

MetroWest Medical Center is a for-profit community-High Public Payer (HPP) hospital located in the Metro West region. It is among the larger acute hospitals in Massachusetts and it is a member of Tenet Healthcare. Between FY16 and FY20, the volume of inpatient discharges at the hospital increased by 1.3% compared to a median decrease of 7.6% at cohort hospitals. Outpatient visits decreased 45.8% for the hospital between FY16 and FY20, compared to a median decrease of 15.2% for its peer cohort. The hospital reported profits of \$7.0M in FY19 and \$10.1M in FY20. The FY20 total margin for the hospital was the same as the median total margin at peer cohort hospitals at 4.0%.

Overview / Size

Hospital System Affiliation:	Tenet Healthcare
Hospital System Surplus (Deficit) in FY20:	\$399,000,000
Change in Ownership (FY16-20):	Not Applicable
Total Staffed Beds:	351, among the larger acute hospitals
% Occupancy:	47.6%, < cohort avg. (63%)
Trauma Center Designation:	Not Applicable
Case Mix Index:	1.06, > cohort avg. (1.00); < statewide (1.16)

Financial

Inpatient NPSR per CMAD:	\$10,296
Change FY19-FY20:	-1.7%
Inpatient Outpatient Revenue in FY20:	37%:63%
Outpatient Revenue in FY20:	\$130,990,928
Change FY19-FY20:	-0.5%
Total Revenue in FY20:	\$251,602,849
COVID Funding Included in Total Revenue:	\$32,045,652
Total Surplus (Deficit) in FY20:	\$10,103,127

Payer Mix

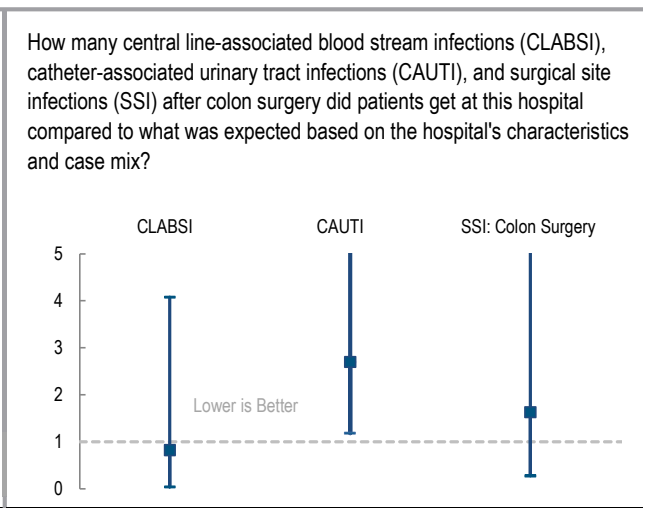
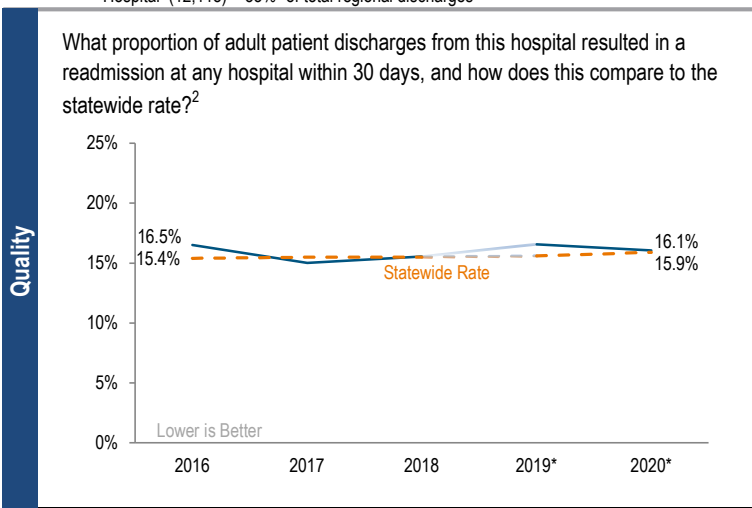
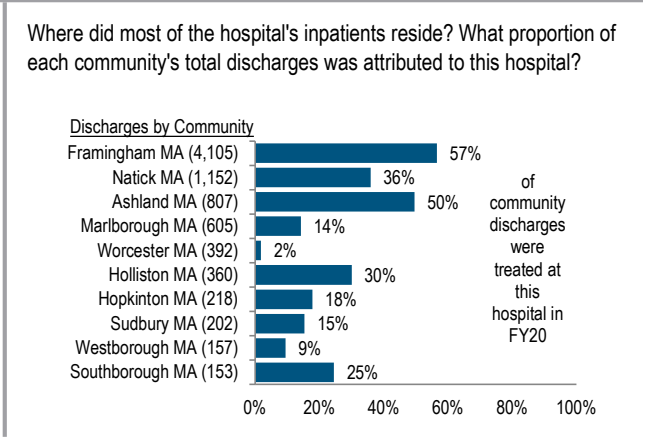
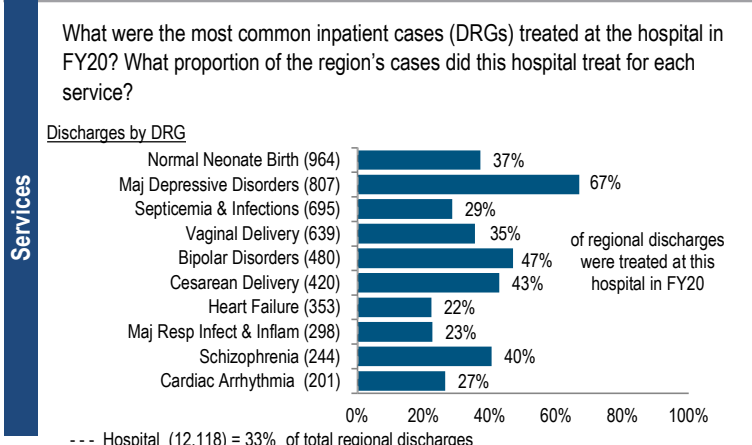
Public Payer Mix ¹ :	67.6% HPP Hospital
CY19 Commercial Statewide Relative Price:	1.003
Top 3 Commercial Payers:	Blue Cross Blue Shield Harvard Pilgrim Tufts HMO

