

Cape Cod Hospital is a non-profit community-High Public Payer (HPP) hospital located in the Cape and Islands region. It is among the larger acute hospitals in Massachusetts and is a member of Cape Cod Healthcare. Between FY16 and FY20, inpatient discharges at the hospital have remained constant, compared with a median decrease of 7.6% among cohort hospitals. In the same period, outpatient visits decreased by 23.6%, compared to a 15.2% median decrease amongst its cohort. Cape Cod Hospital reported a profit of \$27.6M in FY20 and a total margin of 4.7% compared to the median of 4.0% at its cohort hospitals.

At a Glance

Overview / Size

Hospital System Affiliation:	Cape Cod Healthcare
Hospital System Surplus (Deficit) in FY20:	\$4,691,467
Change in Ownership (FY16-20):	Not Applicable
Total Staffed Beds:	269, among the larger acute hospitals
% Occupancy:	68.3%, > cohort avg. (63%)
Trauma Center Designation:	Not Applicable
Case Mix Index:	1.21, > cohort avg. (1.00); > statewide (1.16)

Financial

Inpatient NPSR per CMAD:	\$13,981
Change FY19-FY20:	-4.4%
Inpatient Outpatient Revenue in FY20:	41%:59%
Outpatient Revenue in FY20:	\$253,515,183
Change FY19-FY20:	-11.7%
Total Revenue in FY20:	\$582,600,734
COVID Funding Included in Total Revenue:	\$30,285,139
Total Surplus (Deficit) in FY20:	\$27,561,438

Payer Mix

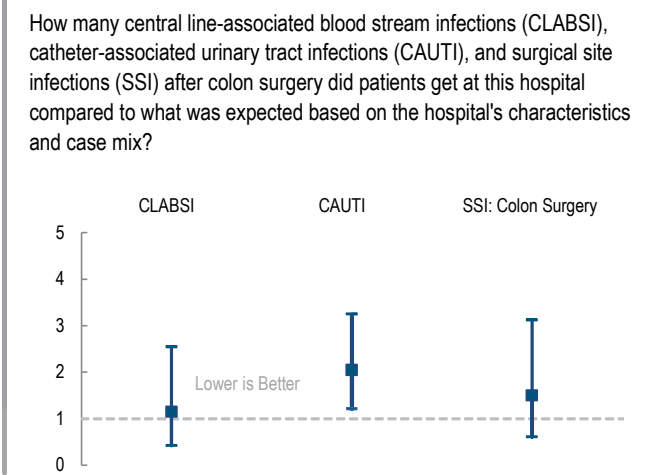
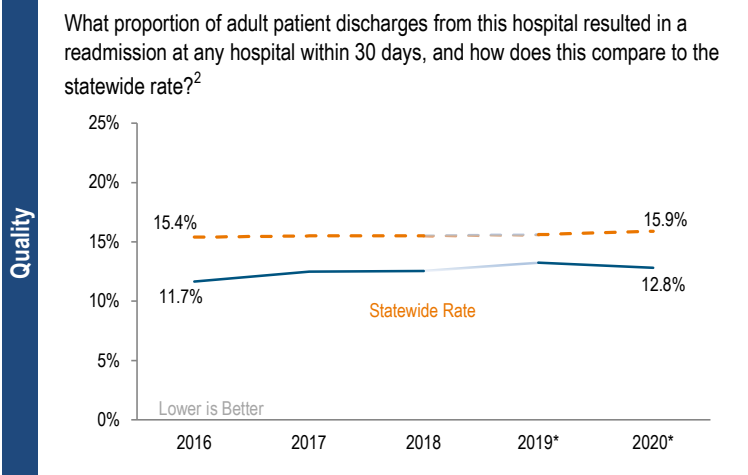
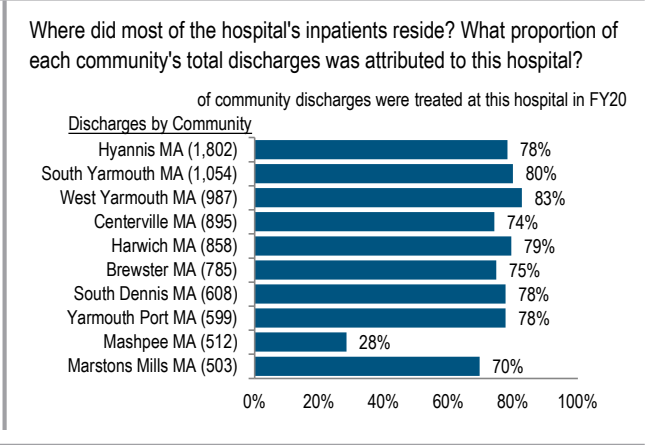
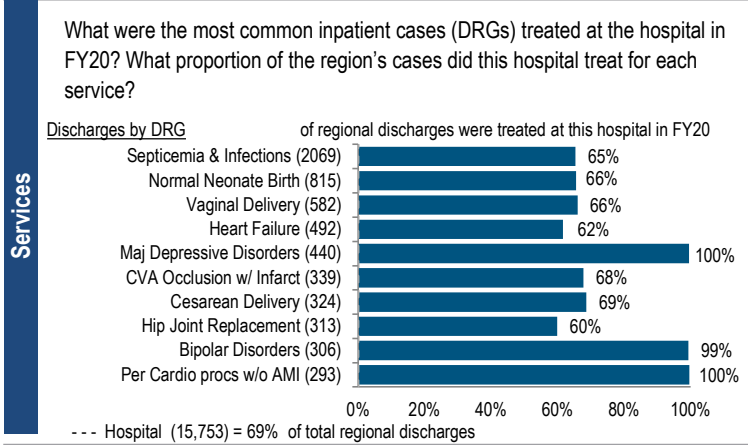
Public Payer Mix ¹ :	74.9% HPP Hospital
CY19 Commercial Statewide Relative Price:	1.339
Top 3 Commercial Payers:	Blue Cross Blue Shield Tufts HMO Harvard Pilgrim

