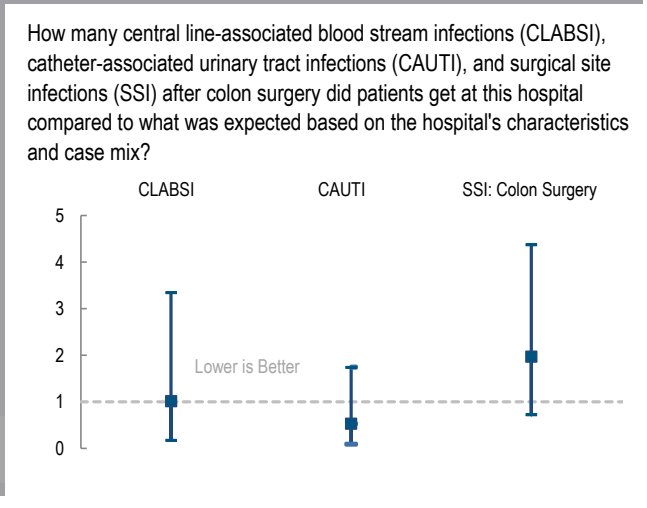
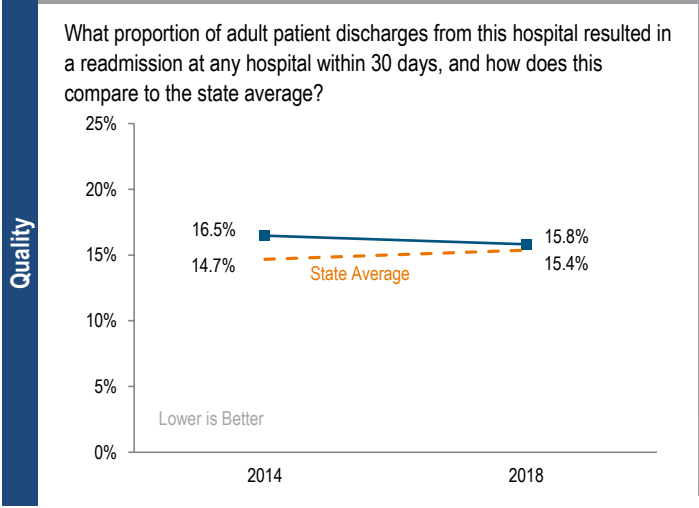
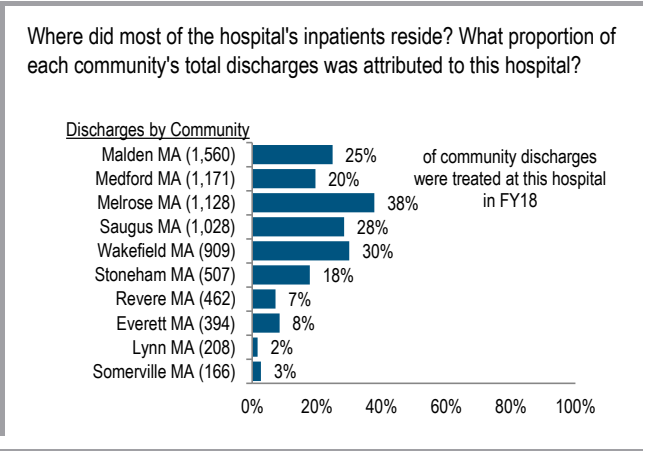
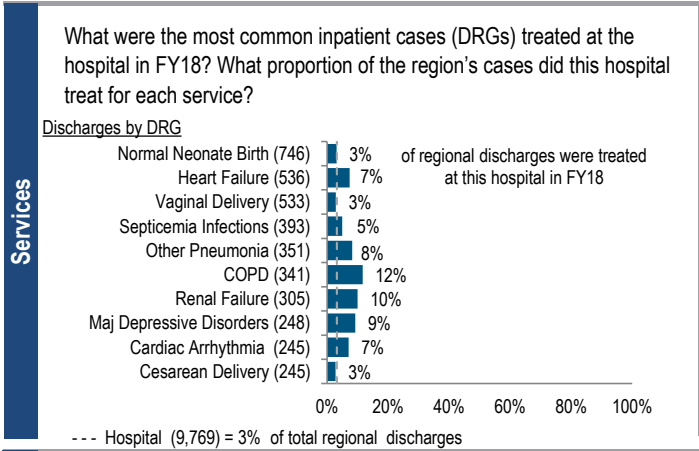


