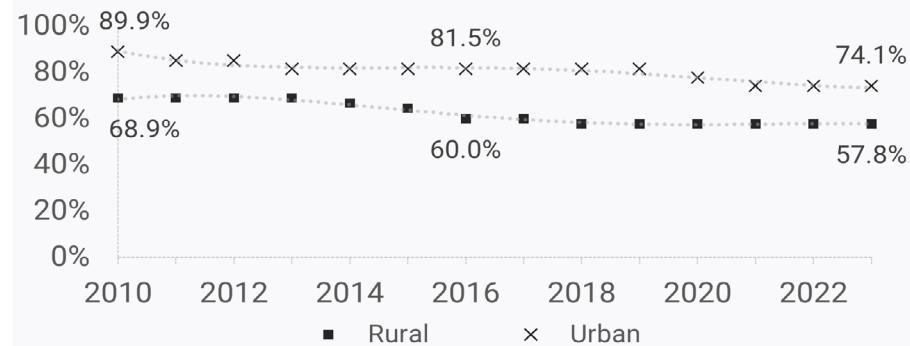
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Wisconsin.
- In 2023, 42% of rural and 26% of urban counties did not have hospital-based obstetric services (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 57% of rural noncore counties (without a town > 10,000) in Wisconsin lacked hospital-based obstetric services (Fig. 2)

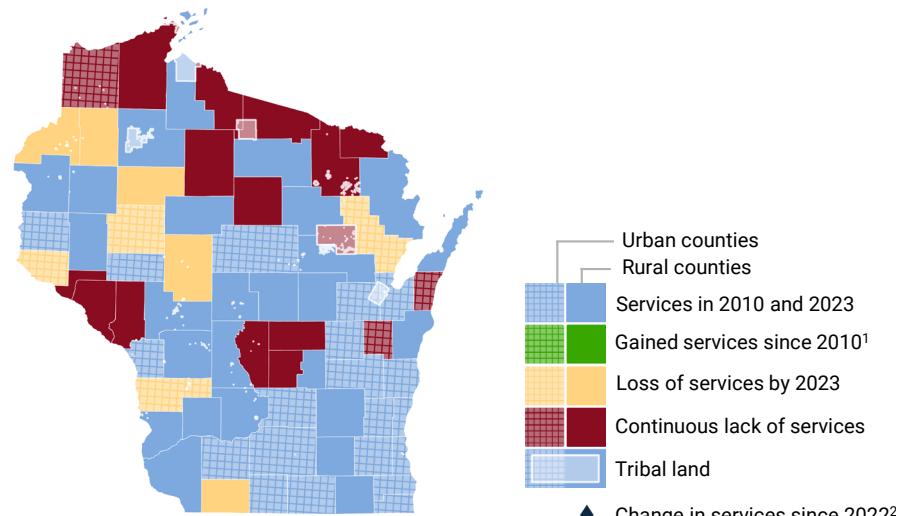
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Wisconsin between 2010 and 2023, during which time 9 of Wisconsin's 72 counties lost all services (Map).
- In 2010, 69% of rural and 90% of urban counties in Wisconsin had hospital-based obstetric services. By 2023, access dropped, and 58% of rural and 74% of urban counties had these services (Fig. 1).
- Of the 5 rural counties that lost all hospital-based obstetric services between 2010 and 2023, 100% were noncore (without a town > 10,000).

Figure 1: Percentage of Wisconsin rural (n = 45) and urban (n = 27) counties with in-county hospital-based obstetric care, 2010-2023

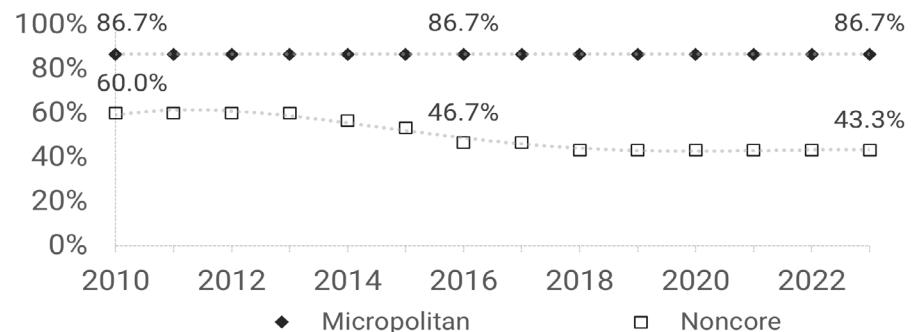


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



- There were no counties that gained services between 2010 and 2023.
- There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Wisconsin rural micropolitan (n = 15) and rural noncore (n = 30) counties with in-county hospital-based obstetric care, 2010-2023



