

HEALTH SAFETY NET RATES FOR ACUTE HOSPITALS - FY2025
Effective **October 1, 2024**

Payment Org ID	Hospital Name	Schedule A				Schedule B	Schedule C	Schedule D	Schedule E
		Inpatient Primary or PAF ²	Inpatient ER Bad Debt or PAF ²	Inpatient Transfer	Psych Per Diem	Payment on Account Factor or Cost to Charge Ratio ¹	Outpatient Primary AND ERBD	Outpatient - DSH Add-On	Inpatient Rehabilitation
				Per Day		Percentage	Per Visit	Per Visit	Per Day
1	Anna Jaques Hospital				\$876.53	0.3459	\$592.51	\$740.64	
2	Athol Memorial Hospital	1.31%	1.31%			0.3940	\$718.91	\$898.64	
4	Baystate Medical Center				\$876.53	0.3181	\$545.38	\$681.73	
5	Baystate Franklin Medical Center				\$876.53	0.2574	\$504.73	\$630.91	
8	Fairview Hospital	1.25%	1.25%			0.4271	\$449.81	\$562.27	
22	Brigham and Women's Hospital					0.1952	\$483.92		
25	Signature Healthcare Brockton Hospital				\$876.53	0.2105	\$185.49	\$231.86	
39	Cape Cod Hospital	53.72%	53.72%	\$3,238.29	\$876.53	0.3631	\$931.17	\$1,163.96	
40	Falmouth Hospital				\$876.53	0.2448	\$617.54	\$771.92	
41	Steward Norwood Hospital, Inc.				\$876.53	0.2326	\$241.47	\$301.83	
42	Steward Carney Hospital, Inc.				\$876.53	0.3791	\$697.70	\$872.12	
46	Boston Children's Hospital	60.20%	60.20%			0.4976	\$2,862.88		
50	Cooley Dickinson Hospital				\$876.53	0.2517	\$529.29	\$661.62	
51	Dana-Farber Cancer Institute	37.85%	37.85%			0.2767	\$3,621.53		
53	Beth Israel Deaconess Hospital - Needham					0.3340	\$705.56	\$881.95	
57	Emerson Hospital				\$876.53	0.2610	\$718.19	\$897.73	
59	Brigham and Women's Faulkner Hospital				\$876.53	0.2583	\$885.61		
68	UMass Memorial Health - Harrington Hospital, Inc.				\$876.53	0.2856	\$680.81	\$851.01	
71	HealthAlliance Hospital				\$876.53	0.1728	\$294.30	\$367.87	
73	Heywood Hospital				\$876.53	0.3659	\$781.03	\$976.29	
12879	Holy Family Hospital				\$876.53	0.3328	\$684.02	\$855.03	
77	Holyoke Medical Center				\$876.53	0.2778	\$342.97	\$428.71	
79	Beth Israel Deaconess Hospital - Plymouth				\$876.53	0.3105	\$437.08	\$546.34	
83	Lawrence General Hospital				\$876.53	0.2963	\$262.08	\$327.59	
85	Lowell General Hospital				\$876.53	0.2765	\$463.72	\$579.65	
88	Martha's Vineyard Hospital	85.59%	85.59%		\$876.53	0.4803	\$771.18	\$963.98	
89	Massachusetts Eye and Ear Infirmary				\$876.53	0.4437	\$645.62		
91	Massachusetts General Hospital				\$876.53	0.2083	\$780.58		
97	Milford Regional Medical Center				\$876.53	0.3495	\$449.50	\$561.88	
98	Beth Israel Deaconess Hospital - Milton				\$876.53	0.3493	\$695.88	\$869.85	
12875	Brown University Health Morton Hospital				\$876.53	0.3309	\$638.74	\$798.42	
100	Mount Auburn Hospital				\$876.53	0.3715	\$387.00		
101	Nantucket Cottage Hospital					0.2389	\$366.21	\$457.76	
104	Tufts Medical Center				\$876.53	0.2776	\$736.03	\$920.04	
105	Newton-Wellesley Hospital				\$876.53	0.2403	\$967.74	\$1,209.67	
106	Baystate Noble Hospital				\$876.53	0.2584	\$874.06	\$1,092.58	\$2,509.06
12878	Brown University St. Anne's Hospital				\$876.53	0.2718	\$446.96	\$558.70	
122	South Shore Hospital					0.3347	\$653.19	\$816.48	
12877	St. Elizabeth's Medical Center				\$876.53	0.3280	\$411.85	\$514.81	
127	Saint Vincent Hospital				\$876.53	0.1447	\$519.07	\$648.84	
129	Sturdy Memorial Hospital					0.3575	\$722.99	\$903.73	
133	Marlborough Hospital					0.1732	\$414.86	\$518.57	
138	Winchester Hospital				\$876.53	0.3262	\$604.42	\$755.52	
139	Baystate Wing Hospital				\$876.53	0.2817	\$835.94	\$1,044.93	
345	North Shore Medical Center				\$876.53	0.2180	\$437.31	\$546.63	
3107	Boston Medical Center					0.3402	\$462.86	\$578.57	
3108	Cambridge Health Alliance				\$876.53	0.3665	\$340.48	\$425.60	
3110	MetroWest Medical Center				\$876.53	0.1261	\$486.48	\$608.10	
3111	Melrose Wakefield Healthcare				\$876.53	0.2808	\$643.34	\$804.17	
3112	Northeast Hospital				\$876.53	0.2645	\$531.62	\$664.53	
3113	Southcoast Hospitals Group				\$876.53	0.2715	\$340.37	\$425.46	\$2,368.99
3115	UMass Memorial Medical Center				\$876.53	0.1897	\$672.16	\$840.20	
6309	Berkshire Medical Center				\$876.53	0.3319	\$510.86	\$638.58	\$2,463.99
6546	Lahey Hospital & Medical Center					0.3169	\$533.14	\$666.43	
6547	Mercy Medical Center				\$876.53	0.4414	\$1,268.11	\$1,585.14	\$2,206.30
12876	Good Samaritan Medical Center				\$876.53	0.3233	\$373.90	\$467.38	
8702	Beth Israel Deaconess Medical Center				\$876.53	0.3365	\$880.19		
11467	Nashoba Valley Medical Center, A Steward Hospital, Inc.				\$876.53	0.2192	\$692.51	\$865.64	

103	New England Baptist Hospital	69.26%	69.26%		\$876.53	0.4893	\$704.91		
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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.
- 3
- In patient rates are subject to change due to Medicare updates.

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