

ARBOUR-FULLER MEMORIAL

Arbour-Fuller Memorial is a for-profit psychiatric hospital located in South Attleboro. It has 103 staffed beds, making up 11% of all staffed hospital beds among psychiatric hospitals. All 103 of its beds are psychiatric beds. It is a member of the Arbour Health System.

SERVICES Arbour-Fuller Memorial provides inpatient services for adult and adolescent patients, and partial hospitalization services for adult patients. In FY12, the average length of stay at Arbour-Fuller Memorial was ten days.

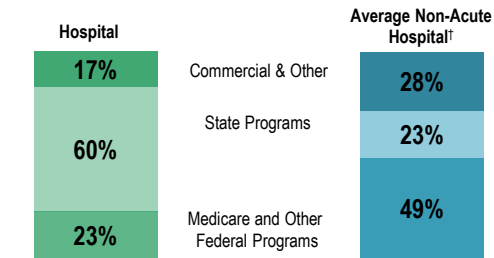
FINANCIAL PERFORMANCE Arbour-Fuller Memorial's total revenue in FY12 was \$23 million. Its FY12 public payer mix was 83%, the highest among psychiatric hospitals along with Arbour-HRI Hospital. Its FY12 inpatient cost[†] per day was \$494, approximately 23% lower than the average psychiatric hospital. It earned a surplus each year from FY09 to FY12, with its lowest total surplus of \$3.4 million (14.9% total margin) in FY12.

AT A GLANCE

- TOTAL BEDS:** 103, 11% of cohort beds
- % OCCUPANCY:** 80%, < cohort avg. (83%)
- PUBLIC PAYER MIX:** 83%, highest in cohort (avg. 67%)
- TOTAL REVENUE in FY12:** \$23 million, 1.8% of statewide
- TAX STATUS:** For profit
- INPATIENT:OUTPATIENT REVENUE in FY12:** 82%:18%
- TOTAL MARGIN in FY12:** 14.9% (\$3.4 million)

PAYER MIX

What was the hospital's overall payer mix (gross charges) in FY12, and how does this hospital compare to the average non-acute hospital's payer mix?

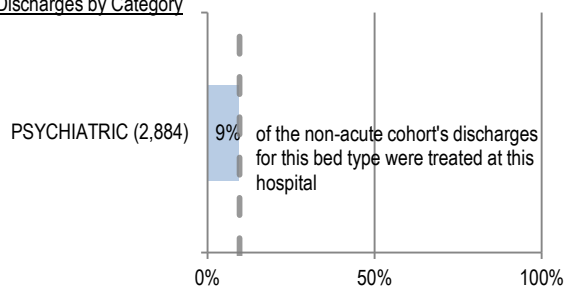


Percentage calculations may not sum to 100% due to rounding

SERVICES

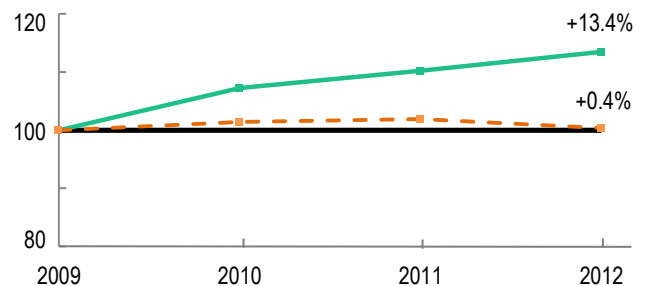
What type(s) of inpatient services, categorized by bed type, did the hospital provide in FY12? What proportion of its peer cohort's inpatient cases did this hospital treat?

