

Health Care Facilities

Hospital Survey: Dec decelerates m/m, Q4 est at +3.7% (down 10bps Q/Q)

Industry Overview

Dec survey predicts Q4 utilization +3.7% y/y for publics

In our December survey of 49 hospitals, volume growth decelerated m/m in most major service lines. Inpatient admits grew +2.2% on average (vs +2.2% in November). Meanwhile, average outpatient visits decelerated to +2.8% (vs +4.4% last month). We view the m/m deceleration as in line with our expectations given that comps got more difficult as the year went on. In Q3, the publicly traded hospitals companies reported +3.8% same store adj adm growth on average. Using this average and assuming companies see a slight moderation in growth as our survey implies, we estimate publics could see a +3.7% increase y/y in 4Q23. This would be well above the average of 1-2% that we would normally expect, and bodes well for continued beats and raises.

Vols headwind due to labor stable Q/Q

On average, labor was a 1.7% headwind to volumes, ranging from a 0% to 15% decrease, with a median of 0.0%. This is in line with the average in November.

Professional fees lower in Dec; expected to slow

In our October 2023 survey, we started asking respondents about trends in professional fees (e.g., subsidies paid to hospital-based physician groups such as ER and anesthesia). On average, professional fees increased +3.9% y/y in December (vs +8.7% in November), ranging from a -2% decrease to a +25% increase. Median growth was observed at +3.0%. On average, respondents reported expecting professional fees to be up +3.3% over the next 12 months, ranging from a -2% decrease to a +20% increase. Median growth was expected to be stable at +3.0%.

Acuity accelerated m/m, payer mix stronger

Avg acuity grew +2.2% y/y, above +1.5% in November. The median of 1.0% was in line with last month. We generally expect acuity to slow/decline as volumes normalize, but continued growth, even if moderate, is a positive and is consistent with hospital expectations for acuity to remain strong. We note that payer mix was stronger this month as commercial (+1.8%) grew faster than Medicaid (0.4%), uninsured (+1.1%), and Medicare (+1.7% y/y). Commercial growth has generally accelerated over the past year.

Outpatient utilization continues to outperform inpatient

Outpatient visits grew +2.8% in December, outperforming inpatient admissions, which grew +2.2%. Given the broad-based, secular shift to outpatient, we would expect outpatient volumes to grow more quickly than inpatient.

Most major service lines decelerated m/m, inpatient up

Our December survey points to y/y average volume increases in hospital surgeries, with outpatient surgeries (+2.4%) outperforming inpatient surgeries (+2.2% y/y). Meanwhile, inpatient admits were in line with inpatient surgeries, while outpatient surgeries were -40bps below outpatient visits. ASC vols were up +2.1% y/y, decelerating -20bps m/m. ER visits decelerated -80bps +2.9% this month.

12 January 2024

Equity United States HC Facilities

Kevin Fischbeck, CFA Research Analyst BofAS +1 646 855 5948 kevin.fischbeck@bofa.com

Joanna Gajuk Research Analyst BofAS +1 646 855 3961 joanna.gajuk@bofa.com

Mia Munoz Research Analyst BofAS +1 646 855 0735 mia.munoz2@bofa.com

THC: Tenet Healthcare

HCA: HCA Healthcare

UHS: Universal Health

ASC: Ambulatory surgery center

ACA: Affordable Care Act

Adj Adm = Adjusted admissions

SS = Same store

BofA Securities does and seeks to do business with issuers covered in its research reports. As a result, investors should be aware that the firm may have a conflict of interest that could affect the objectivity of this report. Investors should consider this report as only a single factor in making their investment decision.

Refer to important disclosures on page 21 to 22.

Dec survey suggests publics to see +3.7% increase y/y

We have typically found a correlation between our survey results and adjusted admission growth; and in the cases where the results are not spot-on, they generally are directionally correct, so we usually take the survey results and make an adjustment to predict publicly traded hospital volumes for the coming quarter.

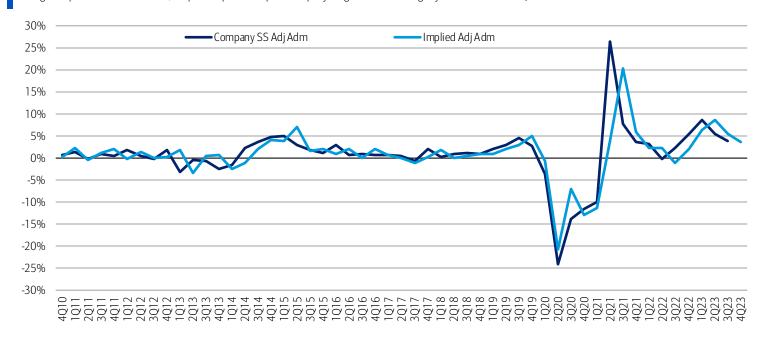
Using data points from December, our survey suggests that the quarter will see inpatient volume trends of +2.2%, 10bps below the +2.3% we saw in 3Q23. Meanwhile, our survey predicts +4.1% growth in outpatient visits based on the December print, above the +4.0% we saw in Q3. Overall, this yields an average 4Q23 volume estimate of +3.1%, in line with the +3.1% in our 3Q23 survey (actually slightly below on an unrounded basis) but below the +3.2% from 2Q23.

Looking to Q4, if we assume hospital companies see volume growth decelerate slightly quarter over quarter as implied by our survey, this would imply volumes in 4Q23 of +3.7% for the public hospital companies. Volumes of +3.7% would be below the +3.8% print we saw in 3Q23 on average and below the +5.4% in 2Q23 (where we excluded THC given the cybersecurity incident). Nevertheless, it would be well above the average of 1-2% that we would normally expect and bodes well for continued beats and raises.

Below we show what we forecast adjusted admissions would be in the upcoming quarter vs what companies actually reported.

Note: we switched survey data vendors. 2017 and onward reflect results from the new vendor. We made no adjustments to our historical data; therefore historical comparisons in this time frame may be skewed by differences in underlying populations surveyed.

Exhibit 1: Hospital company adjusted admission growth versus implied vols based on our surveyUsing data points from December, we predict public hospital company vol growth will be slightly down at +3.7% in Q4



Source: BofA Global Research

BofA GLOBAL RESEARCH

Company takeaways from survey

In order to look at the exposure of each company to inpatient volume trends, we categorized states into four categories: 1) positive volume trends (+0.5% average volume growth or higher), 2) flat volume trends (avg. volume change from -0.5% to +0.5%), 3) negative volume trends (volume decline of 0.5% or more), and 4) NA for states that were not represented in our survey.



In this survey, hospital companies were exposed to more positive volumes. This month, HCA seems best positioned as 81% of its beds were in states where we captured strong trends, above 63% for THC, and 54% for UHS. UHS is most exposed to negative volumes in this survey.

Exhibit 2: Hospitals' Exposure to Inpatient Volume Trends in December 2023

This month, hospitals were exposed to more positive volume trends than last month

| | HCA | THC | UHS-Acute |
|---------------------------------------|------|------|-----------|
| Positive volume trends | 81% | 63% | 54% |
| Flat volume trends | 0% | 0% | 0% |
| Negative volume trends | 9% | 11% | 40% |
| NA | 10% | 26% | 6% |
| | 100% | 100% | 100% |
| % positive volume trends excluding NA | 90% | 85% | 58% |

Source: BofA Global Research

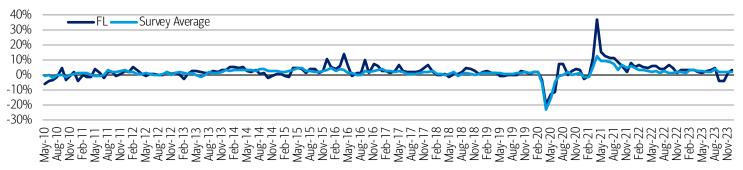
BofA GLOBAL RESEARCH

Florida volumes at +3.3%, above the survey average

Florida has historically shown better volume growth than the overall survey. In December 2023, Florida's inpatient volumes increased +3.3% y/y on average, +110bps above the overall survey average of +2.2% y/y growth.