Utilization

Inpatient Discharges in FY20:	15,753
Change FY19-FY20:	-8.2%
Emergency Department Visits in FY20:	65,198
Change FY19-FY20:	-16.7%
Outpatient Visits in FY20:	117,524
Change FY19-FY20:	-23.3%

Quality

Readmission Rate in FY20:	12.8%
Change FY19-FY20 (percentage points):	-0.4
Early Elective Deliveries Rate:	0.0%



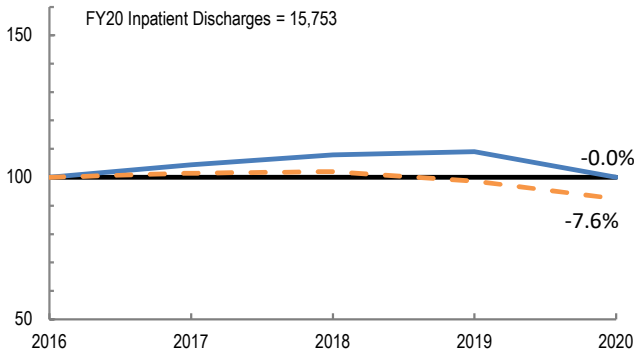
2020 HOSPITAL PROFILE: CAPE COD HOSPITAL

Cohort: Community-High Public Payer Hospital

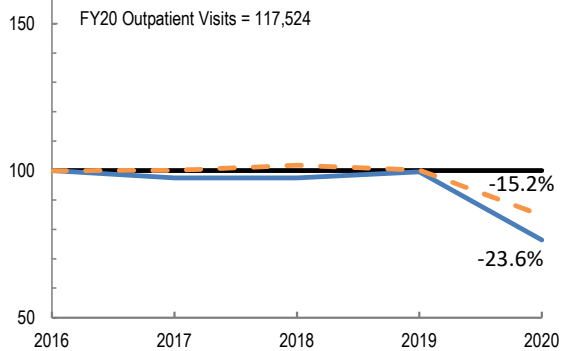


Utilization

How has the volume of the hospital's inpatient discharges changed compared to FY16, and how does this compare to the hospital's peer cohort median? (FY16=100)