MelroseWakefield Hospital, which includes Lawrence Memorial Hospital and Melrose-Wakefield Hospital campuses, is a mid-size, non-profit community High Public Payer (HPP) hospital located in the Metro Boston region. Between FY14 and FY18, the volume of inpatient discharges at the hospital decreased by 17.2% compared to a median increase of 3.1% at cohort hospitals. Outpatient visits decreased 19.1% for the hospital between FY14 and FY18, compared to a median increase of 5.0% for its peer cohort. MelroseWakefield Healthcare reported a profit of \$20.1M in FY18 and a total margin of 7.9%.

At a Glance	Overview / Size	
	Hospital System Affiliation:	Wellforce
	Hospital System Surplus (Loss) in FY18:	\$38,459,000
	Change in Ownership (FY14-18):	Wellforce - 2017
	Total Staffed Beds:	162, mid-size acute hospital
	% Occupancy:	88.6%, > cohort avg. (67%)
	Special Public Funding:	CHART [^] , ICB [°]
	Trauma Center Designation:	Not Applicable
	Case Mix Index:	0.91, < cohort avg. (0.93); < statewide (1.14)
	Financial	
Inpatient NPSR per CMAD:	\$11,379	
Change FY17-FY18:	17.0%	
Inpatient:Outpatient Revenue in FY18:	30%:70%	
Outpatient Revenue in FY18:	\$126,893,905	
Change FY17-FY18:	-12.0%	
Total Revenue in FY18:	\$253,632,000	
Total Surplus (Loss) in FY18:	\$20,094,000	
Payer Mix		
Public Payer Mix:	63.2% HPP Hospital	
CY17 Commercial Statewide Relative Price:	0.92	
Top 3 Commercial Payers:	Blue Cross Blue Shield of Massachusetts Tufts Associated HMO, Inc. Harvard Pilgrim Health Care	
Utilization		
Inpatient Discharges in FY18:	9,769	
Change FY17-FY18:	-11.1%	
Emergency Department Visits in FY18:	44,279	
Change FY17-FY18:	-5.4%	
Outpatient Visits in FY18:	450,465	
Change FY17-FY18:	-11.6%	
Quality		
Readmission Rate in FY18:	15.8%	
Change FY14-FY18 (percentage points):	-0.7	
Early Elective Deliveries Rate:	0.0%	



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

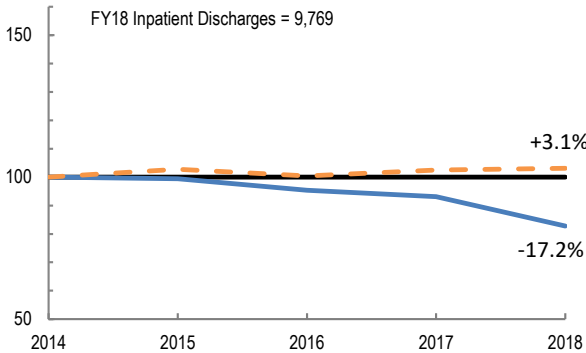
2018 HOSPITAL PROFILE: MELROSEWAKEFIELD HOSPITAL

