Dana-Farber Cancer Institute 2022 Hospital Profile

OVERVIEW

City/Town:	Boston, MA
Region:	Metro Boston
Hospital Type:	Specialty Hospital
Total Staffed Beds in HFY22:	30, Small Hospital
Hospital System Affiliation:	Dana-Farber Cancer Institute and Subsid.
Hospital System Surplus (Deficit) in HFY22:	(\$8,130,871)
Change in Ownership HFY18-HFY22:	Not Applicable

FINANCIAL

GROSS AND NET PATIENT SERVICE REVENUES (GPSR & NPSR)					
	HFY18	HFY19	HFY20	HFY21	HFY22
Inpatient GPSR	\$117.0M	\$109.8M	\$99.4M	\$110.1M	\$110.6M
Outpatient GPSR	\$3,035.8M	\$3,386.7M	\$3,540.8M	\$4,159.4M	\$4,879.6M
Total GPSR	\$3,152.8M	\$3,496.5M	\$3,640.1M	\$4,269.5M	\$4,990.1M
Inpatient NPSR per CMAD	\$11,394	\$14,514	\$13,805	\$15,078	\$13,044
Inpatient NPSR	\$48.7M	\$46.7M	\$37.0M	\$39.5M	\$39.1M
Outpatient NPSR	\$994.0M	\$1,135.8M	\$1,126.4M	\$1,346.6M	\$1,564.0M
*Data Source: CHIA Hospital Cost Reports					

REVENUE & EXPENSES

	HFY18	HFY19	HFY20	HFY21	HFY22
Operating Revenue	\$1,633.5M	\$1,666.0M	\$1,730.8M	\$2,052.1M	\$2,383.9M
Non-Operating Revenue ³	\$165.0M	\$301.9M	\$290.8M	\$510.7M	\$175.3M
COVID Funding Included in Operating Revenue ⁴	-	-	\$23.3M	\$23.5M	\$14.5M
Total Revenue	\$1,798.5M	\$1,967.9M	\$2,021.7M	\$2,562.8M	\$2,559.2M
Total Expenses	\$1,685.4M	\$1,904.9M	\$1,970.9M	\$2,236.8M	\$2,571.0M
Total Surplus (Deficit)	\$113.1M	\$63.0M	\$50.8M	\$326.0M	(\$11.8M)
Operating Margin	(2.9%)	(12.1%)	(11.9%)	(7.2%)	(7.3%)
Non-Operating Margin	9.2%	15.3%	14.4%	19.9%	6.9%
Total Margin	6.3%	3.2%	2.5%	12.7%	(0.5%)

*Data Source: Standardized Financial Statements

SOLVENCY AND LIQUIDITY

	HFY18	HFY19	HFY20	HFY21	HFY22
Total Net Assets or Equity	\$1,754.9M	\$1,944.5M	\$2,153.2M	\$2,942.8M	\$2,798.2M
Current Ratio	1.6	1.6	1.1	1.2	1.2
Debt Service Coverage Ratio	8.5	6.3	7.2	20.1	4.5
Cash Flow to Total Debt	21.9%	16.3%	12.5%	38.4%	8.3%
Equity Financing Ratio	60.7%	62.2%	55.2%	64.7%	65.3%
Average Age of Plant	9.0	10.0	11.0	11.0	12.0
*Data Source: Standardized Financial Statements					

Tax Status:	Non-profit
Trauma Center Designation:	Not Applicable
Total FTE's in HFY22:	5,249.32
FY22 Case Mix Index:	2.33
Public Payer Mix ¹ :	54.2%
Percent of Total GPSR - Medicare/Medicaid/Commercial:	46% / 7% / 45%
CY21 Commercial Statewide Relative Price:	1.73

UTILIZATION

Licensed Beds in HFY22:	30
Available Beds in HFY22:	30
Staffed Beds in HFY22:	30
HFY22 Percentage Occupancy:	87.8%
Inpatient Discharges in HFY22:	1,290
Change HFY21-HFY22:	(10.2%)
Percent of Total Region Discharges in HFY22:	0.5%
Percent of Statewide Total Discharges in HFY22:	<1%
Inpatient Days in HFY22:	9,609
Change HFY21-HFY22:	(4.5%)
Percent of Total Region Inpatient Days in HFY22:	0.5%
Percent of Statewide Total Inpatient Days in HFY22:	<1%
Average Length of Stay in HFY22:	7.5
Change HFY21-HFY22:	6.4%
Emergency Department Visits in HFY22:	0
Change HFY21-HFY22:	0%
Percent of Total Region Emergency Department Visits in HFY22:	0.0%
Percent of Statewide Total Emergency Department Visits in HFY22:	<1%
Outpatient Visits in HFY22:	368,977
Change HFY21-HFY22:	3.7%
*Data Source: CHIA Hospital Cost Reports	

TOP DISCHARGES BY INPATIENT CASE (DRG) IN FY22

Inpatient Case (DRG) ⁵	Discharges	Percent of Total Hospital Discharges
Chemotherapy	233	18.0%
Bone marrow transplant	72	5.6%
Digestive malignancy	61	4.7%
Maj HEM/IG Dx exc SC	59	4.6%
Other Digestive System Diagnoses	53	4.1%
Lymphoma, Myeloma & Non-Acute Leukemia	44	3.4%
Nervous system malignancy	31	2.4%
Renal failure	31	2.4%
Factors Influ Hith Status	31	2.4%
Major Resp Infect & Inflam	30	2.3%
*Data Source: CHIA Hospital Discharge Dataset		

TOP DISCHARGES BY COMMUNITY IN FY22

Community⁵	Discharges	Percent of Total Community Discharges
Boston, MA	29	0%

*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.

⁶ 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.



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