# HEALTH SAFETY NET RATES FOR ACUTE HOSPITALS - FY2017

Effective October 1, 2016

| Payment Org ID | Hospital Name | Outpatient Primary | Outpatient ER Bad Debt | Payment on Account Factor or Cost to Charge Ratio[1] | Inpatient Primary or PAF[2] | Inpatient ER Bad Debt or PAF[2] | Inpatient Transfer | Inpatient Rehabilitation |
|---|---|---|---|---|---|---|---|---|
| | | Per Visit | Per Visit | Percentage | | | Per Day | Per Day |
| 1 | Anna Jaques Hospital | $ 468.63 | $ 360.07 | 0.38 | | | | |
| 2 | Athol Memorial Hospital | $ 526.44 | $ 407.62 | 27.35% | 87.5% | 87.5% | | |
| 5 | Baystate Franklin Medical Center | $ 337.75 | $ 287.98 | 0.27 | | | | |
| 6 | Baystate Mary Lane Hospital | $ 376.72 | $ 273.04 | 0.32 | | | | |
| 4 | Baystate Medical Center | $ 441.73 | $ 694.41 | 0.37 | | | | $1,611.69 |
| 106 | Baystate Noble Hospital | $ 398.44 | $ 378.63 | 0.29 | | | | |
| 139 | Baystate Wing Hospital | $ 342.46 | $ 433.87 | 0.32 | | | | |
| 6309 | Berkshire Medical Center | $ 451.34 | $ 566.01 | 0.36 | | | | $1,542.81 |
| 98 | Beth Israel Deaconess Hospital - Milton | $ 468.83 | $ 375.06 | 0.28 | | | | |
| 53 | Beth Israel Deaconess Hospital - Needham | $ 459.45 | $ 367.56 | 0.32 | | | | |
| 79 | Beth Israel Deaconess Hospital - Plymouth | $ 506.88 | $ 405.51 | 0.27 | | | | |
| 8702 | Beth Israel Deaconess Medical Center | $ 387.37 | $ 485.36 | 0.34 | | | | |
| 46 | Boston Children's Hospital | $ 1,090.89 | $ 546.22 | 52.58% | $ 19,892.68 | 60.25% | $ 5,683.62 | |
| 3107 | Boston Medical Center | $ 354.10 | $ 600.77 | 0.37 | | | | |
| 59 | Brigham and Women's Faulkner Hospital | $ 518.21 | $ 675.85 | 0.22 | | | | |
| 22 | Brigham and Women's Hospital | $ 295.87 | $ 654.05 | 0.20 | | | | |
| 3108 | Cambridge Health Alliance | $ 292.98 | $ 633.13 | 0.37 | | | | |
| 39 | Cape Cod Hospital | $ 386.96 | $ 453.66 | 0.26 | $ 8,582.86 | | $ 2,033.85 | |
| 132 | Clinton Hospital | $ 523.37 | $ 375.70 | 0.17 | | | | |
| 50 | Cooley Dickinson Hospital | $ 403.02 | $ 322.41 | 0.32 | | | | |
| 51 | Dana-Farber Cancer Institute | $ 1,352.05 | $ - | 28.24% | 36.72% | 36.72% | | |
| 57 | Emerson Hospital | $ 351.58 | $ 281.27 | 0.26 | | | | |
| 8 | Fairview Hospital | $ 307.23 | $ 687.60 | 42.76% | 105.45% | 105.45% | | |
| 40 | Falmouth Hospital | $ 441.45 | $ 399.05 | 0.24 | | | | |
| 3111 | Hallmark Health | $ 390.26 | $ 360.13 | 0.27 | | | | |
| 68 | Harrington Memorial Hospital | $ 370.76 | $ 325.18 | 0.33 | | | | |
| 71 | Health Alliance Hospital | $ 287.43 | $ 490.31 | 0.26 | | | | |
| 73 | Heywood Hospital | $ 367.12 | $ 456.02 | 0.34 | | | | |
| 77 | Holyoke Medical Center | $ 328.15 | $ 389.67 | 0.35 | | | | |
| 6546 | Lahey Hospital and Medical Center | $ 565.19 | $ 642.07 | 0.34 | | | | |
| 83 | Lawrence General Hospital | $ 260.81 | $ 459.76 | 0.30 | | | | |
| 85 | Lowell General Hospital | $ 349.87 | $ 466.25 | 0.28 | | | | |
