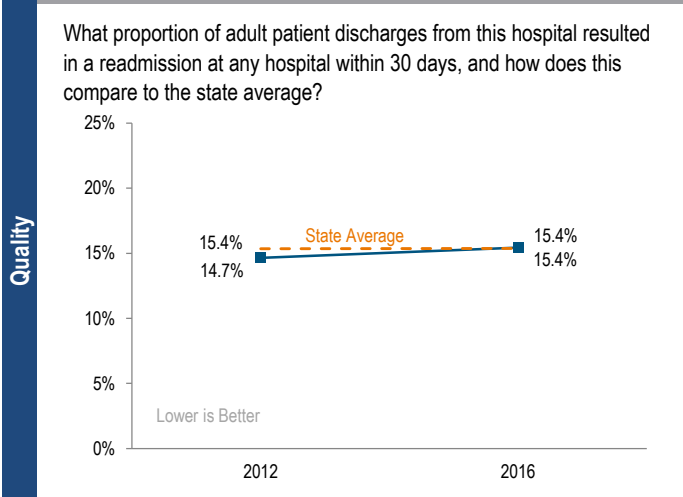
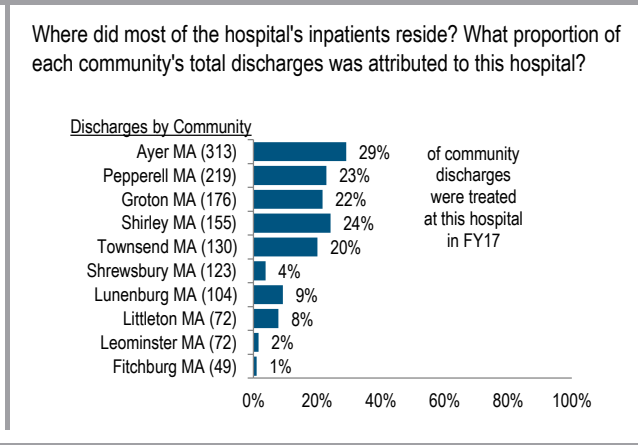
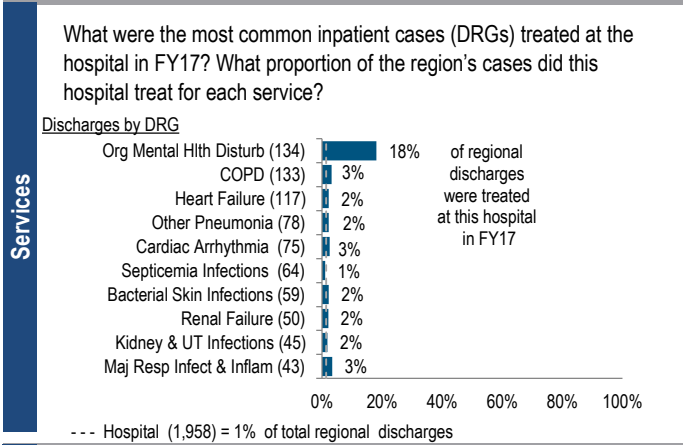


2017 Hospital Profile

Nashoba Valley Medical Center is a small, for-profit community-High Public Payer (HPP) hospital located in the Northeastern Massachusetts region. It is a member of Steward Health Care. Inpatient discharges at the hospital increased by 7.1% from FY13 to FY17, compared to a median increase of 1.1% among peer cohort hospitals. Outpatient visits increased by 20.6%, compared to the median increase of 2.3% for the peer cohort. The hospital reported a loss in FY17, after reporting a profit for four consecutive years.

At a Glance	Overview / Size		Payer Mix	
	Hospital System Affiliation:	Steward Health Care	Public Payer Mix:	65.9% (HPP* Hospital)
	Change in Ownership (FY13-17):	Not Applicable	CY16 Commercial Statewide Relative Price:	0.96
	Total Staffed Beds:	38, among the smaller acute hospitals	Top 3 Commercial Payers:	Blue Cross Blue Shield of Massachusetts Tufts Associated HMO, Inc. Harvard Pilgrim Health Care
	% Occupancy:	87.7%, > cohort avg. (66%)		
	Special Public Funding:	ICB°		
	Trauma Center Designation:	Not Applicable		
	Case Mix Index:	0.88, < cohort avg. (0.92); < statewide (1.12)		
	Financial		Utilization	
	Inpatient NPSR per CMAD:	\$11,185	Inpatient Discharges in FY17:	1,958
Change FY16-FY17:	6.4%	Change FY16-FY17:	2.2%	
Inpatient:Outpatient Revenue in FY17:	27%:73%	Emergency Department Visits in FY17:	14,755	
Outpatient Revenue in FY17:	\$32,831,354	Change FY16-FY17:	-4.6%	
Change FY16-FY17:	-3.7%	Outpatient Visits in FY17:	54,870	
Total Revenue in FY17:	\$54,724,470	Change FY16-FY17:	8.5%	
Total Surplus (Loss) in FY17:	(\$3,618,094)	Quality		
		Readmission Rate in FY16:	15.4%	
		Change FY12-FY16 (percentage points):	0.8	
		Early Elective Deliveries Rate:	Not Available	



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?

