**C. Additional Supporting Materials**

**Estimated operating costs for med/surg beds should be measured against national and Massachusetts average**



|  |  |  |
| --- | --- | --- |
| **Metric** | **National average** | **Massachusetts average** |
| # of inpatient admissions | ~33.4M | ~809K |
| Average length of stay | ~5.5 | ~4.9 |
| $ per inpatient day | ~$2,873 | ~$3,462 |
| # of staffed inpatient beds | ~921K | ~15,000 |
| **Estimated annual cost per inpatient bed** | **~$500-600K** | **~$900-950K** |

* National estimated operating cost for a med/surg bed is

~$600K annually

* In Massachusetts, estimated operation costs for a med/surg bed is ~$900K annually

Source: American Hospital Association, Kaiser Family Foundation 2020. fully loaded costs, Average length of stay in community hospitals , Massachusetts government, Massachusetts Adult Core Hospital Inpatient Doto, 2018- 2021 CMS LOS data (Medicare FFS)

[**Fast Facts on U.S.**](https://www.aha.org/system/files/media/file/2020/01/2020-aha-hospital-fast-facts-new-Jan-2020.pdf)[**Hospitals, 2022**](https://www.aha.org/system/files/media/file/2020/01/2020-aha-hospital-fast-facts-new-Jan-2020.pdf)

The American Hospital Association conducts an annual survey of hospitals in the United States. The data below, from the 2020 AHA Annual Survey, are a sample of what you will find in *AHA Hospital Statistics*, 2022 edition. The definitive source for aggregate hospital data and trend analysis, *AHA Hospital Statistic*s includes current and historical data on utilization, personnel, indicators, and much more. The AHA has also created [Fast Facts Infographics](https://www.aha.org/infographics/2020-07-24-fast-facts-infographics) to provide visualizations for this data.

*AHA Hospital Statistics* is published annually by Health Forum, an affiliate of the American Hospital Association. To order print copies of AHA Hospital Statistics, call (800) AHA-2626 or visit the [AHA online](https://ams.aha.org/EWEB/DynamicPage.aspx?WebCode=ProdDetailAdd&ivd_prc_prd_key=b30d0997-7eb6-47c6-9e6f-71cd528f31ad) [store.](https://ams.aha.org/EWEB/DynamicPage.aspx?WebCode=ProdDetailAdd&ivd_prc_prd_key=b30d0997-7eb6-47c6-9e6f-71cd528f31ad) An [interactive online version](https://guide.prod.iam.aha.org/stats/) is also available.

Note that the ICU bed data is not published in *AHA Hospital Statistics.* For further information, contact the AHA Resource Center at rc@aha.org.

[Archived 2021 PDF](https://www.aha.org/system/files/media/file/2021/01/Fast-Facts-2021-table-FY19-data-14jan21.pdf)

|  |  |
| --- | --- |
| **Total Number of All U.S. Hospitals** | 6,093 |
| Number of U.S. [Community1](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote1) Hospitals | 5,139 |
| Number of Nongovernment Not-for-Profit Community Hospitals | 2,960 |
| Number of Investor-Owned (For-Profit) Community Hospitals | 1,228 |
| Number of State and Local Government Community Hospitals | 951 |
| Number of Federal Government Hospitals | 207 |
| Number of Nonfederal Psychiatric Hospitals | 635 |
| [Other 2](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote2) Hospitals | 112 |