Wyoming

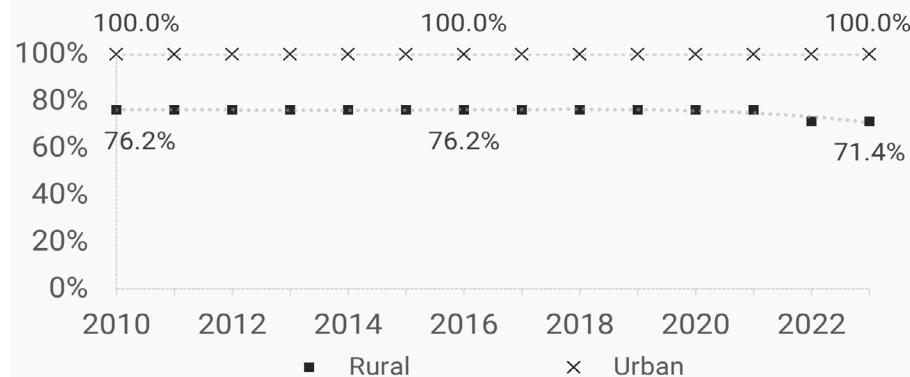
Recent updates on hospital-based obstetric services availability, 2023

- Between 2022 and 2023, county-level access to hospital-based obstetric services did not change in Wyoming.
- In 2023, 29% of rural counties did not have hospital-based obstetric services, compared to 0% of urban (Fig. 1).
- Access to obstetric care is limited in less populated rural counties. In 2023, 46% of all rural noncore counties (without a town $> 10,000$) in Wyoming lacked hospital-based obstetric services (Fig. 2).

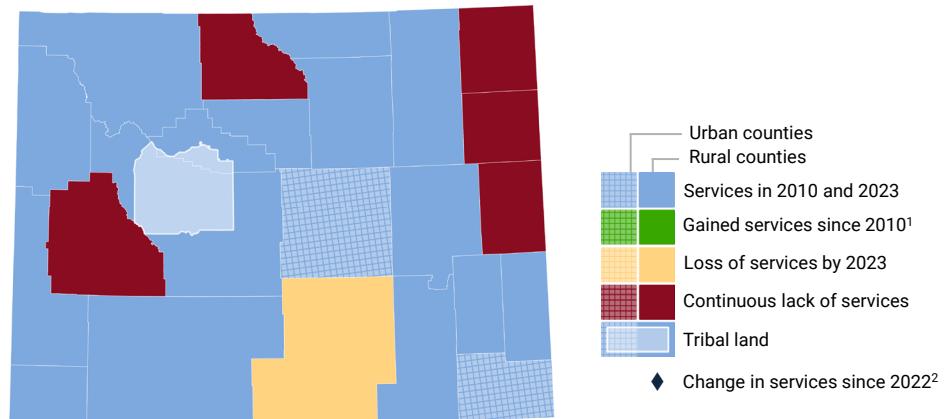
Changes in hospital-based obstetric services availability, 2010-2023

- Access to hospital-based obstetric services declined across Wyoming between 2010 and 2023, during which time 1 of Wyoming's 23 counties lost all services (Map).
- In 2010, 76% of rural and 100% of urban counties in Wyoming had hospital-based obstetric services. By 2023, access dropped in rural counties (71%) and did not change in urban counties (Fig. 1).
- The county that lost all hospital-based obstetric services between 2010 and 2023 was a rural noncore county (without a town $> 10,000$).

Figure 1: Percentage of Wyoming rural (n = 21) and urban (n = 2) counties with in-county hospital-based obstetric care, 2010-2023

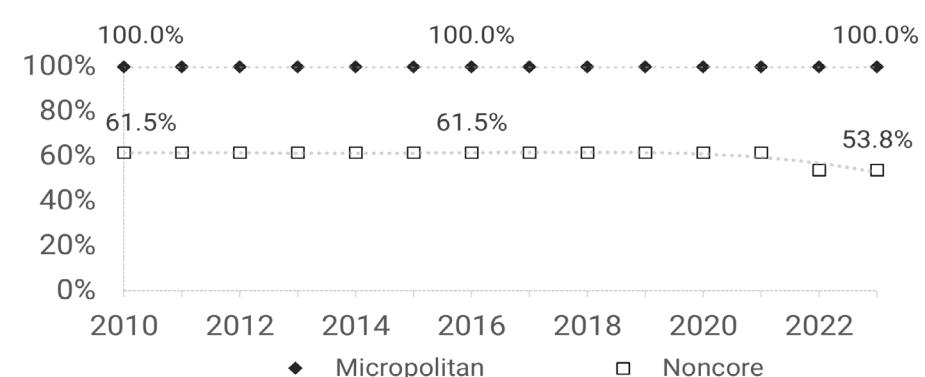


Availability of Hospital-Based Obstetric Services by County, 2010 - 2023



1. There were no counties that gained services between 2010 and 2023.
2. There were no counties that lost or gained services between 2022 and 2023.

Figure 2: Percentage of Wyoming rural micropolitan (n = 8) and rural noncore (n = 13) counties with in-county hospital-based obstetric care, 2010-2023



Technical Specifications

Mapping specifications

Maps were generated using ArcGIS Pro 3.4.0. County boundaries used the Census Bureau's 2024 TIGER/Line Shapefiles and 2018 cartographic boundary files. Tribal land boundaries used the Census Bureau's 2024 TIGER/Line® Shapefile, American Indian Area Geography, which includes “federal and state American Indian reservations, American Indian off-reservation trust land areas (individual or tribal), Oklahoma tribal statistical areas (in 1990 tribal jurisdictional statistical area), tribal designated statistical areas, state designated American Indian statistical areas, Alaska Native Regional Corporations, Alaska Native village statistical areas, and Hawaiian home lands.”

Figure specifications

Time trend figures were generated using Microsoft Excel. Trend lines are 4th order polynomial regression curves.

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