Exhibit 3: Florida results versus Survey Average

Florida's avg. inpatient growth came in +110bps above the survey average in December



Source: BofA Global Research

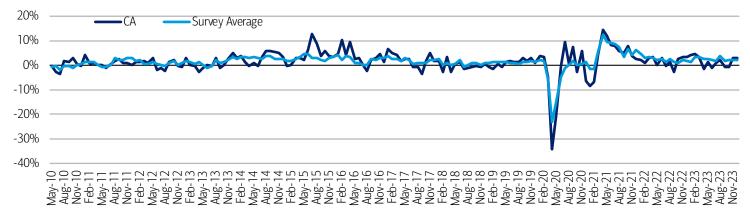
BofA GLOBAL RESEARCH

California volumes at +2.8% in December, +60bps above the survey average

California's volume trend relative to the survey's average has been inconsistent over the past few years. This month, CA's y/y inpatient growth of +2.8% came in +60bps above the survey average of +2.2%. The average CA growth this month is in line with the +2.8% in November and -0.5% in October.

Exhibit 4: California results versus Survey Average

California's survey print came in +60bps above the survey average in December



Source: BofA Global Research



Exhibit 4: California results versus Survey Average

California's survey print came in +60bps above the survey average in December

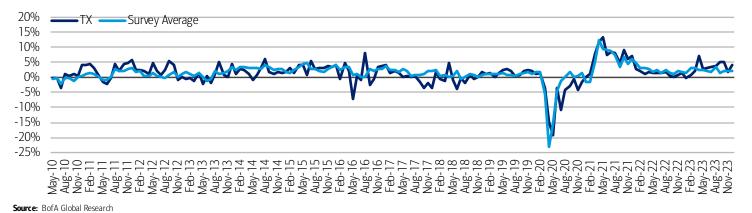
ROTA GLORAL KESEAKCH

Texas volumes at +4.1% in December, above November and the survey avg

Texas volume growth came in at +4.1% this month, +190bps above the survey average of +2.2%. For 8 of the last 12 months, Texas had volume growth above the survey overall.

Exhibit 5: Texas results versus Survey Average

Texas's avg growth came in +190bps above the survey average in December.



BofA GLOBAL RESEARCH

Survey Results

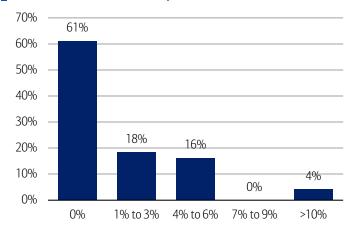
39% of hospitals saw labor as at least a 1% headwind to volumes

In the month of December 2023, what percent of volume was lost, if any, due to inability to staff beds?

On average, labor was a 1.7% headwind to volumes, ranging from a 0% to 15% decrease, with a median of 0.0%. This is in line with the 1.7% average in November. Overall, the survey points to a slow improvement in the labor market.

Exhibit 6: 39% of respondents reported labor being at least a 1% headwind to volumes

Headwind to volumes from inability to staff beds

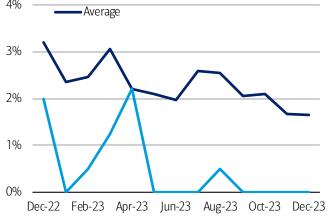


Source: BofA Global Research

RofA GLOBAL RESEARCH

Exhibit 7: The average headwind of 1.7% was stable m/m

Average and median headwind to volumes from inability to staff beds over time



Source: BofA Global Research

BofA GLOBAL RESEARCH

29% of hospitals see volumes accelerate in December, below last month

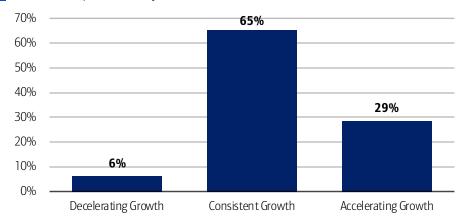
Describe your thoughts on the volume (inpatient and outpatient) trends during the most recent month vs last month – accelerating growth, decelerating growth, consistent growth.



In December, 29% of respondents said that volume growth (inpatient and outpatient) accelerated m/m. This is below our last survey in which 30% of respondents noted that hospital volumes accelerated in November. Meanwhile, 6% saw volumes decelerate this month (below 8% in November survey), and the remaining 65% saw consistent volume trends.

Exhibit 8: Overall volume change 12/2023 vs. 11/2023

29% of the hospitals we surveyed saw m/m vol acceleration in December, below November



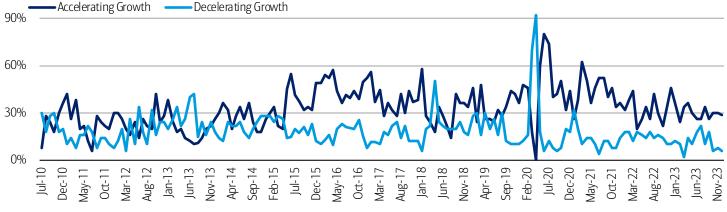
Source: BofA Global Research

BofA GLOBAL RESEARCH

Since May 2015, the number of hospitals reporting accelerating trends has generally been higher than the percentage reporting decelerating volume trends. Overall, we have seen that trend continue as this month more hospitals reported accelerating trends than decelerating trends, with a delta of 22% in this survey (in line with 22% in November).

Exhibit 9: Overall Volume change July 2010 to December 2023

The % of respondents seeing accelerating m/m growth remains above that of those seeing decelerating trends—with a variance of 22% in December.



Source: BofA Global Research

BofA GLOBAL RESEARCH

Inpatient admissions rose +2.2% y/y in December on average (stable m/m)

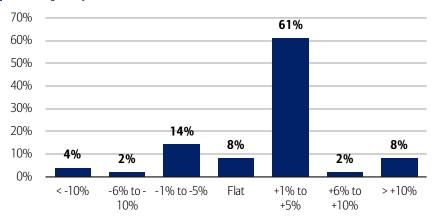
Please describe (quantify % change) actual inpatient admissions during the month of December 2023 versus a year ago?

On average, inpatient admissions increased +2.2% in December for hospitals in our survey, ranging from a -12% decline to a +22% increase, with a median of +2.0%.

This month, a higher share of hospitals saw inpatient admissions grow y/y (71%) than those who saw volumes decline (20%), and the remaining 8% indicated flat volumes y/y. This is below the 80% of respondents who saw y/y volume growth last month.

Exhibit 10: Inpatient admissions 12/2023 vs. 12/2022

71% of respondents noted y/y growth in inpatient admits in December, with 8% seeing volumes grow by over 10%



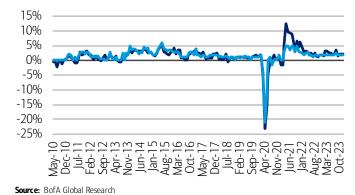
Source: BofA Global Research

BofA GLOBAL RESEARCH

Below we show historical trend data on average and median inpatient volume growth since 2010. After bottoming out in June of 2011, median inpatient volumes showed generally positive trends, with an upward trend through 2015, peaking in June 2015 at +6.0% due to the Affordable Care Act. Inpatient volumes gradually decelerated in the years leading up to 2020 before volumes dropped in 1H as a result of COVID-19 related shelter in place orders, before starting to normalize in 2H20 and into 2021. 2Q21 showed significant growth over COVID-impacted comps but decelerated throughout 3Q21-4Q22 largely due to y/y comps becoming more difficult. Throughout 1Q23, inpatient volume growth accelerated but then decelerated in 2Q23 and remained relatively flat sequentially in 3Q23. In December 2023, average volumes increased +2.2% (stable m/m), and median volume growth was +2.0% (in line with 2.0% in November). Overall, the Q4 average decelerated from Q3.

