

North Shore Medical Center is a large, non-profit community-High Public Payer (HPP) hospital located in the Northeastern Massachusetts region. It is a member of Mass General Brigham. Between FY16 and FY20, the volume of inpatient discharges at the hospital decreased by 7.3% compared to a median decrease of 7.6% at cohort hospitals. Outpatient visits decreased by 13.7% for the hospital between FY16 and FY20, compared to a median decrease of 15.2% for its peer cohort. North Shore Medical Center experienced a profit of \$51.2M in FY20 and a total margin of 9.7%, compared to the median of its peer cohort of 4.0%.

Overview / Size

Hospital System Affiliation:	Mass General Brigham
Hospital System Surplus (Deficit) in FY20:	\$263,515,000
Change in Ownership (FY16-20):	Not Applicable
Total Staffed Beds:	398, 10th largest acute hospital
% Occupancy:	68.2%, > cohort avg. (63%)
Trauma Center Designation:	Adult: Level 3
Case Mix Index:	1.04, > cohort avg. (1.00); < statewide (1.16)

Financial

Inpatient NPSR per CMAD:	\$12,516
Change FY19-FY20:	2.1%
Inpatient Outpatient Revenue in FY20:	40%:60%
Outpatient Revenue in FY20:	\$191,223,137
Change FY19-FY20:	-10.2%
Total Revenue in FY20:	\$526,160,000
COVID Funding Included in Total Revenue:	\$70,203,000
Total Surplus (Deficit) in FY20:	\$51,197,000

Payer Mix

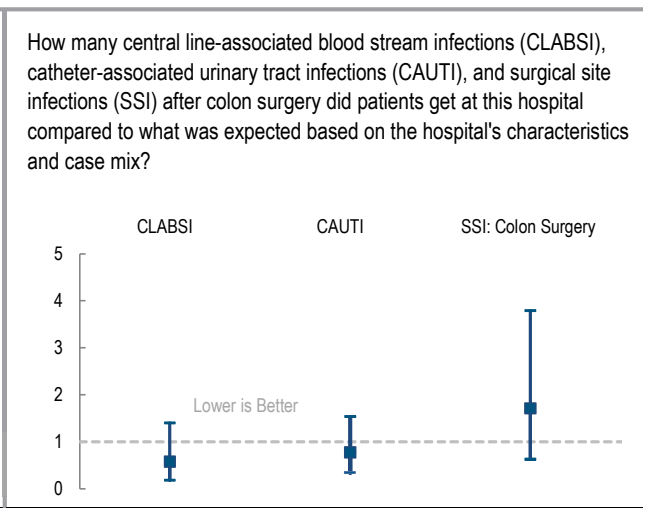
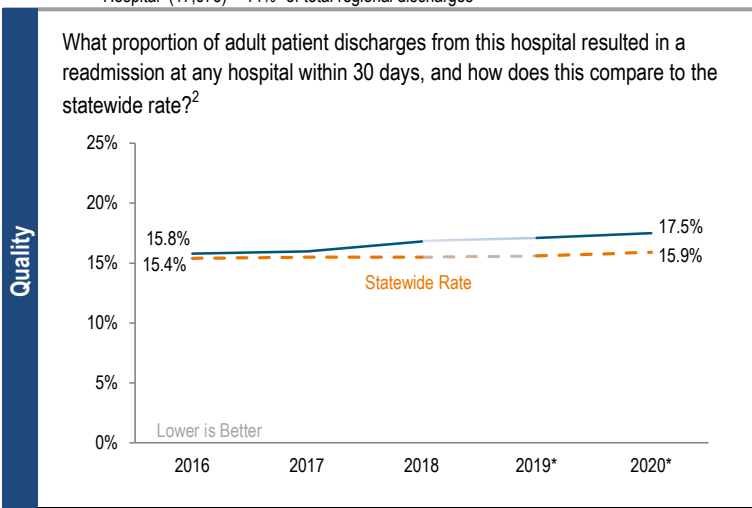
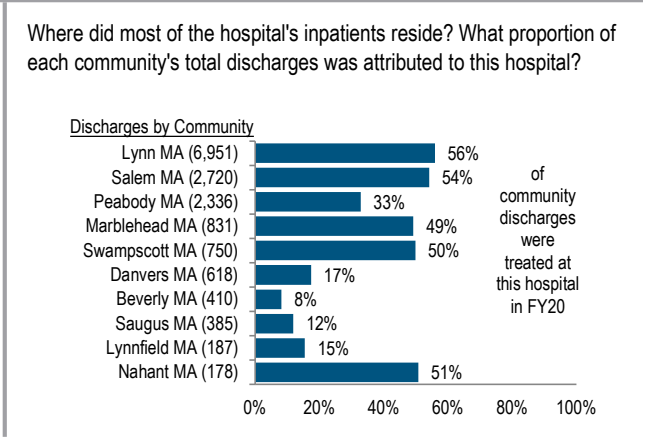
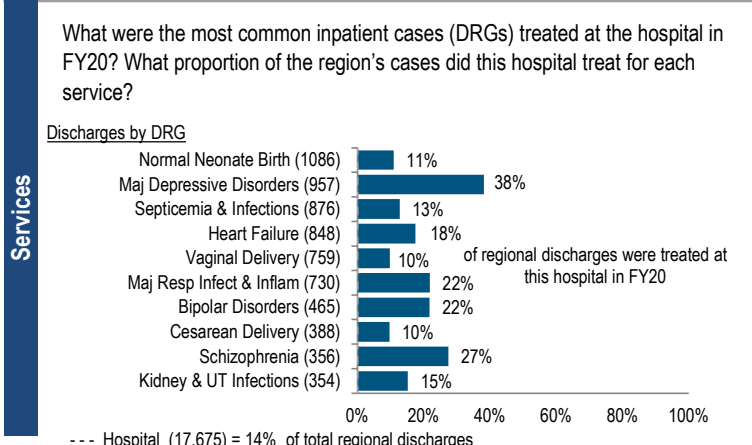
Public Payer Mix ¹ :	69.5% HPP Hospital
CY19 Commercial Statewide Relative Price:	0.980
Top 3 Commercial Payers:	Blue Cross Blue Shield AllWays Harvard Pilgrim