Discharges by Category



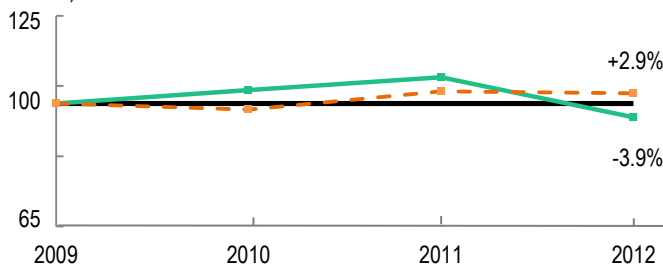
Hospital = 9% of the total cohort discharges

How has the hospital's average length of stay changed compared to FY09, and how does this hospital compare to the average hospital in its peer cohort? (FY09=100)



UTILIZATION TRENDS

How has the volume of the hospital's inpatient days changed compared to FY09, and how does this hospital compare to the average hospital in its peer cohort? (FY09=100)



How has the volume of the hospital's outpatient visits changed compared to FY09? (FY09=100)

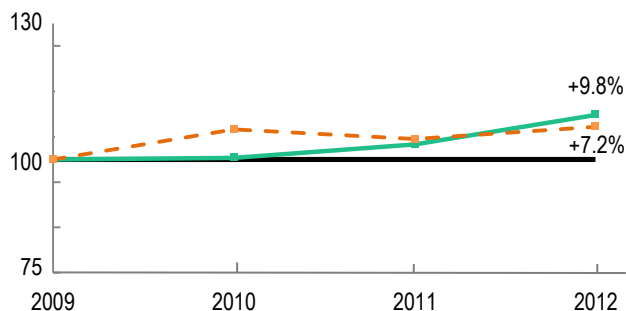
Hospital information not displayed due to data concerns



COST TRENDS

How has the hospital's inpatient cost[‡] per day changed compared to FY09, and how does this hospital compare to the average hospital in its peer cohort? (FY09=100)

How have the hospital's total outpatient costs changed compared to FY09? (FY09=100)



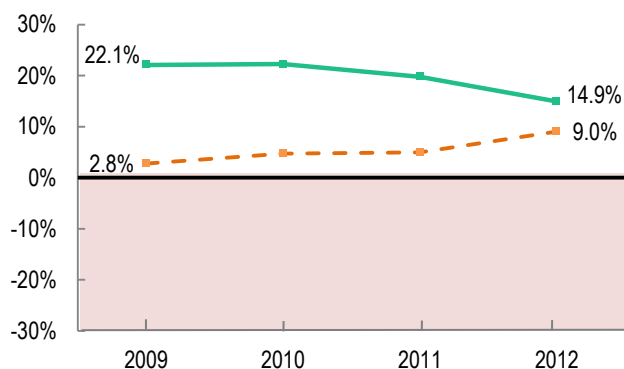
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FINANCIAL PERFORMANCE

How have the hospital's total revenue and costs changed between FY09 and FY12?

What was the hospital's total margin between FY09 and FY12, and how does this compare to the median of its peer cohort hospitals?

Revenue, Cost & Profit/Loss (in millions)					
FY	Total Revenue	% Change	Total Cost	% Change	Total Profit/Loss
2009	\$22		\$17		\$4.9
2010	\$24	7.2%	\$18	7.0%	\$5.3
2011	\$25	6.8%	\$20	10.1%	\$5.0
2012	\$23	(10.6%)	\$19	(5.2%)	\$3.4



For descriptions of the metrics, please see Technical Appendix.

Non-acute hospitals in Massachusetts are typically identified as psychiatric, rehabilitation, and chronic care facilities. CHIA has defined non-acute hospitals in this publication using the Massachusetts Department of Public Health (DPH) and Department of Mental Health (DMH) license criteria.

Psychiatric hospitals are licensed by DMH for psychiatric services, and by DPH for substance abuse services.

Rehabilitation hospitals provide intensive post-acute rehabilitation services, such as physical, occupational, and speech therapy services. For Medicare payment purposes, the federal government classifies hospitals as rehabilitation hospitals if they provide more than 60% of their inpatient services to patients with one or more of 13 diagnoses listed in federal regulations.

Chronic hospitals are hospitals with an average length of patient stay greater than 25 days. These hospitals typically provide longer-term care, such as ventilator dependent care. Medicare classifies chronic hospitals as Long-Term Care Hospitals, using the same 25-day threshold.

[‡] Costs were adjusted to exclude direct medical education costs and physician compensation.

[†] Average Non-Acute Hospital does not include Specialty hospitals.

For more information, please contact:

CENTER FOR HEALTH INFORMATION AND ANALYSIS
Two Boylston Street, 5th Floor
Boston, MA 02116

617.988.3100

www.mass.gov/chia/hospitals