Exhibit 11: Inpatient Volumes, May 2010 to December 2023

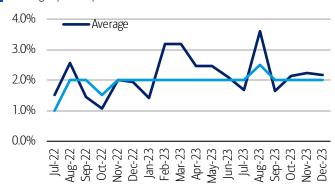
The avg. inpatient print was above 2018/2019 levels



BofA GLOBAL RESEARCH

Exhibit 12: Inpatient Volumes, July 2022 to December 2023

The avg. inpatient print was stable m/m



Source: BofA Global Research

BofA GLOBAL RESEARCH

Commercial admits +1.8% in December on average, below November

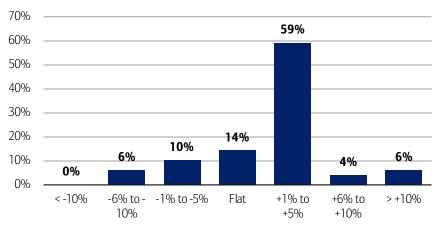
Please describe (quantify % change) actual Commercial inpatient admissions during the month of December 2023 versus a year ago?

On average, commercial admissions increased +1.8% y/y in December 2023, ranging from a -10% decline to a +18% increase for the hospitals surveyed. 16% of survey respondents noted that commercial admits decreased y/y in December; above the 10% in November. Meanwhile, 69% of respondents saw y/y growth, with the bulk of respondents noting modest growth.



Exhibit 13: Commercial inpatient admissions 12/2023 vs. 12/2022

69% of respondents saw y/y commercial vols increase in December, with the majority seeing modest growth



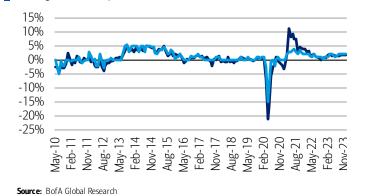
Source: BofA Global Research

BofA GLOBAL RESEARCH

Below we show historical trend data on the average and median commercial volume growth since May 2010. In December 2023, average commercial volumes increased +1.8% y/y, below the +1.9% in November and in line with the +1.8% in October. Volumes grew +2.0% at the median, in line with the median growth we saw in November. We note that this month's y/y increase in commercial volumes was -40bps below the total inpatient admission growth.

Over the next few years, we expect commercial volume growth to be minimal for the industry, as unemployment is already near record lows, while population growth in the under 65 demographic is only 20-30bps. As a result, this month's result is still above expectations.

Exhibit 14: Commercial Admissions - May 2010 to December 2023 The avg. commercial print was above 2018/2019 levels



BofA GLOBAL RESEARCH

Exhibit 15: Commercial Admissions - July 2022 to December 2023Commercial volumes are in line with last month but were -40bps below the overall inpatient print



Source: BofA Global Research

BofA GLOBAL RESEARCH

Average Medicaid admissions saw +0.4% growth in December

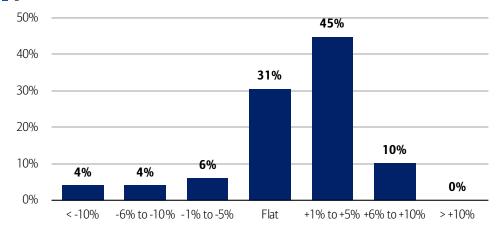
Please describe (quantify % change) actual Medicaid admissions during the month of December 2023 versus a year ago?

In December, Medicaid admissions grew +0.4% y/y—below the November growth of +1.4%. 55% of respondents said Medicaid admissions increased year over year, while 31% said they were flat and another 14% said they decreased.



Exhibit 16: Medicaid inpatient admissions 12/2023 vs. 12/2022

55% of respondents saw y/y Medicaid vols increase in December, with the majority seeing modest growth



Source: BofA Global Research

BofA GLOBAL RESEARCH

Medicaid admissions at-large have been decelerating since they peaked at +8.8% growth in December 2014 during the peak impact of the ACA. They spiked again in March 2021 due to easy COVID-impacted comps and an increase in Medicaid enrollment related to the suspension of redeterminations during the public health emergency. This month's growth of +0.4% is below the +1.4% seen in November. We would expect to see Medicaid volumes to slow in coming months as redeterminations put pressure on Medicaid enrollment growth.

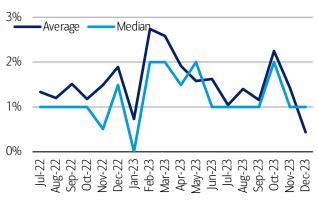
Below we show historical trend data on the average and median Medicaid volume growth since October 2011. In December 2023, average volumes came in at +0.4%, below the +1.4% in November. Median growth of +1.0% was in line with the +1.0% growth we surveyed last month and in line the +0-1% median range we saw throughout 2018-2019. Medicaid growth came in -130bps below the commercial inpatient admit growth this month, which reads positively for payer mix. We note that Medicaid redeterminations could be starting to have an impact on Medicaid volume growth.

Exhibit 17: Medicaid Admissions – October 2011 to December 2023 The average Medicaid print was above 2018/2019 levels



BofA GLOBAL RESEARCH

Exhibit 18: Medicaid Admissions – July 2022 to December 2023 Average Medicaid growth decelerated m/m to +0.4%



Source: BofA Global Research

BofA GLOBAL RESEARCH

Average Medicare admissions grew +1.7% y/y in December 2023

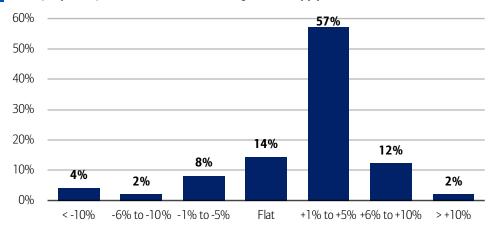
Please describe (quantify % change) actual Medicare admissions during the month of December 2023 versus a year ago?



Medicare admissions increased +1.7% on average y/y for respondents in our December survey with a median increase of +2.0%. This average result is below the +2.7% in our November survey. Among the respondents, 71% in aggregate said Medicare admissions increased (below the 82% in our previous survey) while 14% said they declined y/y (above the 10% in November). The bulk of respondents saw modest growth. We note that Medicare growth is +130bps above the +0.4% increase in Medicaid admissions but below the +2.2% overall inpatient growth.

Exhibit 19: Medicare Admissions, 12/2023 vs. 12/2022

The majority of hospitals saw their Medicare admits grow modestly y/y in December



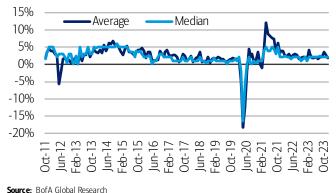
Source: BofA Global Research

BofA GLOBAL RESEARCH

Below we show historical trend data on the average and median Medicare volume growth since October 2011. In December, volumes increased by +1.7% y/y, in line with the 1-3% range where we have seen it trend over the past few years, but below the +2.7% in November.

