MERCY MEDICAL CENTER

2017 Hospital Profile

Springfield, MA Community High Public Payer Hospital Western Massachusetts

Mercy Medical Center is a large, non-profit community-High Public Payer (HPP) hospital located in the Western Massachusetts region. Mercy Medical Center was responsible for only 17% of regional discharges but was responsible for 81% of the region's Opioid Abuse and Dependence discharges, as well as 52% of Drug/Alcohol abuse discharges. The hospital incurred a profit in FY17 after reporting a loss in FY16. The hospital had a 3.8% total margin in FY17, equivalent to the median total margin of its peer cohort.

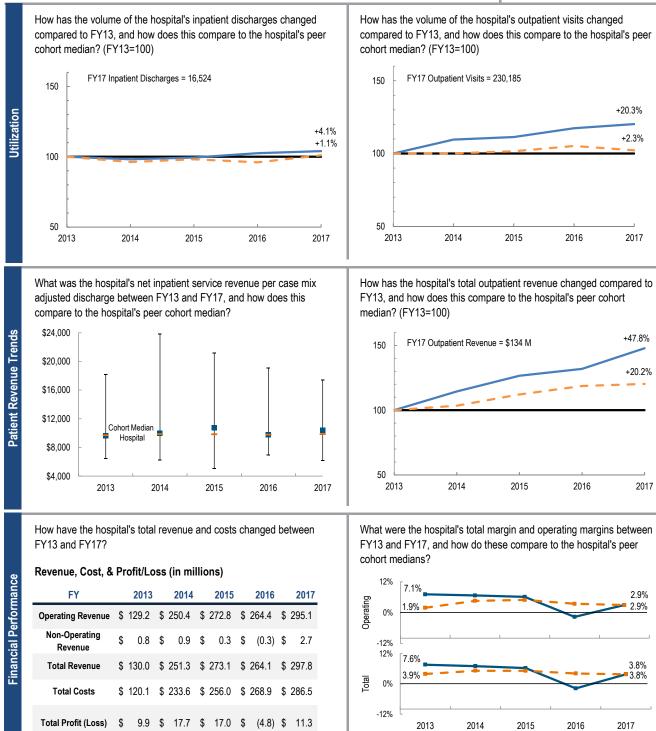
Overview / Size Payer Mix Hospital System Affiliation: Trinity Health Public Payer Mix: 74.2% (HPP* Hospital) Change in Ownership (FY13-17): Not Applicable CY16 Commercial Statewide Relative Price: 0.80 Total Staffed Beds: 395, among the larger acute hospitals Top 3 Commercial Payers: Blue Cross Blue Shield of Massachusetts % Occupancy: 53.5%, < cohort avg. (66%) Health New England, Inc. CHART[^], DSTI^{^θ, ICB[°]} Special Public Funding: UniCare Life and Health Insurance Co. Trauma Center Designation: Not Applicable Utilization At a Glance Case Mix Index: 0.89, < cohort avg. (0.92); < statewide (1.12) Inpatient Discharges in FY17: 16.524 Change FY16-FY17: 1.5% Financial Emergency Department Visits in FY17: 70,715 Inpatient NPSR per CMAD: \$10,379 Change FY16-FY17: -1.4% Change FY16-FY17: 5.9% Outpatient Visits in FY17: 230.185 Inpatient: Outpatient Revenue in FY17: 45%:55% Change FY16-FY17: 2.4% Outpatient Revenue in FY17: \$133,815,302 Quality Change FY16-FY17: 12.1% Readmission Rate in FY16: 15.4% Total Revenue in FY17: \$297.808.175 Change FY12-FY16 (percentage points): 0.8 \$11,272,308 Total Surplus (Loss) in FY17: Early Elective Deliveries Rate: Not Available What were the most common inpatient cases (DRGs) treated at the Where did most of the hospital's inpatients reside? What proportion of hospital in FY17? What proportion of the region's cases did this each community's total discharges was attributed to this hospital? hospital treat for each service? Discharges by DRG Discharges by Community Opioid Abuse & Dependence (1454) 81% Springfield MA (6,341) 31% of community Normal Neonate Birth (1186) 18% Chicopee MA (1,910) 25% discharges Services of regional Vaginal Delivery (862) 17% West Springfield MA (1,107) 30% were treated at discharges Drug/Alcohol Abuse, LAMA (825) Holyoke MA (1,049) 16% this hospital in were treated Maj Depressive Disorders (568) Agawam MA (792) 32% 27% FY17 at this COPD (496) 20% Westfield MA (709) 16% hospital in **Bipolar Disorders (466)** 25% Ludlow MA (516) 23% FY17 East Longmeadow MA (512) Heart Failure (447) 11% 25% Cesarean Delivery (405) 18% Indian Orchard MA (313) 27% Alcohol Abuse & Dependence (363) 29% Feeding Hills MA (306) 27% 20% 80% 100% 0% 20% 40% 60% 80% 100% 0% 40% 60% --- Hospital (16,524) = 17% of total regional discharges What proportion of adult patient discharges from this hospital resulted How many central line-associated blood stream infections (CLABSI). in a readmission at any hospital within 30 days, and how does this catheter-associated urinary tract infections (CAUTI), and surgical site compare to the state average? infections (SSI) after colon surgery did patients get at this hospital 25% compared to what was expected based on the hospital's characteristics and case mix? 20% CLABSI CAUTI SSI: Colon Surgery 5 Quality State Average 15.4% 15.4% 15% 4 15.4% 14.6% 3 10% 2 Lower is Better 5% 1 Lower is Better 0 0% 2012 2016

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

2017 HOSPITAL PROFILE: MERCY MEDICAL CENTER

Cohort: Community High Public Payer Hospital





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

θ For more information on Delivery System Transformation Initiative (DSTI) special funding, please contact the Massachusetts Executive Office of Health and Human Services (EOHHS).

^ 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).

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