

Mount Auburn Hospital is a mid-size, non-profit teaching hospital located in the Metro Boston region. It is a member of CareGroup. Mount Auburn Hospital was profitable each year from FY12 to FY16, and it earned a total margin of 6.7%, higher than the 5.7% median of its peer cohort. Over the five year period, Mount Auburn Hospital has had a total margin above the median of its peer cohort in each year.

At a Glance

Overview / Size

Hospital System Affiliation:	CareGroup
Change in Ownership (FY12-16):	Not Applicable
Total Staffed Beds:	233, mid-size acute hospital
% Occupancy:	67.6%, < cohort avg. (79%)
Special Public Funding:	Not Applicable
Trauma Center Designation:	Not Applicable
Case Mix Index:	0.88, < cohort avg. (1.07); < statewide (1.07)

Financial

Inpatient NPSR per CMAD:	\$12,090
Change FY15-FY16:	-5.1%
Inpatient:Outpatient Revenue in FY16:	31%:69%
Outpatient Revenue in FY16:	\$170,485,098
Change FY15-FY16:	1.4%
Total Revenue in FY16:	\$353,546,000
Total Surplus (Loss) in FY16:	\$23,733,000

Payer Mix

Public Payer Mix:	51.8% (Non-HPP* Hospital)
CY15 Commercial S-RP:	0.94
Top 3 Commercial Payers:	Blue Cross Blue Shield of MA Harvard Pilgrim Health Care Tufts Health Plan

Utilization

Inpatient Discharges in FY16:	13,895
Change FY15-FY16:	-1.9%
Emergency Department Visits in FY16:	36,224
Change FY15-FY16:	1.9%
Outpatient Visits in FY16:	103,945
Change FY15-FY16:	-41.1%

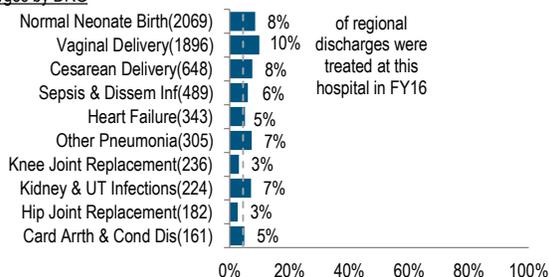
Quality

Readmission Rate in FY15:	14.2%
Change FY11-FY15 (percentage points):	-0.8%
Early Elective Deliveries Rate (Jan 2015-Jun 2016):	0.0%

Services

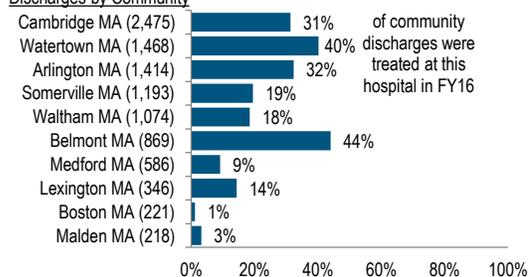
What were the most common inpatient cases (DRGs) treated at the hospital in FY16? What proportion of the region's cases did this hospital treat for each service?

Discharges by DRG



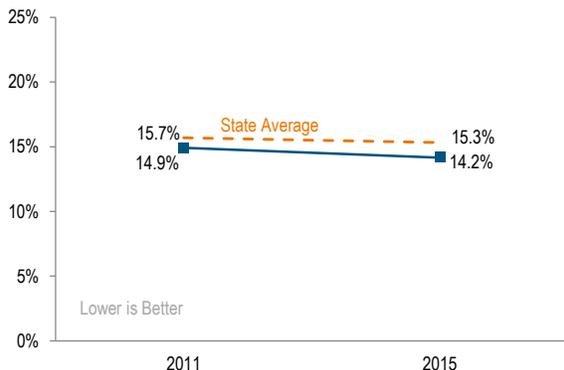
Where did most of the hospital's inpatients reside? What proportion of each community's total discharges was attributed to this hospital?

Discharges by Community

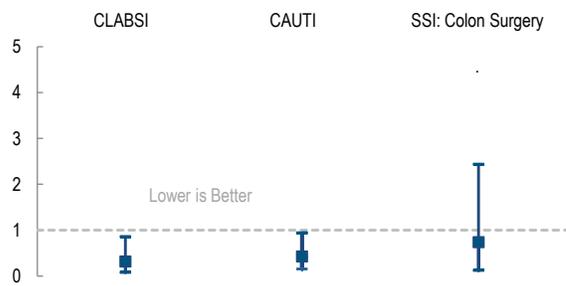


Quality

What proportion of adult patient discharges from this hospital resulted in a readmission at any hospital within 30 days, and how does this compare to the state average?



How many central line-associated blood stream infections (CLABSI), catheter-associated urinary tract infections (CAUTI), and surgical site infections (SSI) after colon surgery did patients get at this hospital compared to what was expected based on the hospital's characteristics and case mix?