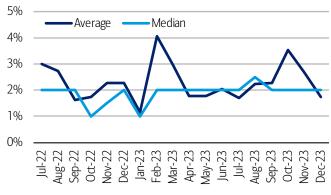
Exhibit 20: Medicare Admissions – November 2011 to December 2023

The average Medicare print was above the averages in 2018/2019



BofA GLOBAL RESEARCH

Exhibit 21: Medicare Admissions – July 2022 to December 2023 Average Medicare growth decelerated m/m to +1.7%



Source: BofA Global Research

BofA GLOBAL RESEARCH

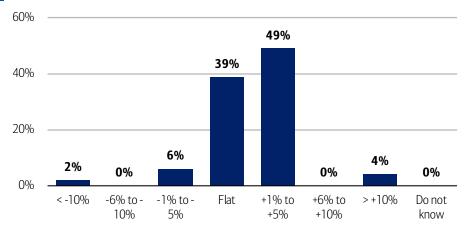
Average uninsured volumes increased +1.1% in December, declined m/m

Please describe (quantify % change) actual Uninsured / Self-Pay admissions during the month of December 2023 versus a year ago?

On average, uninsured volumes increased +1.1% y/y in December (ranging from a -5% decrease to a 13% increase). This month's result was below the +1.4% increase we saw in November. Median growth was 0.6% below last month at 1.0% y/y.

Exhibit 22: Uninsured / Self-Pay admissions 12/2023 vs. 12/2022

The majority of respondents are seeing uninsured vols modestly up to flat y/y in December.



Source: BofA Global Research

BofA GLOBAL RESEARCH

Uninsured admissions have generally been positive since June 2016. Since mid-2018, uninsured volumes have remained in the 0-1% range. Average uninsured admission growth turned positive in July 2020 and our survey results have remained positive since (except in January, March, and July 2022), but have generally been accelerating since August 2022. This month, the +1.1% increase is below the overall inpatient growth in our survey (+2.2%) and below commercial growth (+1.8%), which is a positive for payer mix. We note that Medicaid redeterminations could be putting upward pressure on uninsured volumes.

Exhibit 23: Uninsured Admissions – May 2010 to December 2023

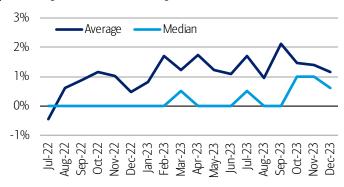
Uninsured volume growth has been inconsistent, as prints are compared against COVID-impacted months, but have decelerated since the April 2021 peak



BofA GLOBAL RESEARCH

Exhibit 24: Uninsured Admissions – July 2022 to December 2023

The average uninsured admissions growth below last month



Source: BofA Global Research

BofA GLOBAL RESEARCH

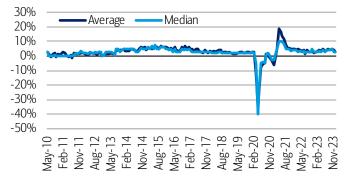
Average outpatient visits increased +2.8% y/y, above inpatient growth

Please describe (quantify % change) actual Outpatient visits during the month of December 2023 versus a year ago?

On average, outpatient visits increased +2.8% y/y (+3.0% median) in December 2023 for the hospitals surveyed. This +2.8% increase represents a -160bps deceleration from the +4.4% we recorded in November. Overall, 8% of respondents answered that outpatient visits declined year over year in December (above the 4% in our last survey). Meanwhile, 0% of respondents saw more than 10% y/y growth in outpatient visits.

Exhibit 25: Outpatient Volumes - May 2010 to December 2023

Outpatient volume saw prints above 2018/2019 levels on average

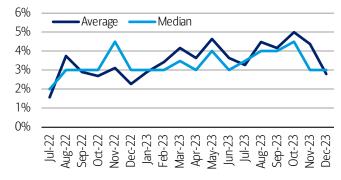


Source: BofA Global Research

BofA GLOBAL RESEARCH

Exhibit 26: Outpatient Volumes – July 2022 to December 2023

Outpatient volume growth decelerated m/m



Source: BofA Global Research

BofA GLOBAL RESEARCH

Inpatient Surgeries +2.2% in December, Outpatient Surgeries +2.4%

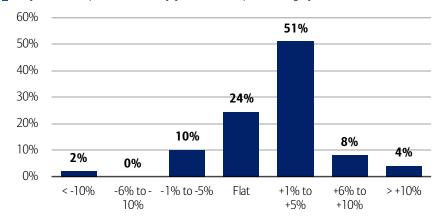
Please describe (quantify % change) actual number of hospital inpatient/outpatient surgeries during the month of December 2023 versus a year ago.

In December 2023, 63% of respondents indicated that Inpatient Surgeries increased compared to last year (below 68% in November), while 12% of respondents indicated that surgeries declined (below the 16% in our last survey), and the remaining 24% indicated that surgeries were flat y/y.

On average, Inpatient Surgeries saw a +2.2% increase in December, above the +2.0% we surveyed in November.

Exhibit 27: Inpatient Surgeries 12/2023 vs. 12/2022

Only 12% of respondents noted y/y declines in inpatient surgery volume in December



Source: BofA Global Research

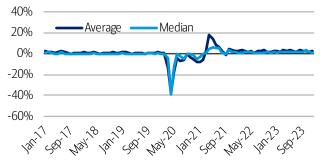
BofA GLOBAL RESEARCH

Below we show historical trend data on average and median Inpatient Surgery growth since 2017. The results have been a bit noisy, but overall inpatient surgery growth slowed from 2017 to the pre-COVID period. We saw a V-shaped recovery immediately following the 2Q20 declines, but it has not been linear as we have seen periods of deceleration from June to July 2020 and again from September through early 1Q21, which appears to have been tied to reaccelerating COVID volumes and consumers deferring their procedures. Recent prints have decelerated from 2Q21 highs, likely in part to the increasingly difficult comps. Growth throughout 2022 was modest, ranging from 1% to 3%. Inpatient surgeries accelerated in 1H23 but came down a bit in 3Q23. The 4Q23 average was below 3Q23.



Exhibit 28: Inpatient Surgeries, January 2017 to December 2023

Inpatient surgery volumes saw prints above 2018/2019 levels on average in this survey

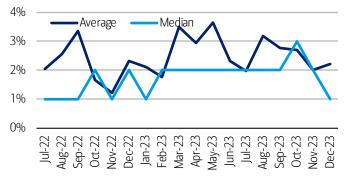


Source: BofA Global Research

BofA GLOBAL RESEARCH

Exhibit 30: Inpatient Surgeries, July 2022 to December 2023

Inpatient surgery growth accelerated m/m



Source: BofA Global Research

BofA GLOBAL RESEARCH

Generally, average inpatient surgeries tend to grow modestly slower than overall inpatient admissions. In December, inpatient surgeries (+2.2%) were in line with inpatient admits (+2.2%) on average, a neutral impact to acuity.

Exhibit 29: Average Inpatient Surgery Growth vs. Average Inpatient Visits Growth, January 2017 to December 2023

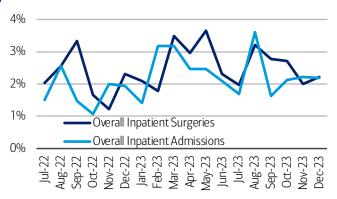
Inpatient surgeries tend to grow slower than inpatient admissions



BofA GLOBAL RESEARCH

Exhibit 30: Average Inpatient Surgery Growth vs. Average Inpatient Visits Growth, July 2022 to December 2023

Inpatient surgeries y/y were in line with Inpatient admissions in December



Source: BofA Global Research

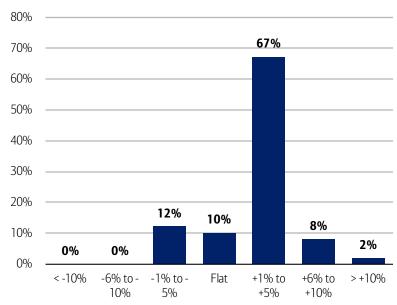
BofA GLOBAL RESEARCH

Hospital outpatient surgeries increased +2.4% y/y in December, decelerating from +3.2% y/y growth in November. This month's print is below the +3.0% average y/y growth in total outpatient surgeries reported in this survey (including ASCs). In aggregate, 12% of respondents said that hospital outpatient surgeries decreased y/y in December, above the 8% who noted the same last month. Meanwhile, 77% saw y/y increases—with 2% of respondents seeing increases of greater than 10%.