Utilization

Inpatient Discharges in FY20:	12,118
Change FY19-FY20:	6.4%
Emergency Department Visits in FY20:	49,837
Change FY19-FY20:	-1.1%
Outpatient Visits in FY20:	237,703
Change FY19-FY20:	-14.2%

Quality

Readmission Rate in FY20:	16.1%
Change FY19-FY20 (percentage points):	-0.5
Early Elective Deliveries Rate:	0.0%



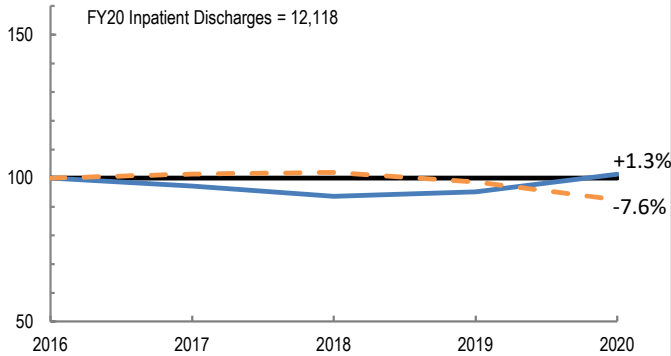
2020 HOSPITAL PROFILE: METROWEST MEDICAL CENTER

Cohort: Community-High Public Payer Hospital

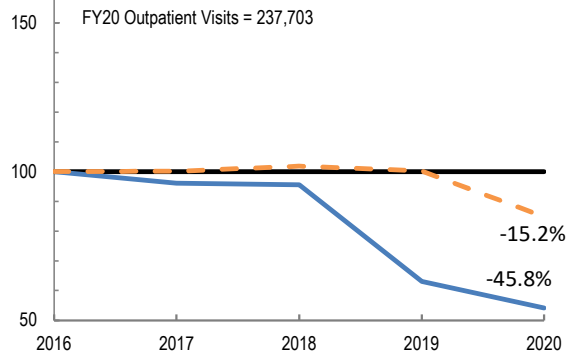


Utilization

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)

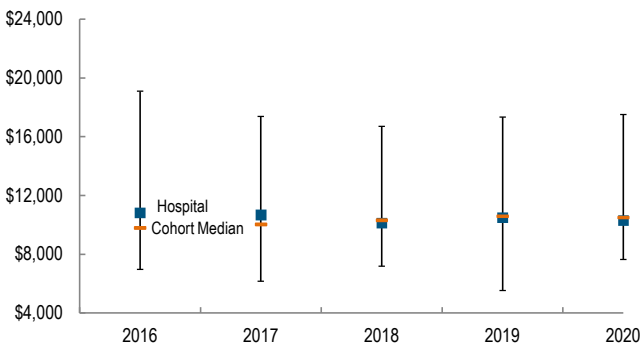


How has the volume of the hospital's outpatient visits changed compared to FY16, and how does this compare to the hospital's peer cohort median? (FY16=100)

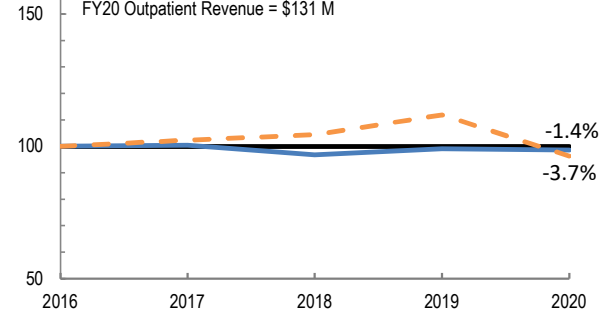


Patient Revenue Trends

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)



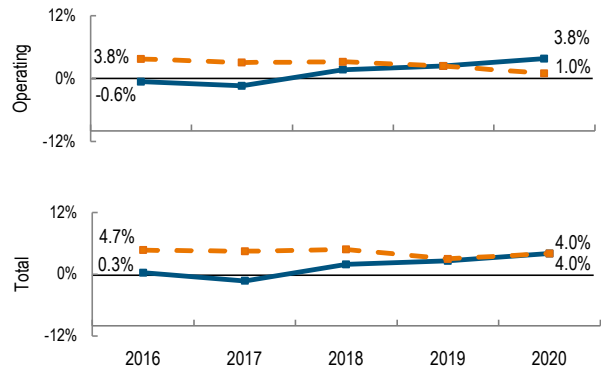
Financial Performance

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	\$ 247.6	\$ 241.3	\$ 253.9	\$ 267.5	\$ 251.0
COVID Funding Included in Operating Revenue				\$ 32.0	
Non-Operating Revenue⁴	\$ 2.2	\$ 0.4	\$ 0.5	\$ 0.6	\$ 0.6
Total Revenue	\$ 249.8	\$ 241.7	\$ 254.4	\$ 268.1	\$ 251.6
Total Costs	\$ 249.0	\$ 244.7	\$ 249.6	\$ 261.1	\$ 241.5
Total Profit (Loss)	\$ 0.8	\$ (3.0)	\$ 4.8	\$ 7.0	\$ 10.1

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