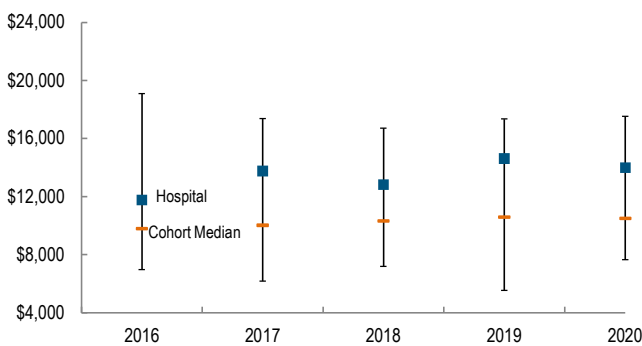


How has the volume of the hospital's outpatient visits changed compared to FY16, and how does this compare to the hospital's peer cohort median? (FY16=100)

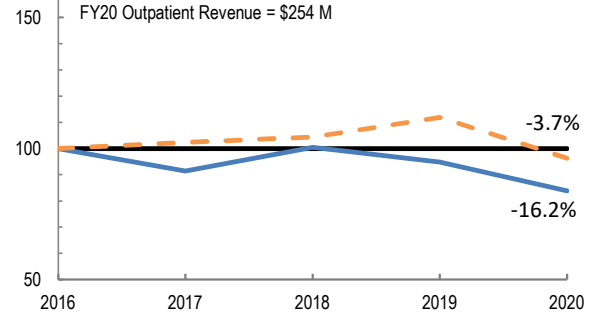


Patient Revenue Trends

What was the hospital's net inpatient service revenue³ per case mix adjusted discharge between FY16 and FY20, and how does this compare to the hospital's peer cohort median?



How has the hospital's net outpatient revenue³ changed compared to FY16, and how does this compare to the hospital's peer cohort median? (FY16=100)



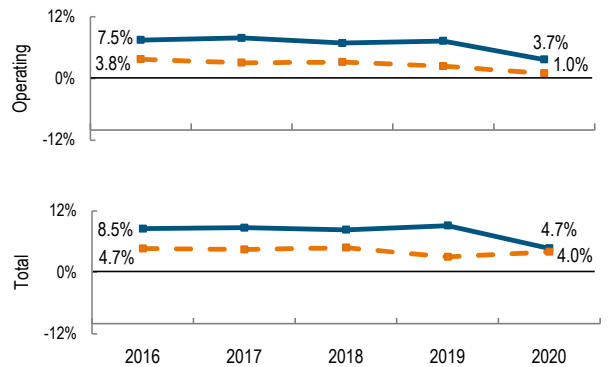
Financial Performance

How have the hospital's total revenue and costs changed between FY16 and FY20? (COVID funding affects FY20 only)

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

FY	2016	2017	2018	2019	2020
Operating Revenue	\$ 513.5	\$ 541.8	\$ 570.8	\$ 604.6	\$ 576.6
COVID Funding Included in Operating Revenue					\$ 30.3
Non-Operating Revenue⁴	\$ 5.2	\$ 4.3	\$ 8.4	\$ 10.9	\$ 6.0
Total Revenue	\$ 518.7	\$ 546.1	\$ 579.2	\$ 615.5	\$ 582.6
Total Costs	\$ 474.5	\$ 498.7	\$ 531.1	\$ 559.6	\$ 555.0
Total Profit (Loss)	\$ 44.2	\$ 47.4	\$ 48.1	\$ 55.9	\$ 27.6

What were the hospital's total margin and operating margins between FY16 and FY20, and how do these compare to the hospital's peer cohort medians? (Note: FY20 margins include COVID funding)



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

¹ High Public Payer Hospitals (HPP) reported a minimum of 63% of gross patient service revenue from public payers.

² For 2019 and 2020 readmission rates, a new methodology was used. These rates may not be comparable to earlier years. For more information, please see: <https://www.chiamass.gov/assets/docs/r/pubs/2022/Readmissions-Technical-Appendix-2011-2020.pdf>

³ Effective FY 2020 supplemental revenue is not included in net patient service revenue for all hospitals. Prior to FY 2020, reporting of supplemental revenue varied by hospital.

⁴ There was an accounting change adopted by most hospitals beginning in FY 2020 in which unrealized gains and losses on investments are now recognized as non-operating income