Exhibit 31: Outpatient Surgeries 12/2023 vs. 12/2022

12% of respondents saw y/y outpatient surgeries decrease, above last month



Source: BofA Global Research

BofA GLOBAL RESEARCH

Below we show historical trend data on average and median Outpatient Surgery growth since 2017. Since April 2020, the lowest print our survey has ever recorded, volumes had returned to flat trends in Q3, and then declined again through Q4 before improving throughout 1Q21. Recently, volumes have been in the 2.5%-4.5% range although December data was slightly below this.

Exhibit 32: Outpatient Surgeries, January 2017 to December 2023 Outpatient surgery volumes saw prints in above the 2018/2019 levels on average in this survey



BofA GLOBAL RESEARCH

Exhibit 33: Outpatient Surgeries, July 2022 to December 2023 Outpatient surgery growth decelerated from last month

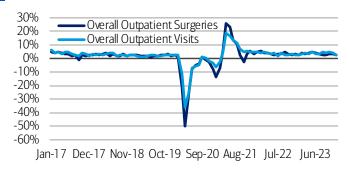


BofA GLOBAL RESEARCH

Overall, outpatient surgeries generally grow in-line with/slightly below outpatient visits. This month, outpatient surgeries grew below outpatient visits.

Exhibit 34: Average Outpatient Surgery Growth vs. Average Outpatient Visits Growth, January 2017 to December 2023

Outpatient surgeries tend to grow in line with/slightly below outpatient visits

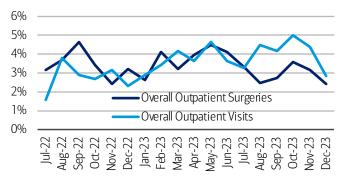


Source: BofA Global Research

BofA GLOBAL RESEARCH

Exhibit 35: Average Outpatient Surgery Growth vs. Average Outpatient Visits Growth, July 2022 to December 2023

Outpatient surgeries saw growth below Outpatient visits this month



Source: BofA Global Research

BofA GLOBAL RESEARCH

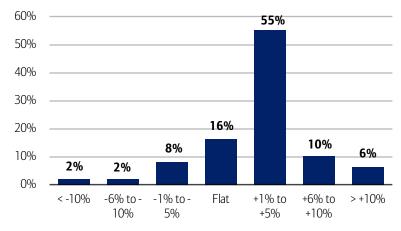
ER visits grew +2.9% in December, down -80bps m/m

Please describe (quantify % change) actual ER visits during the month of December 2023 versus a year ago?

In December 2023, 12% of respondents saw Emergency Room (ER) visits decline y/y, while 16% said ER volumes were flat, and the remaining 71% said ER visits increased y/y. On average, ER visits increased +2.9% this month, below the +3.7% we saw in November, while median growth was +2.0%, below the +2.5% as of last month.

Exhibit 36: ER admissions 12/2023 vs. 12/2022

The majority of respondents are seeing modest growth in ER visits



Source: BofA Global Research

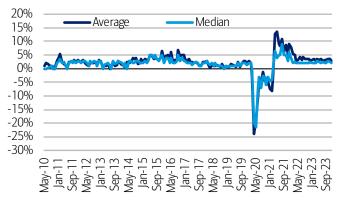
BofA GLOBAL RESEARCH

Below we show historical trend data on average and median ER volume growth since 2010. In December 2023, the median growth of +2.9% was above the +0-1% median we have historically surveyed.



Exhibit 37: ER Admissions, May 2010 to December 2023

ER admissions saw prints above 2018/2019 levels on average in this survey

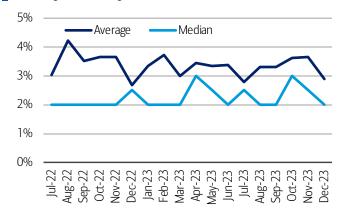


Source: BofA Global Research

BofA GLOBAL RESEARCH

Exhibit 38: ER Admissions, July 2022 to December 2023

On average, ER volume growth was down m/m



Source: BofA Global Research

BofA GLOBAL RESEARCH

Average Ambulatory Surgery Center volumes +2.1% In December

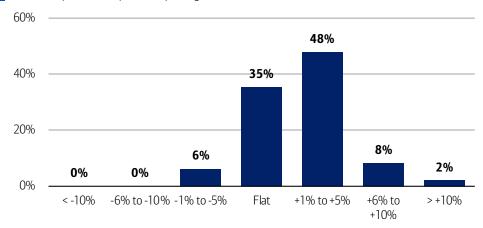
Please describe (quantify % change) actual ambulatory surgical volumes during the month of December 2023 versus a year ago?

On average, ambulatory surgery center (ASC) volumes increased +2.1% y/y in December for the hospitals we surveyed, below the +2.3% in November. Survey results ranged from a -4% decline to a +15% increase, with a median of +1.0%.

In December, 6% of the survey respondents answered that their surgery center volumes decreased y/y, above the 4% last month. Meanwhile, 58% of respondents said that volumes increased y/y, and the remaining 35% saw consistent volumes y/y.

Exhibit 39: Ambulatory Surgery Center Volume 12/2023 vs. 12/2022

58% of respondents reported improving trends in December



Source: BofA Global Research

BofA GLOBAL RESEARCH

Below we show surgery center volume trends over time. Average surgery center volumes declined significantly in 2Q20 (-35%) as a result of state mandated non-essential procedure deferrals during the initial months of COVID, but they have rebounded since and saw +2.1% y/y growth in December 2023. Median growth was +1.0% this month, in line with the +1.0% in November.



Exhibit 40: Ambulatory Surgery Center Volumes, March 2020 to December 2023

Surgery centers saw steep volume declines in 1H20



Exhibit 41: Ambulatory Surgery Center Volumes, July 2022 to December 2023

Surgery centers reported decelerated growth m/m



Source: BofA Global Research

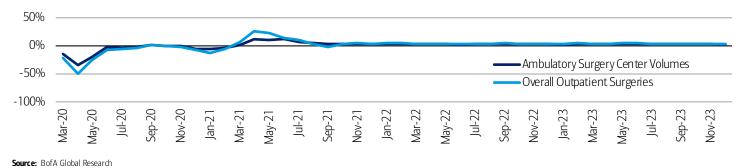
BofA GLOBAL RESEARCH

When we compare the y/y growth reported in outpatient surgeries to the growth in surgery center volumes, we see that they have been directionally consistent, as ASC volume has grown in a similar cadence. Hospital outpatient surgery trends saw larger declines in the beginning of the pandemic and have grown faster than ASC volumes in 10 of the last 12 months, likely due to the easier comps. This month, ASC volumes (+2.1%) grew below outpatient surgeries (+2.4%).