Utilization

Inpatient Discharges in FY20:	17,675
Change FY19-FY20:	0.4%
Emergency Department Visits in FY20:	70,338
Change FY19-FY20:	-1.1%
Outpatient Visits in FY20:	93,177
Change FY19-FY20:	-15.2%

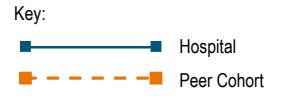
Quality

Readmission Rate in FY20:	17.5%
Change FY19-FY20 (percentage points):	0.4
Early Elective Deliveries Rate:	0.0%



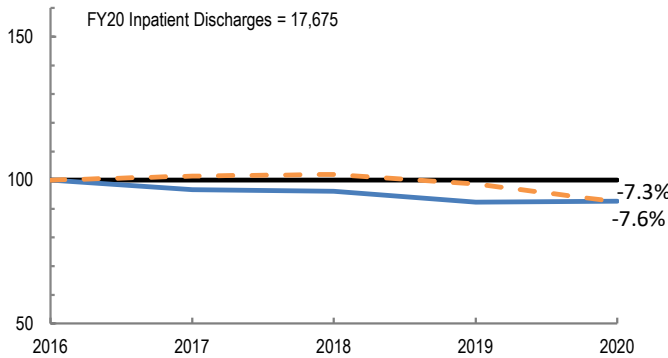
2020 HOSPITAL PROFILE: NORTH SHORE MEDICAL CENTER

Cohort: Community-High Public Payer Hospital

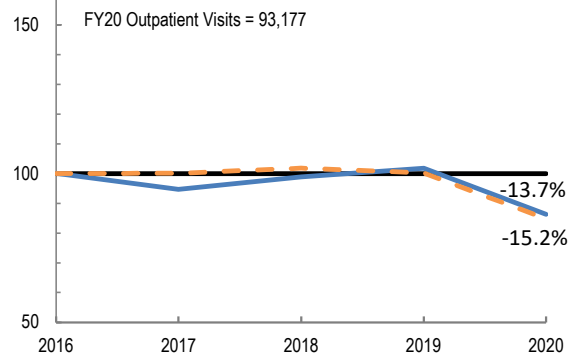


Utilization

How has the volume of the hospital's inpatient discharges changed compared to FY16, and how does this compare to the hospital's peer cohort median? (FY16=100)