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

2016 HOSPITAL PROFILE: MOUNT AUBURN HOSPITAL

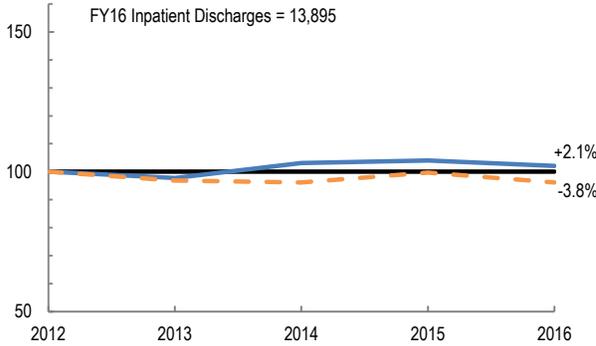
Cohort: Teaching Hospital

Key:

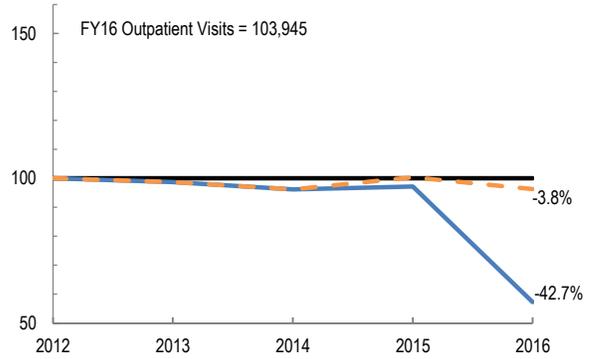
- Hospital
- - - Peer Cohort

Utilization

How has the volume of the hospital's inpatient discharges changed compared to FY12, and how does this compare to the hospital's peer cohort median? (FY12=100)

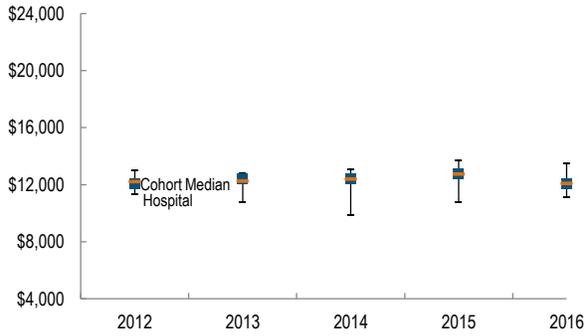


How has the volume of the hospital's outpatient visits changed compared to FY12, and how does this compare to the hospital's peer cohort median? (FY12=100)

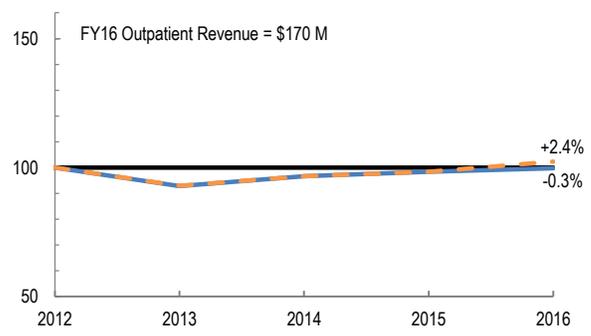


Patient Revenue Trends

What was the hospital's net inpatient service revenue per case mix adjusted discharge between FY12 and FY16, and how does this compare to the hospital's peer cohort median?



How has the hospital's total outpatient revenue changed compared to FY12, and how does this compare to the hospital's peer cohort median? (FY12=100)



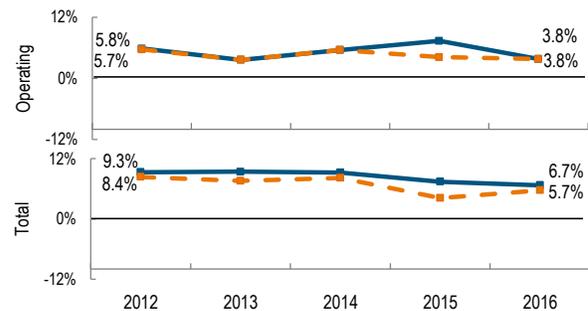
Financial Performance

How have the hospital's total revenue and costs changed between FY12 and FY16?

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

FY	2012	2013	2014	2015	2016
Operating Revenue	\$ 316	\$ 305	\$ 320	\$ 334	\$ 343
Non-Operating Revenue	\$ 11	\$ 19	\$ 12	\$ 0	\$ 10
Total Revenue	\$ 327	\$ 324	\$ 332	\$ 334	\$ 354
Total Costs	\$ 297	\$ 293	\$ 301	\$ 309	\$ 330
Total Profit (Loss)	\$ 30.4	\$ 30.4	\$ 30.7	\$ 24.7	\$ 23.7

What were the hospital's total margin and operating margins between FY12 and FY16, 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.