Exhibit 42: Exhibit 34: Ambulatory Surgery Center Volumes, March 2020 to December 2023

ASC and outpatient surgery trends have overall trended in a similar cadence since the pandemic began. ASC volumes grew slower in December

BofA GLOBAL RESEARCH



BofA GLOBAL RESEARCH

Cardio growing below General Surgery and Ortho

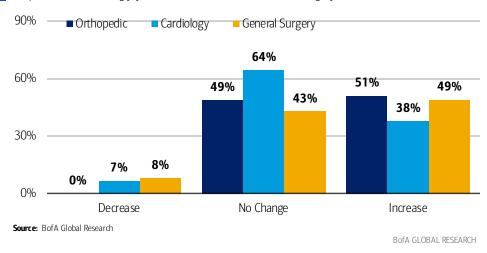
Please indicate the change, if any, in the number of the below elective procedures performed at your hospital during December 2023 vs December 2022.

This month, 0% of respondents noted y/y decreases in Ortho procedures (in line with the 0% in November), 8% noted declines in General Surgery procedures (vs 6% in October), and 7% noted declines in Cardiology procedures (in line with 7% in November). Meanwhile, 51% saw y/y increases in Orthopedic, 38% in Cardiology and 49% in General Surgery procedures. Also, 64% of respondents saw no change in cardio volumes. Our previous surveys have recorded a lower share of respondents seeing decreases in cardio procedures vs General surgery procedures (likely attributable to the difficulty in delaying cardiology procedures for a long time). This month, the share of respondents seeing decreases in cardio was below those who are seeing decreases in General surgery procedures.



Exhibit 43: Respondents seeing Change in Procedure Volume 12/2023 vs. 12/2022

Respondents are seeing y/y increases in Cardio below General Surgery and Ortho



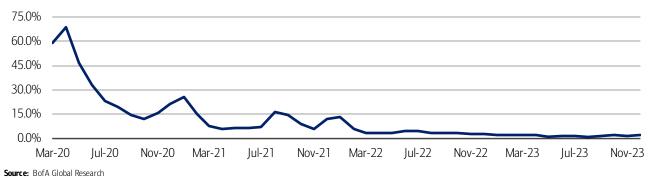
On average, 2.3% of procedures delayed in December due to COVID-19

What percentage of your monthly procedures are still being delayed or rescheduled due to COVID-19?

Survey respondents noted on average that 2.3% of procedures were delayed due to COVID-19 in December. Responses ranged from 0% to 25% of procedures (median of 0%). The 2.3% average is above November and levels have remained below 2.5% since January 2023.

Exhibit 44: Average Monthly Elective Procedures being delayed due to COVID-19, March 2020 to present

This month, hospitals saw 2.3% of procedures being delayed due to COVID, above November.



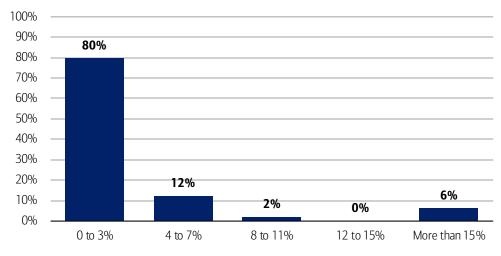
BofA GLOBAL RESEARCH

92% of respondents indicated that 0-10% of procedures were delayed due to COVID this month (in line with last month).



Exhibit 45: Percentage of Monthly Procedures being delayed due to COVID-19

Respondents reported higher COVID disruption on average m/m in December



Source: BofA Global Research

BofA GLOBAL RESEARCH

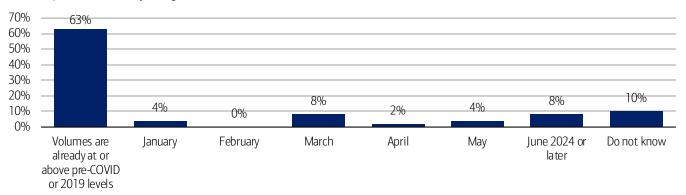
63% of respondents already seeing overall volumes at/above 2019 levels

When do you expect to see deferred volumes come back?

In this survey, 63% of respondents said volumes are already at or above pre-COVID or 2019 levels, above the 58% of respondents who were seeing volumes at pre-COVID levels as of last month. Meanwhile, in aggregate, 4% of respondents expect volumes to return by January, 0% by February, 8% by March, 2% by April, 4% by May, and 8% by June 2024 or later and the remaining 10% of respondents are still uncertain.

Exhibit 46: Survey respondents' expectations of when deferred volumes will return

63% of respondents are already seeing volumes at or above 2019 levels



Source: BofA Global Research

BofA GLOBAL RESEARCH

38% are not worried about permanently lower volumes post-COVID

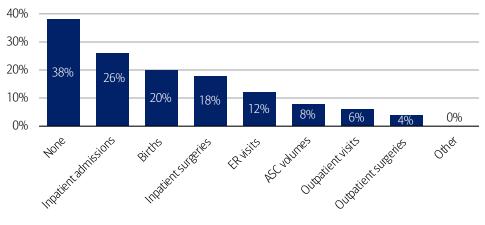
Do you believe that any of your hospital's service lines will see permanently lower volumes going forward?

38% of respondents do not expect any of their services lines to see permanently lower volumes as a result of COVID. Meanwhile, 26% expect fewer inpatient admissions, 20% expect fewer births, 18% expect fewer inpatient surgeries, 12% expect fewer ER visits, 8% expect fewer ambulatory surgery center (ASC) volumes, 6% expect lower outpatient visits, and 4% expect fewer outpatient surgeries.



Exhibit 47: Do you believe that any of your hospital's service lines will see permanently lower volumes going forward?

38% are not worried about lower volumes going forward and 26% of respondents are worried about permanently lower inpatient admissions



Source: BofA Global Research

BofA GLOBAL RESEARCH

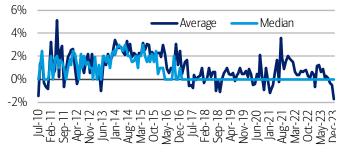
Births -1.7% on average, median still at +0.0%

Please describe (quantify % change) actual number of births during the month of December 2023 versus a year ago?

On average, birth volumes decreased -1.7% y/y in December (below the -0.5% in November) for the hospitals surveyed, ranging from a -50% decrease to a +10% increase. Median growth remained flat at +0%.

Exhibit 48: Births, July 2010 to December 2023

Births saw prints in line with 2018/2019 levels on average in this survey



Source: BofA Global Research

BofA GLOBAL RESEARCH

Exhibit 49: Births, July 2022 to December 2023

Average birth volumes have fluctuated m/m, but the median growth print has remained flat



Source: BofA Global Research

RofA GLOBAL RESEARCH

Acuity +2.2% on average

Please estimate the percent of change/rate of change for acuity of patients treated at your hospital (case mix) in December 2023 versus December 2022?

On average, patient acuity increased +2.2% y/y in December for the hospitals surveyed, above the +1.5% hospitals reported in November. Acuity among responses ranged from a -2% decline to a +15% increase this month, with a median of +1.0%. This median is below the +2-4% we recorded in 2020-21 but in line with the +1-2% range we generally saw throughout 2019. The expectation is that acuity will slow as volumes normalize, so even modestly positive acuity is still a positive.

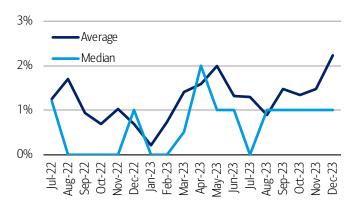
Exhibit 50: Acuity, January 2014 to December 2023

Acuity was roughly in line with 2018/2019 levels on average in this survey



Exhibit 51: Acuity, July 2022 to December 2023

Average acuity growth accelerated m/m



Source: BofA Global Research

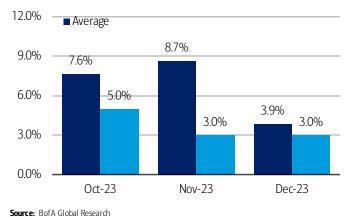
BofA GLOBAL RESEARCH

Professional fees were up +3.9% y/y, above 2024 outlook of +3.3%

In our October 2023 survey, we started asking respondents what percentage change year over year they were seeing in professional fees (e.g., subsidies paid to hospital-based physician groups such as ER and anesthesia). On average, professional fees increased +3.9% y/y in December for the hospitals surveyed, ranging from a -2% decrease to a +25% increase. Median growth was +3.0%. Based on this, the average and median response decelerated m/m.