Cohort: Community-High Public Payer Hospital

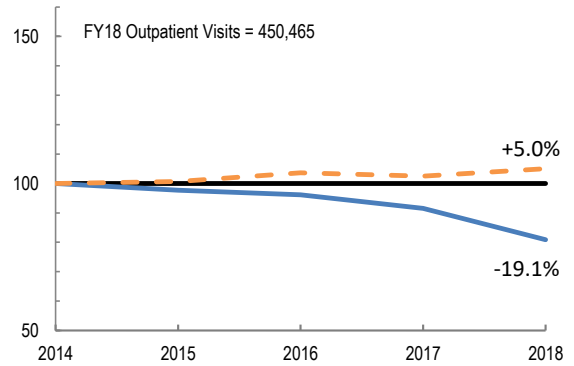


Utilization

How has the volume of the hospital's inpatient discharges changed compared to FY14, and how does this compare to the hospital's peer cohort median? (FY14=100)

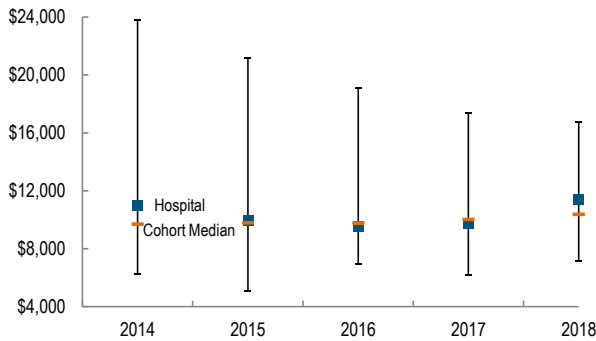


How has the volume of the hospital's outpatient visits changed compared to FY14, and how does this compare to the hospital's peer cohort median? (FY14=100)

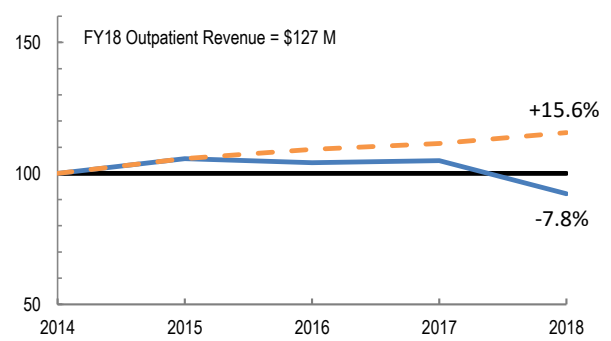


Patient Revenue Trends

What was the hospital's net inpatient service revenue per case mix adjusted discharge between FY14 and FY18, and how does this compare to the hospital's peer cohort median?



How has the hospital's total outpatient revenue changed compared to FY14, and how does this compare to the hospital's peer cohort median? (FY14=100)



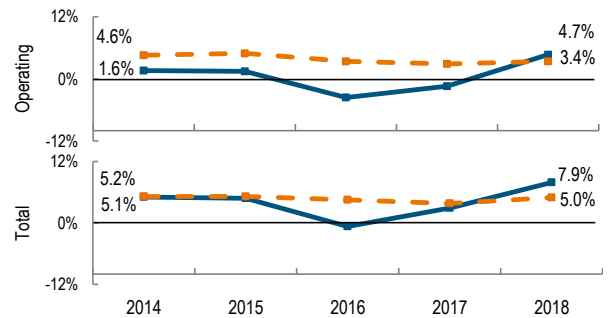
Financial Performance

How have the hospital's total revenue and costs changed between FY14 and FY18?

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

FY	2014	2015	2016	2017	2018
Operating Revenue	\$ 257.0	\$ 262.4	\$ 257.7	\$ 261.2	\$ 245.4
Non-Operating Revenue	\$ 9.2	\$ 9.0	\$ 7.7	\$ 11.6	\$ 8.2
Total Revenue	\$ 266.3	\$ 271.4	\$ 265.4	\$ 272.8	\$ 253.6
Total Costs	\$ 252.8	\$ 258.4	\$ 267.3	\$ 265.0	\$ 233.5
Total Profit (Loss)	\$ 13.5	\$ 13.0	\$ (1.9)	\$ 7.9	\$ 20.1

What were the hospital's total margin and operating margins between FY14 and FY18, 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).

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