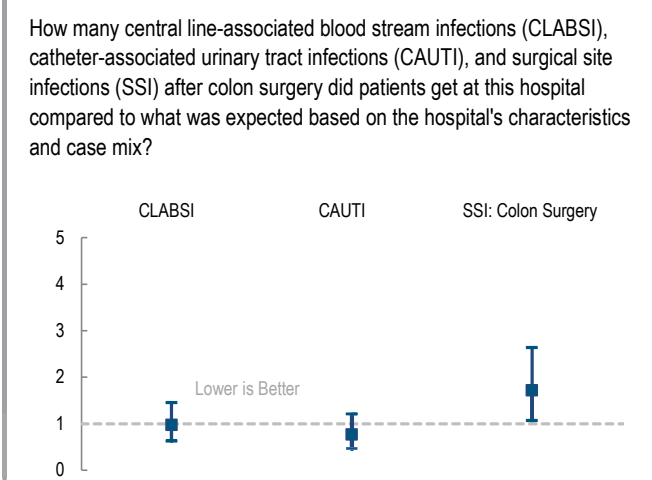
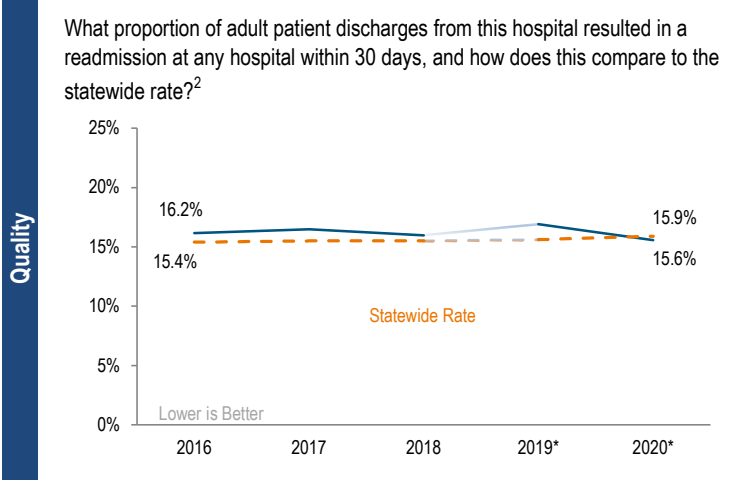
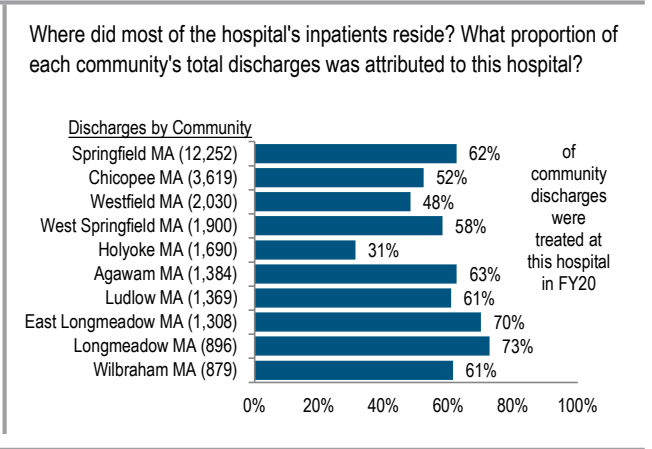
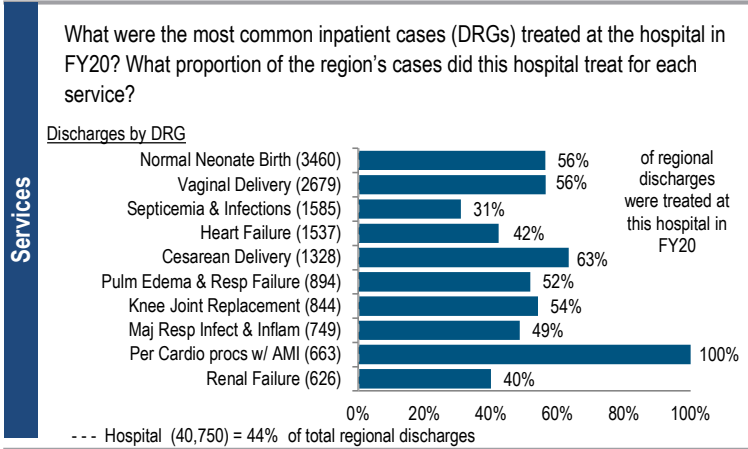


Baystate Medical Center is a non-profit teaching hospital located in the Western Massachusetts region. It is the third-largest acute hospital in Massachusetts, with 791 staffed beds. It is a member of Baystate Health and qualifies as a High Public Payer (HPP). It is one of nine organ transplant centers in Massachusetts. Between FY16 and FY20, the volume of inpatient discharges decreased by 1.0% compared to a 6.4% decrease at cohort hospitals. Baystate Medical Center was profitable each year from FY16 to FY20. In FY20 it had a total margin of 6.4%, compared to its peer cohort median of 4.8%.