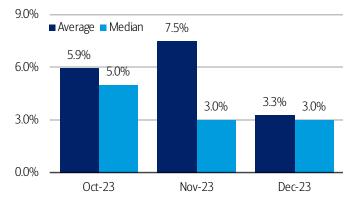
On average, respondents reported expecting professional fees to be up +3.3% over the next 12 months, ranging from a -2% decrease to a +20% increase. Median growth was observed at +3.0%. This points to an expectation that professional fee growth will moderate going forward, but still be a pressure on margins.

Exhibit 52: Professional fees were up 3.9% y/y as of December 2023 Outlook on professional fees y/y change in 2023



BofA GLOBAL RESEARCH

Exhibit 53: Professional fees in 2024 are expected to be below 2023 Outlook on professional fees y/y change in 2024



Source: BofA Global Research

BofA GLOBAL RESEARCH



Disclosures

Important Disclosures

BofA Global Research personnel (including the analyst(s) responsible for this report) receive compensation based upon, among other factors, the overall profitability of Bank of America Corporation, including profits derived from investment banking. The analyst(s) responsible for this report may also receive compensation based upon, among other factors, the overall profitability of the Bank's sales and trading businesses relating to the class of securities or financial instruments for which such analyst is responsible.

Other Important Disclosures

From time to time research analysts conduct site visits of covered issuers. BofA Global Research policies prohibit research analysts from accepting payment or reimbursement for travel expenses from the issuer for such visits.

Prices are indicative and for information purposes only. Except as otherwise stated in the report, for any recommendation in relation to an equity security, the price referenced is the publicly traded price of the security as of close of business on the day prior to the date of the report or, if the report is published during intraday trading, the price referenced is indicative of the traded price as of the date and time of the report and in relation to a debt security (including equity preferred and CDS), prices are indicative as of the date and time of the report and are from various sources including BofA Securities trading desks.

The date and time of completion of the production of any recommendation in this report shall be the date and time of dissemination of this report as recorded in the report timestamp.

Recipients who are not institutional investors or market professionals should seek the advice of their independent financial advisor before considering information in this report in connection with any investment decision, or for a necessary explanation of its contents.

Officers of BofAS or one or more of its affiliates (other than research analysts) may have a financial interest in securities of the issuer(s) or in related investments. Refer to BofA Global Research policies relating to conflicts of interest.

BofA Securities includes BofA Securities, Inc. (*BofAS*) and its affiliates. Investors should contact their BofA Securities representative or Merrill Global Wealth Management financial advisor if they have questions concerning this report or concerning the appropriateness of any investment idea described herein for such investor. *BofA Securities* is a global brand for BofA Global Research.

Information relating to Non-US affiliates of BofA Securities and Distribution of Affiliate Research Reports:

BofAS and/or Merrill Lynch, Pierce, Fenner & Smith Incorporated ("MLPF&S") may in the future distribute, information of the following non-US affiliates in the US (short name: legal name, regulator): Merrill Lynch (South Africa): Merrill Lynch South Africa (Pty) Ltd., regulated by The Financial Service Board; MLI (UK): Merrill Lynch International, regulated by the Financial Conduct Authority (FCA) and the Prudential Regulation Authority (PRA); BofASE (France): BofA Securities Europe SA is authorized by the Autorité de Contrôle Prudentiel et de Résolution (ACPR) and regulated by the ACPR and the Autorité des Marchés Financiers (AMF). BofA Securities Europe SA ("BofASE") with registered address at 51, rue La Boétie, 75008 Paris is registered under no 842 602 690 RCS Paris. In accordance with the provisions of French Code Monétaire et Financier (Monetary and Financial Code), BofASE is an établissement de crédit et d'investissement (credit and investment institution) that is authorised and supervised by the European Central Bank and the Autorité de Contrôle Prudentiel et de Résolution (ACPR) and regulated by the ACPR and the Autorité des Marchés Financiers. BofASE's share capital can be found at www.bofaml.com/BofASEdisclaimer; BofA Europe (Milan): Bank of America Europe Designated Activity Company, Milan Branch, regulated by the Bank of Italy, the European Central Bank (ECB) and the Central Bank of Ireland (CBI); BofA Europe (Frankfurt): Bank of America Europe Designated Activity Company, Frankfurt Branch regulated by BaFin, the ECB and the CBI; BofA Europe (Madrid): Bank of America Europe Designated Activity Company, Sucursal en España, regulated by the Bank of Spain, the ECB and the CBI; Merrill Lynch (Australia): Merrill Lynch Equities (Australia) Limited, regulated by the Australian Securities and Investments Commission; Merrill Lynch (Hong Kong): Merrill Lynch (Asia Pacific) Limited, regulated by the Hong Kong Securities and Futures Commission (HKSFC); Merrill Lynch (Singapore): Merrill Lynch (Singapore) Pte Ltd, regulated by the Monetary Authority of Singapore (MAS); Merrill Lynch (Canada): Merrill Lynch Canada Inc, regulated by the Canadian Investment Regulatory Organization; Merrill Lynch (Mexico): Merrill Lynch Mexico, SA de CV, Casa de Bolsa, regulated by the Comisión Nacional Bancaria y de Valores; Merrill Lynch (Argentina): Merrill Lynch Argentina SA, regulated by Comisión Nacional de Valores; BofAS Japan: BofA Securities Japan Co., Ltd., regulated by the Financial Services Agency; Merrill Lynch (Seoul): Merrill Lynch International, LLC Seoul Branch, regulated by the Financial Supervisory Service; Merrill Lynch (Taiwan): Merrill Lynch Securities (Taiwan) Ltd., regulated by the Securities and Futures Bureau; BofAS India: BofA Securities India Limited, regulated by the Securities and Exchange Board of India (SEBI); Merrill Lynch (Israel): Merrill Lynch Israel Limited, regulated by Israel Securities Authority; Merrill Lynch (DIFC): Merrill Lynch International (DIFC Branch), regulated by the Dubai Financial Services Authority (DFSA); Merrill Lynch (Brazil): Merrill Lynch S.A. Corretora de Títulos e Valores Mobiliários, regulated by Comissão de Valores Mobiliários; Merrill Lynch KSA Company: Merrill Lynch Kingdom of Saudi Arabia Company, regulated by the Capital Market Authority.

