

Acute Specialty Hospitals - Shriners Hospitals for Children

2018 Hospital Profile

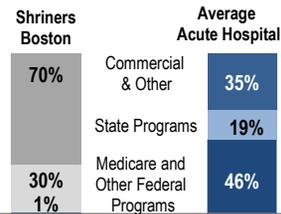
Shriners Hospital for Children is a health care system dedicated to pediatric specialty care, research and teaching programs for medical professionals. Children up to age 18 with orthopedic conditions, burns, spinal cord injuries and cleft lip and palate are eligible for care and receive all services regardless of the families' ability to pay. The hospital system was founded by Shriners International, a fraternity with nearly 200 chapters and thousands of clubs around the world. Shriners Hospitals for Children has 22 facilities in the United States, Canada, and Mexico.

Shriners Hospital for Children - Boston is a 30-bed pediatric specialty hospital, research, and teaching center located in Boston. It treats children with severe burn injuries, complex skin conditions, reconstructive and plastic surgery needs, and cleft lip and palate. It is the only exclusively pediatric, verified burn center in New England. The hospital reported 154 inpatient discharges in FY18, 29% less than in the prior year. Its most prominent cases in the region were partial thickness burns with or without skin graft and skin graft for skin and subcutaneous tissue diagnoses.

Shriners Hospital for Children - Springfield is a 40-bed pediatric specialty acute care hospital dedicated to providing inpatient and outpatient specialty care for orthopedic and developmental conditions including scoliosis, clubfoot, cerebral palsy, spina bifida, cleft lip and palate, rheumatology, and others. Following a strategic plan developed in 2015, the hospital has reinvested in its core service line of pediatric orthopedics and initiated new services including post-acute fracture care management, sports health and medicine, and urology. The hospital reported 142 inpatient discharges in FY18, a 6% increase from FY17.

Shriners Hospitals for Children - Boston
Boston, MA

At a Glance		Payer Mix	
TOTAL STAFFED BEDS:	30	What was the hospital's overall payer mix (gross charges) and how does this hospital compare to the average acute hospital's payer mix?	
% OCCUPANCY:	15.82%		
INPATIENT DISCHARGES in FY18:	154		
PUBLIC PAYER MIX:	30.3%		
CASE MIX INDEX:	3.71		
TAX STATUS:	Non-profit		
INPATIENT:OUTPATIENT REVENUE in FY18:	39%:61%		
INPATIENT COST PER CMAD:	\$32,680		
CHANGE in OWNERSHIP (FY14-FY18):	N/A		



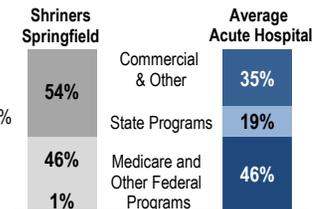
Percentage calculations may not sum to 100% due to rounding.

	FY15	FY16	FY17	FY18
Average Length of Stay	12.2	11.8	13.5	11.3
Inpatient Discharges	174	223	198	154
Outpatient Visits	4,492	6,608	6,383	6,157

Revenue, Cost, & Profit/Loss (in millions)					
FY	Total Revenue	Operating Revenue	Non-Operating Revenue	Costs	Total Profit/Loss
2015	\$5.1	\$3.7	\$1.3	\$39.2	
2016	\$5.2	\$5.2	\$0.0	\$41.5	See Note
2017	\$2.5	\$2.5	\$0.0	\$43.7	
2018	\$8.4	\$8.4	\$0.0	\$40.1	

Shriners Hospitals for Children - Springfield
Springfield, MA

At a Glance		Payer Mix	
TOTAL STAFFED BEDS:	40	What was the hospital's overall payer mix (gross charges) and how does this hospital compare to the average acute hospital's payer mix?	
% OCCUPANCY:	5.02%		
INPATIENT DISCHARGES in FY18:	142		
PUBLIC PAYER MIX:	46.5%		
CASE MIX INDEX:	2.11		
TAX STATUS:	Non-profit		
INPATIENT:OUTPATIENT REV. in FY18:	30%:70%		
INPATIENT COST PER CMAD:	\$41,018		
CHANGE in OWNERSHIP (FY14-FY18):	N/A		



Percentage calculations may not sum to 100% due to rounding.

	FY15	FY16	FY17	FY18
Average Length of Stay	5.7	4.5	4.4	5.2
Inpatient Discharges	86	91	134	142
Outpatient Visits	9,980	13,765	16,593	17,020

Revenue, Cost, & Profit/Loss (in millions)					
FY	Total Revenue	Operating Revenue	Non-Operating Revenue	Costs	Total Profit/Loss
2015	\$7.2	\$5.6	\$1.5	\$17.3	
2016	\$8.8	\$8.8	\$0.0	\$18.6	See Note
2017	\$13.5	\$13.5	\$0.0	\$22.8	
2018	\$12.2	\$12.2	\$0.0	\$24.1	

Note: Shriners Hospital Boston (SHB) and Shriners Hospital Springfield (SHS) are part of the national Shriners Hospitals for Children system (SHC) and are reliant upon support from the SHC endowment to cover the costs associated with fulfilling their mission to provide care to patients regardless of their ability to pay. This support is provided through transfers from the SHC's endowment to the hospitals, as these transfers are not considered revenue for the purpose of calculating profitability margin, SHB's and SHS's profitability margins are not comparable to other acute hospitals.