|  |  |
| --- | --- |
| **Total Staffed Beds in All U.S. Hospitals** | 920,531 |
| Staffed Beds in Community1 Hospitals | 789,354 |
| [Intensive Care Beds 3](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote3) in Community Hospitals |  |
| [Medical-Surgical Intensive Care 4](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote4) Beds in Community Hospitals | 59,281 |
| [Cardiac Intensive Care 5](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote5) Beds in Community Hospitals | 15,778 |
| [Neonatal Intensive Care 6](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote6) Beds in Community Hospitals | 23,096 |
| [Pediatric Intensive Care 7](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote7) Beds in Community Hospitals | 5,037 |
| [Burn Care 8](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote8) Beds in Community Hospitals | 1,280 |
| [Other Intensive Care 9](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote9) Beds in Community Hospitals | 7,887 |
| **Total Admissions in All U.S. Hospitals** | 33,356,853 |
| Admissions in Community1 Hospitals | 31,393,318 |
| **Total Expenses for All U.S. Hospitals** | $1,213,881,001,000 |
| Expenses for Community1 Hospitals | $1,102,282,383,000 |
| **Number of Rural Community Hospitals** | 1,796 |
| **Number of Urban Community Hospitals** | 3,343 |
| **Number of Community Hospitals in a** [**System 10**](https://www.aha.org/statistics/fast-facts-us-hospitals#footnote10) | 3,483 |

1. **Community hospitals** are defined as all nonfederal, short-term general, and other special hospitals. Other special hospitals include obstetrics and gynecology; eye, ear, nose, and throat; long term acute-care; rehabilitation; orthopedic; and other individually described specialty services. Community hospitals include academic medical centers or other teaching hospitals if they are nonfederal short-term hospitals. Excluded are hospitals not accessible by the general public, such as prison hospitals or college infirmaries.
2. **Other hospitals** include nonfederal long term care hospitals and hospital units within an institution such as a prison hospital or school infirmary. Long term care hospitals may be defined by different methods; here they include other hospitals with an average length of stay of 30 or more days.
3. **Intensive care bed counts** are reported on the AHA Annual Survey by approximately 80% of hospitals. Therefore, the medical/surgical, cardiac and other intensive care bed counts have been supplemented with FY2020 data reported in the CMS Healthcare Cost Report Information System (HCRIS). Total intensive care beds are not summed because the care provided is specialized.
4. **Medical-surgical intensive care.** Provides patient care of a more intensive nature than the usual medical and surgical care, on the basis of physicians’ orders and approved nursing care plans. These units are staffed with specially trained nursing personnel and contain monitoring and specialized support equipment for patients who because of shock, trauma or other life-threatening conditions require intensified comprehensive observation and care. Includes mixed intensive care units.
5. **Cardiac intensive care.** Provides patient care of a more specialized nature than the usual medical and surgical care, on the basis of physicians’ orders and approved nursing care plans. The unit is staffed with specially trained nursing personnel and contains monitoring and specialized support or treatment equipment for patients who, because of heart seizure, open-heart surgery, or other life-threatening conditions, require intensified, comprehensive observation and care. May include myocardial infarction, pulmonary care, and heart transplant units.
6. **Neonatal intensive care.** A unit that must be separate from the newborn nursery providing intensive care to all sick infants including those with the very lowest birth weights (less than 1500 grams). NICU has potential for providing mechanical ventilation, neonatal surgery, and special care for the sickest infants born in the hospital or transferred from another institution. A full-time neonatologist serves as director of the NICU.
7. **Pediatric intensive care.** Provides care to pediatric patients that is of a more intensive nature than that usually provided to pediatric patients. The unit is staffed with specially trained personnel and contains monitoring and specialized support equipment for treatment of patients who, because of shock, trauma, or other life-threatening conditions, require intensified, comprehensive observation and care.
8. **Burn care.** Provides care to severely burned patients. Severely burned patients are those with any of the following: (1) second-degree burns of more than 25% total body surface area for adults or20% total body surface area for children: (2) third-degree burns of more than 10% total body surface area; (3) any severe burns of the hands, face, eyes, ears, or feet; or (4) all inhalation injuries, electrical burns, complicated burn injuries involving fractures and other major traumas, and all other poor risk factors.
9. **Other intensive care.** A specially staffed, specialty equipped, separate section of a hospital dedicated to the observation, care, and treatment of patients with life-threatening illnesses, injuries, or complications from which recovery is possible. It provides special expertise and facilities for the support of vital function and utilizes the skill of medical nursing and other staff experienced in the management of these problems.
10. **System** is defined by AHA as either a multihospital or a diversified single hospital system. A multihospital system is two or more hospitals owned, leased, sponsored, or contract managed by a central organization. Single, freestanding hospitals may be categorized as a system by bringing into membership three or more, and at least 25 percent, of their owned or leased non-hospital pre-acute or post-acute health care organizations.