| 133 | Marlborough Hospital | $ 476.62 | $ 453.86 | 0.20 | | | | |
| 88 | Martha's Vineyard Hospital | $ 749.48 | $ 599.58 | 41.79% | 83.34% | 83.34% | | |
| 89 | Massachusetts Eye and Ear Infirmary | $ 552.97 | $ 552.97 | 0.47 | | | | |
| 91 | Massachusetts General Hospital | $ 357.23 | $ 913.39 | 0.21 | | | | |
| 6547 | Mercy Medical Center | $ 646.78 | $ 427.12 | 0.45 | | | | $1,326.95 |
| 3110 | MetroWest Medical Center | $ 347.27 | $ 476.91 | 0.29 | | | | |
| 97 | Milford Regional Medical Center | $ 316.18 | $ 398.44 | 0.29 | | | | |
| 100 | Mount Auburn Hospital | $ 210.52 | $ 446.24 | 0.29 | | | | |
| 101 | Nantucket Cottage Hospital | $ 323.43 | $ 258.75 | 0.23 | | | | |
| 103 | New England Baptist Hospital | $ - | $ - | 0.31 | | | | |
| 105 | Newton-Wellesley Hospital | $ 541.70 | $ 685.72 | 0.20 | | | | |
| 345 | North Shore Medical Center | $ 266.62 | $ 491.79 | 0.20 | | | | |
| 3112 | Northeast Hospital | $ 299.95 | $ 424.37 | 0.31 | | | | |
| 127 | Saint Vincent Hospital | $ 579.81 | $ 382.62 | 0.34 | | | | |
| 25 | Signature Healthcare Brockton Hospital | $ 316.87 | $ 607.89 | 0.26 | | | | |
| 122 | South Shore Hospital | $ 685.55 | $ 558.92 | 0.31 | | | | |
| 3113 | Southcoast Hospitals Group | $ 344.33 | $ 388.41 | 0.32 | | | | $1,542.52 |
| 42 | Steward Carney Hospital | $ 436.96 | $ 570.42 | 0.43 | | | | |
| 8701 | Steward Good Samaritan Medical Center | $ 404.67 | $ 425.95 | 0.38 | | | | |
| 75 | Steward Holy Family Hospital | $ 484.21 | $ 428.81 | 0.34 | | | | |
| 99 | Steward Morton Hospital | $ 551.55 | $ 386.86 | 0.37 | | | | |
| 11467 | Steward Nashoba Valley Medical Center | $ - | $ 442.18 | 0.25 | | | | |
| 41 | Steward Norwood Hospital | $ 729.06 | $ 493.54 | 0.30 | | | | |
| 114 | Steward Saint Anne's Hospital | $ 440.49 | $ 394.92 | 0.31 | | | | |
| 126 | Steward St. Elizabeth's Medical Center | $ 374.74 | $ 470.31 | 0.39 | | | | |
| 129 | Sturdy Memorial Hospital | $ 490.72 | $ 543.93 | 0.39 | | | | |
| 104 | Tufts Medical Center | $ 601.56 | $ 657.22 | 0.28 | | | | |
| 3115 | UMass Memorial Medical Center | $ 465.15 | $ 689.00 | 0.25 | | | | |
| 138 | Winchester Hospital | $ 403.73 | $ 305.22 | 0.32 | | | | |

**Notes:**

1 Payment on Account factor is used for secondary claims and for primary claims < $20.
The Cost-to-Charge ratio is used for Critical Access Hospitals and PPS-exempt hospitals.

2 Only rates for PPS-exempt, Critical Access Hospitals , and Sole Community Hospitals are listed. All other hospitals are paid using Medicare DRG or psychiatric per diem rates that will vary by claim.
Hospitals with less than 20 discharges will be paid using a Payment on Account Factor; otherwise a hospital will be paid a per discharge rate as indicated.

Dental services are paid according to the fees established in 114.3 CMR 14.00: Dental Services.