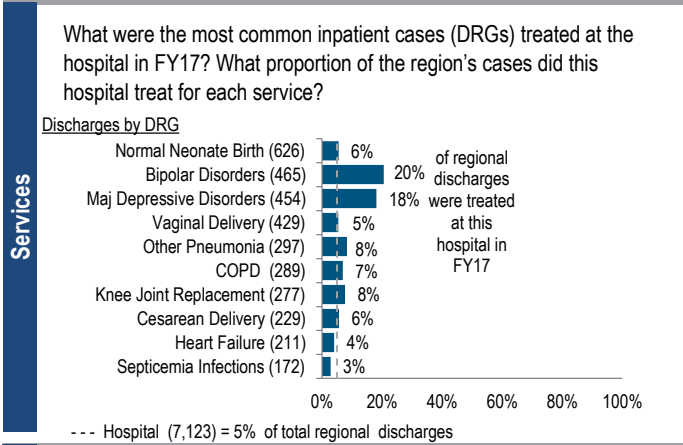


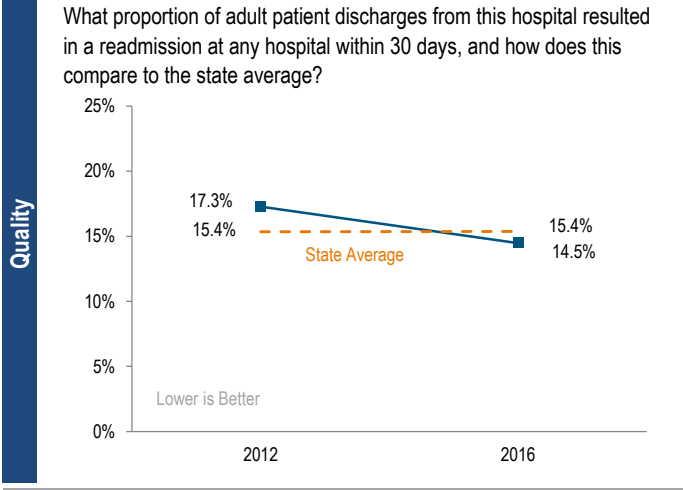
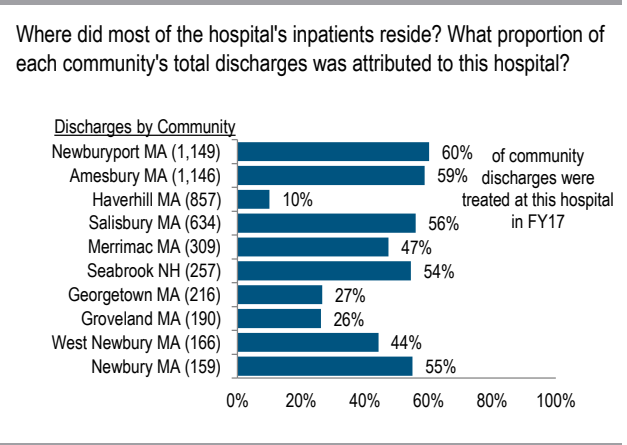
Anna Jaques Hospital is a mid-size, non-profit community hospital located in the Northeastern Massachusetts region. It has been clinically affiliated with Beth Israel Deaconess Medical Center since 2010. From FY13 to FY17, inpatient discharges decreased by 6.7% at the hospital, compared to a median increase of 0.5% in its peer cohort. Outpatient visits increased by 24.1% between FY13 and FY17, compared to a median 3.5% increase in its peer cohort. Anna Jaques was profitable each of the five years between FY13 and FY17, with a 1.7% total margin in FY17, below the cohort median of 3.1%.

Overview / Size		Payer Mix	
Hospital System Affiliation:	Seacoast Regional Health System	Public Payer Mix:	58.5% (Non-HPP* Hospital)
Change in Ownership (FY13-17):	Not Applicable	CY16 Commercial Statewide Relative Price:	0.74
Total Staffed Beds:	140, mid-size acute hospital	Top 3 Commercial Payers:	Blue Cross Blue Shield of Massachusetts Harvard Pilgrim Health Care Tufts Associated HMO, Inc.
% Occupancy:	56.2%, < cohort avg. (65%)	Utilization	
Special Public Funding:	CHART [^] , ICB [°]	Inpatient Discharges in FY17:	7,123
Trauma Center Designation:	Adult: Level 3	Change FY16-FY17:	1.0%
Case Mix Index:	0.79, < cohort avg. (0.85); < statewide (1.12)	Emergency Department Visits in FY17:	29,586
		Change FY16-FY17:	-3.2%
		Outpatient Visits in FY17:	68,664
		Change FY16-FY17:	0.0%
		Quality	
		Readmission Rate in FY16:	14.5%
		Change FY12-FY16 (percentage points):	-2.8
		Early Elective Deliveries Rate:	3.8%