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*Updated January 2022*

# Total Hospital Availability in Massachusetts

## Last Updated: April 9, 2020, 12:00pm

**15,000**

4,000

**11,000**

9,500

**3,500**

1,000

1,300

1,200

**8,100**

7,300

800

Alternate Medical Site (Target)

Non ICU ICU

**6,400**

4,500

#### All beds in the state1

#### Beds Unsuitable for COVID2

1,500

#### Baseline Licensed Beds

#### Surge Beds Goals3

#### Occupied (COVID

and other)4

1,900

#### Available for any new patients4

1. Total beds as of 2/25/2020. 2. Includes chronic dialysis beds, continuing care nursery beds, maternal service beds, psychiatric beds, rehabilitation beds, special care nursery beds, substance abuse beds, and infant bassinets. If these are converted to med surge acute or ICU beds they will be included in “Surge Beds” category. 3. Non-ICU and ICU beds are in-hospital beds that hospitals can convert to care for COVID patients. Alternate medical site beds are essential to ensure hospitals can dedicate capacity for patients in the most acute conditions. 4. As reported to DPH by hospitals.

# Total Bed Occupancy by Region

## Last Updated: April 9, 2020, 12:00pm

##### 14,500

##### 4,900

12%

25%

7%

Available alternate Medical Site beds Available non-ICU Beds (including Surge) Available ICU Beds (including Surge) Occupied Alternate Medical Site beds Occupied non-ICU Beds

Occupied ICU Beds

##### 2,100

43%

16%

27%

10%

50%

**2,200**

###### 5%

12%

29%

63%

12%

18%

##### 1,800

###### 6%

30%

8%

48%

##### 1,600

###### 12%

55%

26%

##### 1,900

6%

18%

14%

54%

4% 7% 5% 8% 7% 9%

49%

6%

**Total beds in Massachusetts suitable for COVID**

**Boston**

**Metro West**

**Southeast**

**Northeast**

**West**

**Central**

**Occupancy/ availability as reported by hospitals to DPH.** *Regions represent EOHHS Regions.*

Hospital Adjusted Expenses per Inpatient Day

[](http://www.facebook.com/sharer.php?u=https%3A%2F%2Fwww.kff.org%2Fbd8e921%2F)

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*Search State Health Facts Data*



Timeframe: 2020

[ TABLE](https://www.kff.org/health-costs/state-indicator/expenses-per-inpatient-day/?currentTimeframe=0&sortModel=%7B%22colId%22%3A%22Location%22%2C%22sort%22%3A%22asc%22%7D)

|  |  |
| --- | --- |
| Location Unit ed St at es | Expenses per Inpatient Day $2, 873 |
| Massachusetts | $3,462 |

[NOTES](https://www.kff.org/health-costs/state-indicator/expenses-per-inpatient-day/?currentTimeframe=0&selectedDistributions=expenses-per-inpatient-day&selectedRows=%7B%22wrapups%22%3A%7B%22united-states%22%3A%7B%7D%7D%2C%22states%22%3A%7B%22massachusetts%22%3A%7B%7D%7D%7D&sortModel=%7B%22colId%22%3A%22Location%22%2C%22sort%22%3A%22asc%22%7D) [](https://www.kff.org/health-costs/state-indicator/expenses-per-inpatient-day/?currentTimeframe=0&selectedDistributions=expenses-per-inpatient-day&selectedRows=%7B%22wrapups%22%3A%7B%22united-states%22%3A%7B%7D%7D%2C%22states%22%3A%7B%22massachusetts%22%3A%7B%7D%7D%7D&sortModel=%7B%22colId%22%3A%22Location%22%2C%22sort%22%3A%22asc%22%7D)

