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RED ALERT: **Alameda Hospital at risk of cuts, closure**

What's happening?

NNU's financial analysis shows that Alameda Hospital, with its reliance on Medicaid and Medicare funding and financial patterns similar to recently closed hospitals, is financially vulnerable to service cuts or even eventual closure.

- **Medicare and Medicaid are responsible for 84 percent of Alameda Hospital's net patient revenue.**
- **Alameda Hospital has operated at a deficit for six of the last eight years. In total, from 2018 through 2025, Alameda Hospital experienced \$110.8 million in overall losses.**

Alameda Hospital is part of Alameda Health System (AHS), which also operates Highland Hospital in Oakland and San Leandro Hospital in San Leandro. [According to AHS](#), due to the looming health cuts enacted by the Republicans' H.R. 1 bill, the health care system would lose up to \$30 million this year, \$100 million next year, and an estimated \$150 million in 2028.

In February AHS proposed [layoffs of nearly 250 employees](#), primarily at Highland Hospital and San Leandro Hospital. While these layoffs have recently been put on hold, the threat of these layoffs is a stark example of the devastating impacts of H.R. 1 and how it can lead to disastrous cuts to care in Alameda County.

The proposed layoffs come after Alameda Hospital stopped providing elective surgeries in July of 2024. Patients on the island were forced to travel to Highland Hospital in Oakland or San Leandro Hospital in San Leandro for care. Nurses protested the cuts to services at the time, citing [the recommendations of Alameda's Joint Planning Commission \(JPC\)](#), which proposed maintaining elective surgeries at the hospital.

Who will be hurt by cuts to services or closures?

Alameda Hospital serves a diverse population with 30 percent of discharged patients identifying as Black, 17 percent Asian, and 18 percent Latino (stats are for the first six months of 2025). Demand for and usage of the hospital has grown exponentially over the last five years, showing how the community needs a full-service, acute-care facility.

- In 2025, Alameda Hospital:

- Received 19,967 emergency room visits. Since 2021, the hospital has seen 46 percent increase in annual ER visits.
- Delivered 76,835 days of patient care. This represents a 14 percent increase since 2021.
- Provided 36,314 outpatient visits, a jump of 23 percent since 2021.

Where will patients go?

If Alameda Hospital closes, the next two closest hospitals are Highland Hospital or Alta Bates Summit Medical Center. Both of these hospitals would be overburdened by the closure or cuts to the ER at Alameda Hospital.

- Highland Hospital had more than 89,600 ER visits in 2025, with the average wait time of just over three hours.
- Alta Bates Summit Medical Center had some 41,400 ER visits in 2024 with the average wait time of just over four hours.

Traveling to Highland Hospital or Alta Bates Summit would add travel time to patients, which can cause significant issues when patients are suffering from an emergency medical crisis. Drive time to Highland Hospital could be up to 26 minutes during high traffic periods. Drive time to Alta Bates Summit could range from half an hour to 45 minutes during peak traffic periods. In addition, Alameda is an island and connected via bridges and tunnels to these alternate facilities. If the community is severed from the mainland in the event of an emergency or disaster, residents could not access a hospital.

Sources: hospital utilization rates taken from California Department of Health Care Access and Information Hospital Annual Disclosure Report; hospital financial vulnerability analysis based on Medicare cost reports; ER wait times taken from Medicare Care Compare.