Data is not available for these measures.

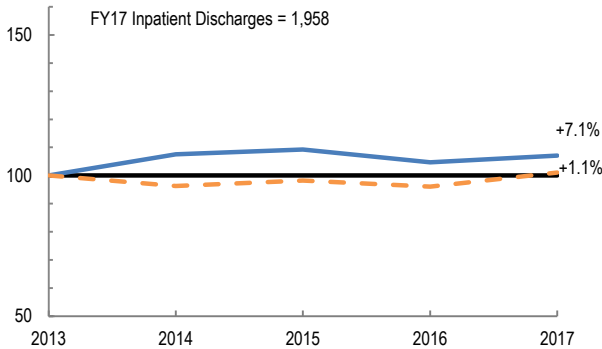
For descriptions of the metrics, please see the technical appendix.

Key:

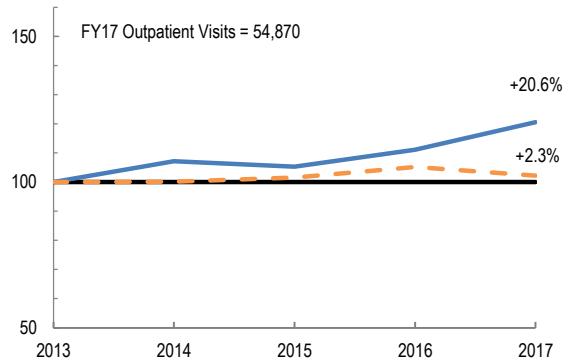
- Hospital
- Peer Cohort

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)

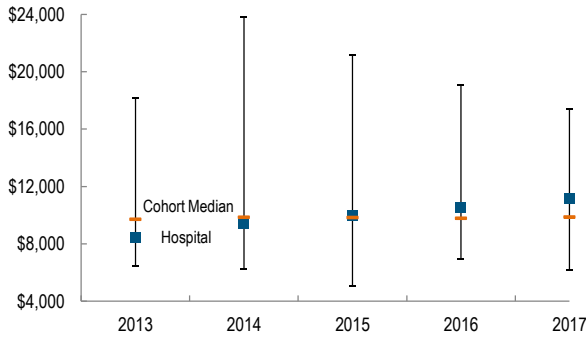


How has the volume of the hospital's outpatient visits changed compared to FY13, and how does this compare to the hospital's peer cohort median? (FY13=100)

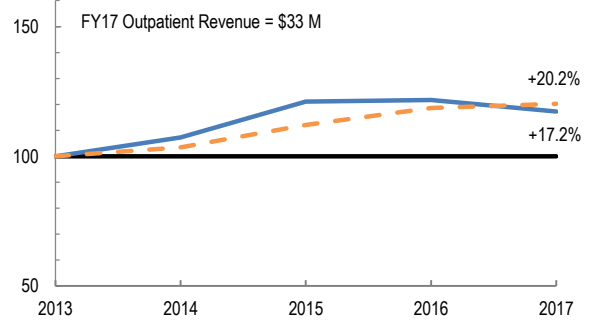


Patient Revenue Trends

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)



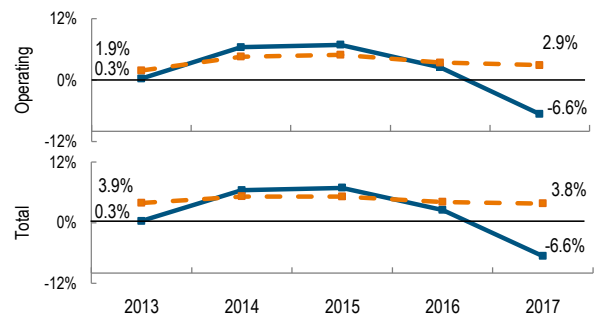
Financial Performance

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	\$ 39.9	\$ 49.3	\$ 51.9	\$ 53.2	\$ 54.7
Non-Operating Revenue	\$ 0.0	\$ 0.0	\$ 0.0	\$ (0.0)	\$ 0.0
Total Revenue	\$ 39.9	\$ 49.3	\$ 51.9	\$ 53.2	\$ 54.7
Total Costs	\$ 39.8	\$ 46.1	\$ 48.3	\$ 51.9	\$ 58.3
Total Profit (Loss)	\$ 0.1	\$ 3.2	\$ 3.6	\$ 1.3	\$ (3.6)

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