[()](https://www.kff.org/health-costs/state-indicator/expenses-per-inpatient-day/?currentTimeframe=0&selectedDistributions=expenses-per-inpatient-day&selectedRows=%7B%22wrapups%22%3A%7B%22united-states%22%3A%7B%7D%7D%2C%22states%22%3A%7B%22massachusetts%22%3A%7B%7D%7D%7D&sortModel=%7B%22colId%22%3A%22Location%22%2C%22sort%22%3A%22asc%22%7D)

[()](https://www.kff.org/health-costs/state-indicator/expenses-per-inpatient-day/?currentTimeframe=0&selectedDistributions=expenses-per-inpatient-day&selectedRows=%7B%22wrapups%22%3A%7B%22united-states%22%3A%7B%7D%7D%2C%22states%22%3A%7B%22massachusetts%22%3A%7B%7D%7D%7D&sortModel=%7B%22colId%22%3A%22Location%22%2C%22sort%22%3A%22asc%22%7D)

Not es

Includes all operating and non- operating expenses for registered US community hospitals, defined as nonfederal short-term general and other special hospitals whose facilities and services are available to the public.

Adjusted expenses per inpatient day include expenses incurred for both inpatient and outpatient care; inpatient days are adjusted higher to reflect an estimate of the volume of outpatient services. It is important to note that these

figures are only an estimate of expenses incurred by the hospital to provide a day of inpatient care and are not a substitute for either actual charges or reimbursement for care provided.

Sources

1999 - 2020 AHA Annual Survey, Copyright 2021 by Health Forum, LLC, an affiliate of the American Hospital Association. Special data request, 2021. Available at <http://www.ahaonlinestore.com>

[(https://ams.aha.org/eweb/DynamicPage.a spx?](https://ams.aha.org/eweb/DynamicPage.aspx?WebCode=ProdDetailAdd&ivd_prc_prd_key=165f9fbf-d766-40a9-96a6-a212aed366bb)

[WebCode=ProdDetailAdd&ivd\_prc\_prd\_key](https://ams.aha.org/eweb/DynamicPage.aspx?WebCode=ProdDetailAdd&ivd_prc_prd_key=165f9fbf-d766-40a9-96a6-a212aed366bb)

[=165f9fbf-d766-40a9-96a6-a212aed366bb).](https://ams.aha.org/eweb/DynamicPage.aspx?WebCode=ProdDetailAdd&ivd_prc_prd_key=165f9fbf-d766-40a9-96a6-a212aed366bb)

Defi nit ions

Community Hospitals: All nonfederal, short-term general, and specialty hospitals whose facilities and services are available to the public.



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Source: [https://www.statista.com/statistics/183916/average-length-of-stay-in-us-community-hospitals-since-1993/](http://www.statista.com/statistics/183916/average-length-of-stay-in-us-community-hospitals-since-1993/)

Average length of stay in U.S. community hospitals from 1993 to 2019

Published by [Frédéric Michas](https://www.statista.com/aboutus/our-research-commitment/1848/frederic-michas), Oct 12, 2021

This statistic shows that the average length of stay (ALOS) in U.S. community hospitals from 1993 to 2019. In 2007, a hospital stay in the United States had an average length of 5.5 days. Since then, there was no significant change in the length of stay.

Average length of stay in U.S. community hospitals 1993 to 2019

*(in days)*

7.25



|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6.7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | data point | 6.5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 6.2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | data point | 6.1data point 65.9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | data point 5.85.7 5.7 5.7 |  |  |  |  |  |  |  |  |  |  |  |
| 2017* 5.4
 |
|  |  |  |  |  |  |  |  |  |  |  5.6 5.6 5.65.5 5.55.4 | 5.4 | 5.4 | 5.4 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |

7

Length of stay in days

6.75

6.5

6.25

6

5.75

5.55.55.5 5.55.55.5 5.55.55.5

5.45.45.4 5.45.45.4 5.45.45.4 5.45.45.4

5.5

5.25

Additional Information

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Release date

January 2021

Region

United States

Survey time period

1993 to 2019