Overview / Size		Payer Mix	
Hospital System Affiliation:	Baystate Health	Public Payer Mix ¹ :	71.0% HPP Hospital
Hospital System Surplus (Deficit) in FY20:	\$44,236,000	CY19 Commercial Statewide Relative Price:	0.972
Change in Ownership (FY16-20):	Not Applicable	Top 3 Commercial Payers:	Blue Cross Blue Shield Health New England Cigna
Total Staffed Beds:	791, 3rd largest acute hospital		
% Occupancy:	74.0%, > cohort avg. (73%)		
Trauma Center Designation:	Adult: Level 1, Pedi: Level 2		
Case Mix Index:	1.32, > cohort avg. (1.19); > statewide (1.16)		
Financial		Utilization	
Inpatient NPSR per CMAD:	\$11,506	Inpatient Discharges in FY20:	40,750
Change FY19-FY20:	-1.9%	Change FY19-FY20:	-4.3%
Inpatient Outpatient Revenue in FY20:	44%:56%	Emergency Department Visits in FY20:	95,922
Outpatient Revenue in FY20:	\$597,255,431	Change FY19-FY20:	-42.3%
Change FY19-FY20:	1.4%	Outpatient Visits in FY20:	343,851
Total Revenue in FY20:	\$1,481,244,000	Change FY19-FY20:	-21.5%
COVID Funding Included in Total Revenue:	\$90,976,000		
Total Surplus (Deficit) in FY20:	\$95,181,000	Quality	
		Readmission Rate in FY20:	15.6%
		Change FY19-FY20 (percentage points):	-1.4
		Early Elective Deliveries Rate:	6.3%



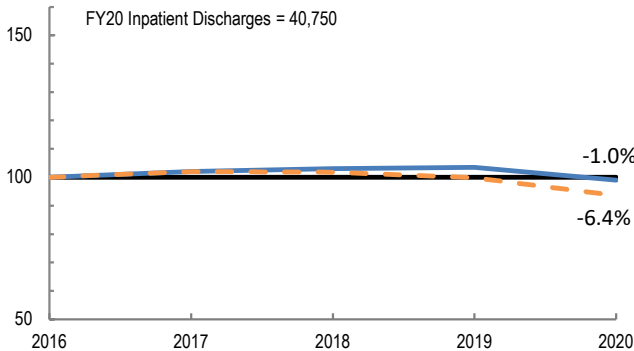
2020 HOSPITAL PROFILE: BAYSTATE MEDICAL CENTER

Cohort: Teaching Hospital

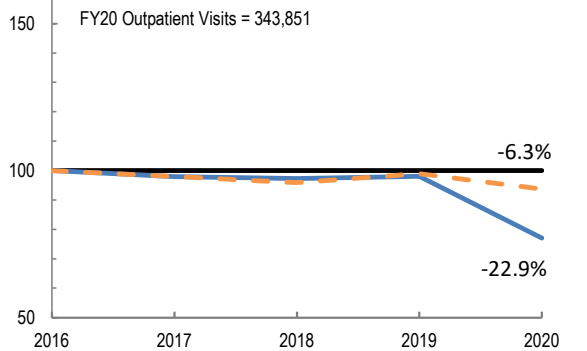


Utilization

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)

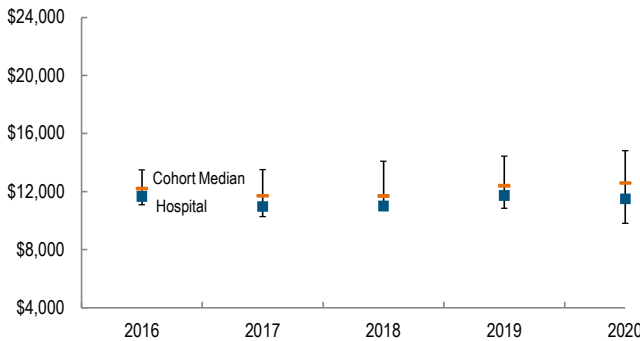


How has the volume of the hospital's outpatient visits changed compared to FY16, and how does this compare to the hospital's peer cohort median? (FY16=100)

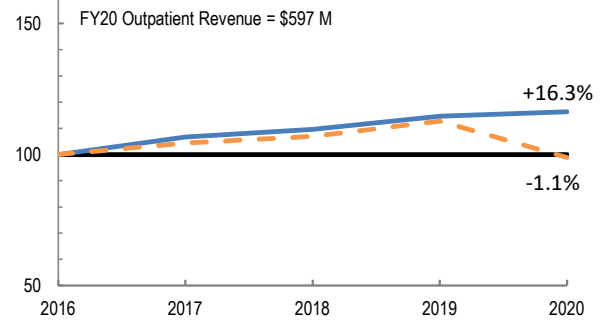


Patient Revenue Trends

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)



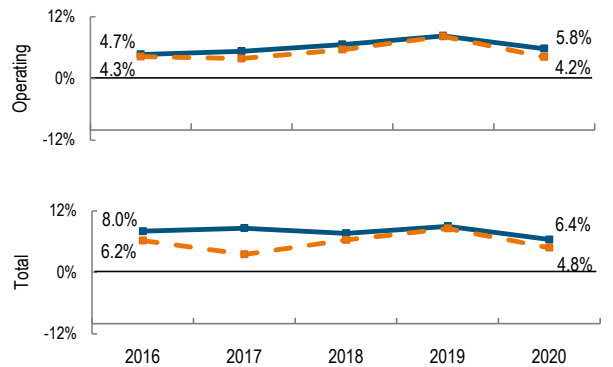
Financial Performance

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	\$ 1,178.2	\$ 1,227.1	\$ 1,296.2	\$ 1,400.1	\$ 1,472.3
COVID Funding Included in Operating Revenue					\$ 91.0
Non-Operating Revenue⁴	\$ 40.3	\$ 42.3	\$ 13.3	\$ 8.9	\$ 8.9
Total Revenue	\$ 1,218.4	\$ 1,269.4	\$ 1,309.5	\$ 1,408.9	\$ 1,481.2
Total Costs	\$ 1,120.7	\$ 1,160.4	\$ 1,209.7	\$ 1,282.6	\$ 1,386.1
Total Profit (Loss)	\$ 97.8	\$ 109.0	\$ 99.8	\$ 126.4	\$ 95.2

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