|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Air ambulance. | **Y** | **N** |  |
|  | Emergency department. | **Y** | **N** |  |
|  | Trauma center. | **Y** | **N** |  |
|  | Additional fees to physicians to see Medicaid and uninsured patients. | **Y** | **N** |  |
|  | Payment for routine on-call physician services. | **Y** | **N** |  |