

Anna Jaques Hospital

2022 Hospital Profile

OVERVIEW

City/Town:	Newburyport, MA
Region:	Northeastern Massachusetts
Hospital Type:	Community Hospital
Total Staffed Beds in HFY22:	136, Mid-Size Hospital
Hospital System Affiliation:	Beth Israel Lahey Health
Hospital System Surplus (Deficit) in HFY22:	(\$442,037,000)
Change in Ownership HFY18-HFY22:	Beth Israel Lahey Health 3/1/19

Tax Status:	Non-profit
Trauma Center Designation:	Adult: Level 3
Total FTE's in HFY22:	708.33
FY22 Case Mix Index:	0.96
Public Payer Mix ¹ :	62.0%
Percent of Total GPSR - Medicare/Medicaid/Commercial:	52% / 11% / 33%
CY21 Commercial Statewide Relative Price:	0.76

FINANCIAL

GROSS AND NET PATIENT SERVICE REVENUES (GPSR & NPSR)

	HFY18	HFY19	HFY20	HFY21	HFY22
Inpatient GPSR	\$73.9M	\$79.1M	\$70.3M	\$73.9M	\$75.0M
Outpatient GPSR	\$196.3M	\$215.0M	\$182.8M	\$219.8M	\$211.1M
Total GPSR	\$270.2M	\$294.1M	\$253.1M	\$293.7M	\$286.1M
Inpatient NPSR per CMAD	\$8,316	\$8,283	\$8,789	\$8,939	\$8,682
Inpatient NPSR	\$48.0M	\$48.1M	\$45.5M	\$48.7M	\$49.2M
Outpatient NPSR	\$80.9M	\$85.0M	\$69.6M	\$82.8M	\$80.3M

*Data Source: CHIA Hospital Cost Reports

REVENUE & EXPENSES

	HFY18	HFY19	HFY20	HFY21	HFY22
Operating Revenue	\$133.8M	\$78.7M	\$126.3M	\$141.2M	\$138.7M
Non-Operating Revenue ³	\$0.4M	\$7.3M	\$0.8M	\$3.8M	(\$2.4M)
COVID Funding Included in Operating Revenue ⁴	-	-	\$6.6M	\$4.9M	\$1.2M
Total Revenue	\$134.1M	\$86.0M	\$127.2M	\$145.0M	\$136.3M
Total Expenses	\$132.4M	\$79.5M	\$133.6M	\$143.0M	\$150.2M
Total Surplus (Deficit)	\$1.8M	\$6.5M	(\$6.4M)	\$1.9M	(\$13.9M)
Operating Margin	1.0%	(0.9%)	(5.7%)	(1.3%)	(8.4%)
Non-Operating Margin	0.3%	8.5%	0.6%	2.6%	(1.8%)
Total Margin	1.3%	7.5%	(5.0%)	1.3%	(10.2%)

*Data Source: Standardized Financial Statements

SOLVENCY AND LIQUIDITY

	HFY18	HFY19	HFY20	HFY21	HFY22
Total Net Assets or Equity	\$33.5M	\$21.0M	\$8.7M	\$26.6M	\$39.5M
Current Ratio	2.1	3.5	1.6	1.6	1.3
Debt Service Coverage Ratio	3.7	5.7	(0.1)	4.4	(4.6)
Cash Flow to Total Debt	17.9%	28.2%	(1.2%)	12.1%	(16.3%)
Equity Financing Ratio	38.1%	22.7%	8.3%	23.1%	34.3%
Average Age of Plant	20.0	0	0	3.0	4.0

*Data Source: Standardized Financial Statements

UTILIZATION

Licensed Beds in HFY22:	136
Available Beds in HFY22:	136
Staffed Beds in HFY22:	136
HFY22 Percentage Occupancy:	61.2%
Inpatient Discharges in HFY22:	5,899
Change HFY21-HFY22:	(2.2%)
Percent of Total Region Discharges in HFY22:	4.5%
Percent of Statewide Total Discharges in HFY22:	<1%
Inpatient Days in HFY22:	30,360
Change HFY21-HFY22:	3.3%
Percent of Total Region Inpatient Days in HFY22:	4.7%
Percent of Statewide Total Inpatient Days in HFY22:	<1%
Average Length of Stay in HFY22:	5.2
Change HFY21-HFY22:	5.7%
Emergency Department Visits in HFY22:	24,274
Change HFY21-HFY22:	7.8%
Percent of Total Region Emergency Department Visits in HFY22:	4.8%
Percent of Statewide Total Emergency Department Visits in HFY22:	<1%
Outpatient Visits in HFY22:	61,531
Change HFY21-HFY22:	1.1%

*Data Source: CHIA Hospital Cost Reports

TOP DISCHARGES BY INPATIENT CASE (DRG) IN FY22

Inpatient Case (DRG) ⁵	Discharges	Percent of Total Hospital Discharges
Normal Neonate Birth	568	9.6%
Septicemia & Disseminated Infections	389	6.6%
Vaginal delivery	334	5.7%
Bipolar disorders	256	4.3%
Major Depressive Disorders	249	4.2%
Cesarean delivery	232	3.9%
Major Resp Infect & Inflam	231	3.9%
Heart failure	215	3.7%
Depression Exc Mdd	194	3.3%
Knee joint replacement	186	3.2%

*Data Source: CHIA Hospital Discharge Dataset

TOP DISCHARGES BY COMMUNITY IN FY22

Community ⁵	Discharges	Percent of Total Community Discharges
Newburyport, MA	967	60%
Amesbury, MA	920	57%
Haverhill, MA	655	8%
Salisbury, MA	582	58%
Merrimac, MA	294	46%
Groveland, MA	181	27%
Seabrook, NH	169	47%
Georgetown, MA	162	24%
Rowley, MA	146	25%
West Newbury, MA	144	48%

*Data Source: CHIA Hospital Discharge Dataset

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

³ There was an accounting change adopted by most hospitals beginning in HFY 2020 in which unrealized gains and losses on investments are now recognized as non-operating revenue.

⁴ Federal and State COVID-19 relief funding was distributed to hospitals as part of the Coronavirus Aid, Relief, and Economic Security (CARES) Act beginning in HFY2020. A portion of this funding was reported as operating revenue.

⁵ Inpatient cases and communities with less than 25 discharges have been omitted from the Top Discharges by Inpatient Case (DRG) and Top Discharges By Community charts.

⁶ As Beth Israel Lahey Health became financially consolidated in March 2019, seven months of financial data was reported for FY 2019 for this hospital.



For more information, please contact:

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