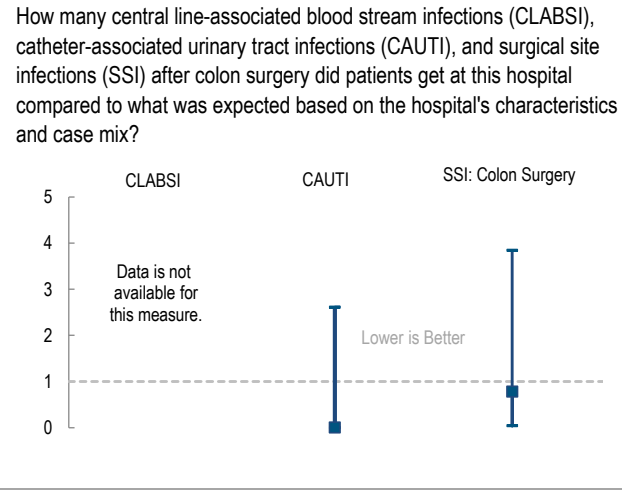
At a Glance



Services



Quality



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

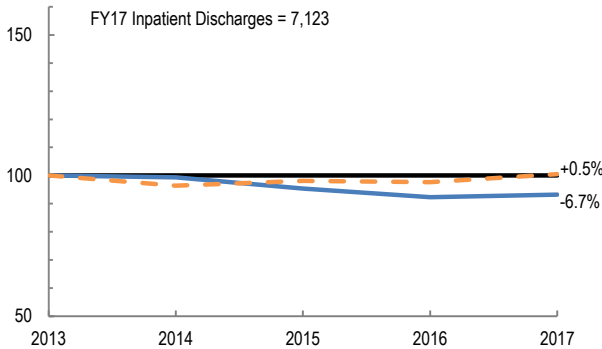
2017 HOSPITAL PROFILE: ANNA JQUES HOSPITAL

Cohort: Community Hospital

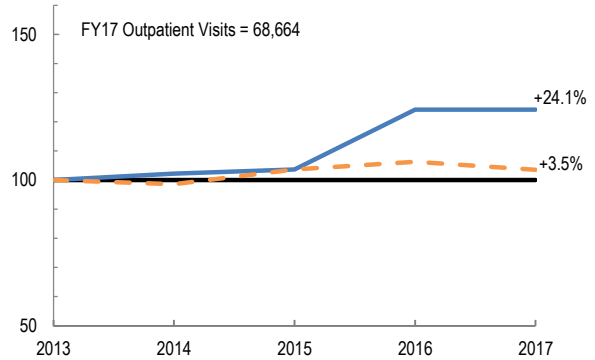


Utilization

How has the volume of the hospital's inpatient discharges changed compared to FY13, and how does this compare to the hospital's peer cohort median? (FY13=100)

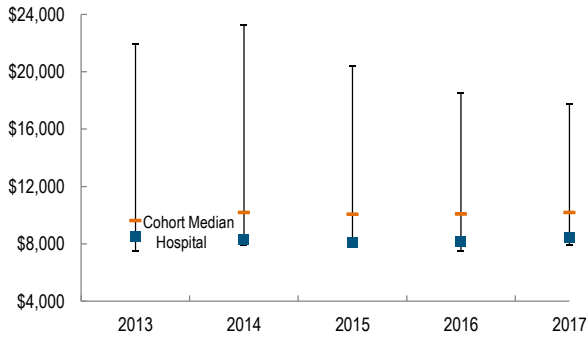


How has the volume of the hospital's outpatient visits changed compared to FY13, and how does this compare to the hospital's peer cohort median? (FY13=100)

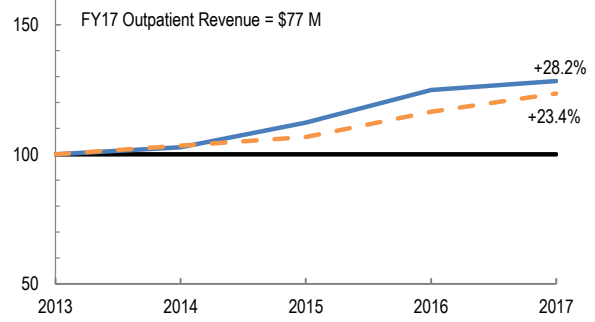


Patient Revenue Trends

What was the hospital's net inpatient service revenue per case mix adjusted discharge between FY13 and FY17, and how does this compare to the hospital's peer cohort median?



How has the hospital's total outpatient revenue changed compared to FY13, and how does this compare to the hospital's peer cohort median? (FY13=100)



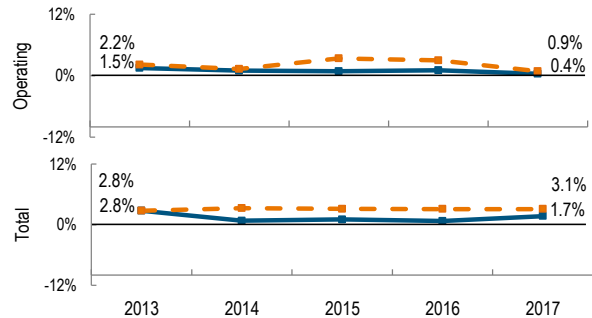
Financial Performance

How have the hospital's total revenue and costs changed between FY13 and FY17?

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

FY	2013	2014	2015	2016	2017
Operating Revenue	\$ 112.5	\$ 113.1	\$ 115.9	\$ 124.3	\$ 129.1
Non-Operating Revenue	\$ 1.4	\$ (0.3)	\$ 0.2	\$ (0.5)	\$ 1.7
Total Revenue	\$ 113.9	\$ 112.8	\$ 116.1	\$ 123.8	\$ 130.8
Total Costs	\$ 110.7	\$ 111.9	\$ 114.9	\$ 123.0	\$ 128.7
Total Profit (Loss)	\$ 3.2	\$ 0.9	\$ 1.2	\$ 0.8	\$ 2.2

What were the hospital's total margin and operating margins between FY13 and FY17, and how do these compare to the hospital's peer cohort medians?



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

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

^ For more information on Community Hospital Acceleration, Revitalization and Transformation (CHART) special funding, please contact the Health Policy Commission (HPC).

° For more information on Infrastructure and Capacity Building (ICB) special funding, please contact the Massachusetts Executive Office of Health and Human Services (EOHHS).