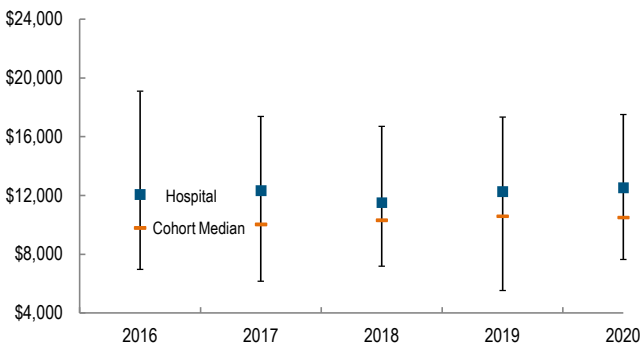


How has the volume of the hospital's outpatient visits changed compared to FY16, and how does this compare to the hospital's peer cohort median? (FY16=100)

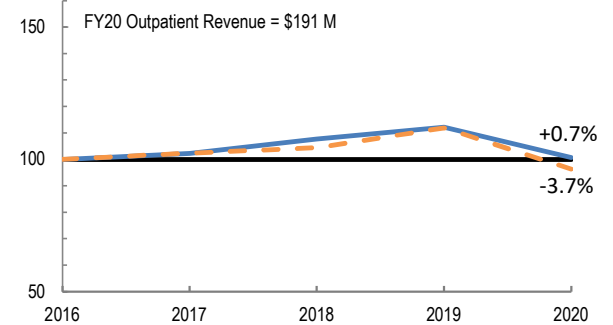


Patient Revenue Trends

What was the hospital's net inpatient service revenue³ per case mix adjusted discharge between FY16 and FY20, and how does this compare to the hospital's peer cohort median?



How has the hospital's net outpatient revenue³ changed compared to FY16, and how does this compare to the hospital's peer cohort median? (FY16=100)



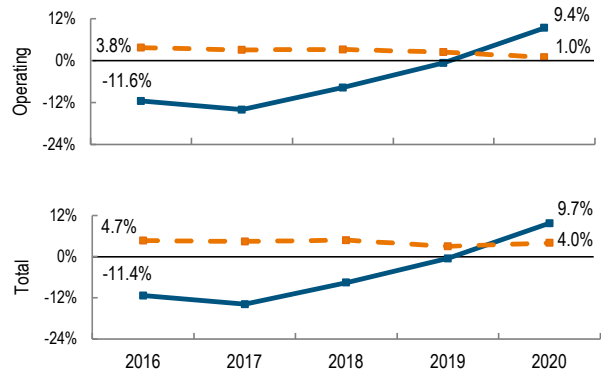
Financial Performance

How have the hospital's total revenue and costs changed between FY16 and FY20? (COVID funding affects FY20 only)

Revenue, Cost, & Profit/Loss (in millions)

FY	2016	2017	2018	2019	2020
Operating Revenue	\$ 419.2	\$ 413.7	\$ 422.8	\$ 456.6	\$ 524.4
COVID Funding Included in Operating Revenue					\$ 70.2
Non-Operating Revenue⁴	\$ 0.7	\$ 0.2	\$ 0.4	\$ 0.3	\$ 1.7
Total Revenue	\$ 419.9	\$ 413.9	\$ 423.1	\$ 456.9	\$ 526.2
Total Costs	\$ 467.9	\$ 471.7	\$ 455.3	\$ 459.7	\$ 475.0
Total Profit (Loss)	\$ (48.0)	\$ (57.7)	\$ (32.2)	\$ (2.8)	\$ 51.2

What were the hospital's total margin and operating margins between FY16 and FY20, and how do these compare to the hospital's peer cohort medians? (Note: FY20 margins include COVID funding)



For descriptions of the metrics, please see the technical appendix.

¹ High Public Payer Hospitals (HPP) reported a minimum of 63% of gross patient service revenue from public payers.

² For 2019 and 2020 readmission rates, a new methodology was used. These rates may not be comparable to earlier years. For more information, please see: <https://www.chiamass.gov/assets/docs/r/pubs/2022/Readmissions-Technical-Appendix-2011-2020.pdf>

³ Effective FY 2020 supplemental revenue is not included in net patient service revenue for all hospitals. Prior to FY 2020, reporting of supplemental revenue varied by hospital.

⁴ There was an accounting change adopted by most hospitals beginning in FY 2020 in which unrealized gains and losses on investments are now recognized as non-operating income