This information: has been approved for publication and is distributed in the United Kingdom (UK) to professional clients and eligible counterparties (as each is defined in the rules of the FCA and the PRA) by MLI (UK), which is authorized by the PRA and regulated by the FCA and the PRA - details about the extent of our regulation by the FCA and PRA are available from us on request; has been approved for publication and is distributed in the European Economic Area (EEA) by BofASE (France), which is authorized by the ACPR and regulated by the ACPR and the AMF; has been considered and distributed in Japan by BofAS Japan, a registered securities dealer under the Financial Instruments and Exchange Act in Japan, or its permitted affiliates; is issued and distributed in Hong Kong by Merrill Lynch (Hong Kong) which is regulated by HKSFC; is issued and distributed in Taiwan by Merrill Lynch (Taiwan); is issued and distributed in India by BofAS India; and is issued and distributed in Singapore to institutional investors and/or accredited investors (each as defined under the Financial Advisers Regulations) by Merrill Lynch (Singapore) (Company Registration No 198602883D). Merrill Lynch (Singapore) is regulated by MAS. Merrill Lynch Equities (Australia) Limited (ABN 65 006 276 795), AFS License 235132 (MLEA) distributes this information in Australia only to 'Wholesale' clients as defined by s.761G of the Corporations Act 2001. With the exception of Bank of America N.A., Australia Branch, neither MLEA nor any of its affiliates involved in preparing this information is an Authorised Deposit-Taking Institution under the Banking Act 1959 nor regulated by the Australian Prudential Regulation Authority. No approval is required for publication or distribution of this information in Brazil and its local distribution is by Merrill Lynch (Brazil) in accordance with applicable regulations. Merrill Lynch (DIFC) is authorized and regulated by the DFSA. Information in Germany and is regulated by BaFin, the ECB and the CBI. BofA Securit

This information has been prepared and issued by BofAS and/or one or more of its non-US affiliates. The author(s) of this information may not be licensed to carry on regulated activities in your jurisdiction and, if not licensed, do not hold themselves out as being able to do so. BofAS and/or MLPF&S is the distributor of this information in the US and accepts full responsibility for information distributed to BofAS and/or MLPF&S clients in the US by its non-US affiliates. Any US person receiving this information and wishing to effect any transaction in any security discussed herein should do so through BofAS and/or MLPF&S and not such foreign affiliates. Hong Kong recipients of this information should contact Merrill Lynch (Asia Pacific) Limited in respect of any matters relating to dealing in securities or provision of specific advice on securities or any other matters arising from, or in connection with, this information. Singapore recipients of this information should contact Merrill Lynch (Singapore) Pte Ltd in respect of any matters arising from, or in connection with, this information. For clients that are not accredited investors, expert investors or institutional investors Merrill Lynch (Singapore) Pte Ltd accepts full responsibility for the contents of this information distributed to such clients in Singapore.

General Investment Related Disclosures:

Taiwan Readers: Neither the information nor any opinion expressed herein constitutes an offer or a solicitation of an offer to transact in any securities or other financial instrument. No part of this report may be used or reproduced or quoted in any manner whatsoever in Taiwan by the press or any other person without the express written consent of BofA Securities. This document provides general information only, and has been prepared for, and is intended for general distribution to, BofA Securities clients. Neither the information nor any opinion expressed constitutes an offer or an invitation to make an offer, to buy or sell any securities or other financial instrument or any derivative related to such securities or instruments (e.g., options, futures, warrants, and contracts for differences). This document is not intended to provide personal investment advice and it does not take into account the specific investment objectives,



financial situation and the particular needs of, and is not directed to, any specific person(s). This document and its content do not constitute, and should not be considered to constitute, investment advice for purposes of ERISA, the US tax code, the Investment Advisers Act or otherwise. Investors should seek financial advice regarding the appropriateness of investing in financial instruments and implementing investment strategies discussed or recommended in this document and should understand that statements regarding future prospects may not be realized. Any decision to purchase or subscribe for securities in any offering must be based solely on existing public information on such security or the information in the prospectus or other offering document issued in connection with such offering, and not on this document.

Securities and other financial instruments referred to herein, or recommended, offered or sold by BofA Securities, are not insured by the Federal Deposit Insurance Corporation and are not deposits or other obligations of any insured depository institution (including, Bank of America, N.A.). Investments in general and, derivatives, in particular, involve numerous risks, including, among others, market risk, counterparty default risk and liquidity risk. No security, financial instrument or derivative is suitable for all investors. Digital assets are extremely speculative, volatile and are largely unregulated. In some cases, securities and other financial instruments may be difficult to value or sell and reliable information about the value or risks related to the security or financial instrument may be difficult to obtain. Investors should note that income from such securities and other financial instruments, if any, may fluctuate and that price or value of such securities and instruments may rise or fall and, in some cases, investors may lose their entire principal investment. Past performance is not necessarily a guide to future performance. Levels and basis for taxation may change.

This report may contain a short-term trading idea or recommendation, which highlights a specific near-term catalyst or event impacting the issuer or the market that is anticipated to have a short-term price impact on the equity securities of the issuer. Short-term trading ideas and recommendations are different from and do not affect a stock's fundamental equity rating, which reflects both a longer term total return expectation and attractiveness for investment relative to other stocks within its Coverage Cluster. Short-term trading ideas and recommendations may be more or less positive than a stock's fundamental equity rating.

BofA Securities is aware that the implementation of the ideas expressed in this report may depend upon an investor's ability to "short" securities or other financial instruments and that such action may be limited by regulations prohibiting or restricting "shortselling" in many jurisdictions. Investors are urged to seek advice regarding the applicability of such regulations prior to executing any short idea contained in this report.

Foreign currency rates of exchange may adversely affect the value, price or income of any security or financial instrument mentioned herein. Investors in such securities and instruments, including ADRs, effectively assume currency risk

BofAS or one of its affiliates is a regular issuer of traded financial instruments linked to securities that may have been recommended in this report. BofAS or one of its affiliates may, at any time, hold a trading position (long or short) in the securities and financial instruments discussed in this report.

BofA Securities, through business units other than BofA Global Research, may have issued and may in the future issue trading ideas or recommendations that are inconsistent with, and reach different conclusions from, the information presented herein. Such ideas or recommendations may reflect different time frames, assumptions, views and analytical methods of the persons who prepared them, and BofA Securities is under no obligation to ensure that such other trading ideas or recommendations are brought to the attention of any recipient of this information. In the event that the recipient received this information pursuant to a contract between the recipient and BofAS for the provision of research services for a separate fee, and in connection therewith BofAS may be deemed to be acting as an investment adviser, such status relates, if at all, solely to the person with whom BofAS has contracted directly and does not extend beyond the delivery of this report (unless otherwise agreed specifically in writing by BofAS). If such recipient uses the services of BofAS in connection with the sale or purchase of a security referred to herein, BofAS may act as principal for its own account or as agent for another person. BofAS is and continues to act solely as a broker-dealer in connection with the execution of any transactions, including transactions in any securities referred to herein.

Copyright and General Information:

Copyright 2024 Bank of America Corporation. All rights reserved. iQdatabase® is a registered service mark of Bank of America Corporation. This information is prepared for the use of BofA Securities clients and may not be redistributed, retransmitted or disclosed, in whole or in part, or in any form or manner, without the express written consent of BofA Securities. BofA Global Research information is distributed simultaneously to internal and client websites and other portals by BofA Securities and is not publicly-available material. Any unauthorized use or disclosure is prohibited. Receipt and review of this information constitutes your agreement not to redistribute, retransmit, or disclose to others the contents, opinions, conclusion, or information contained herein (including any investment recommendations, estimates or price targets) without first obtaining express permission from an authorized officer of BofA Securities. Materials prepared by BofA Global Research personnel are based on public information. Facts and views presented in this material have not been reviewed by, and may not reflect information known to, professionals in other business areas of BofA Securities, including investment banking personnel. BofA Securities has established information barriers between BofA Global Research and certain business groups. As a result, BofA Securities does not disclose certain client relationships with, or compensation received from, such issuers. To the extent this material discusses any legal proceeding or issues, it has not been prepared as nor is it intended to express any legal conclusion, opinion or advice. Investors should consult their own legal advisers as to issues of law relating to the subject matter of this material. BofA Global Research personnel's knowledge of legal proceedings in which any BofA Securities entity and/or its directors, officers and employees may be plaintiffs, defendants, co-defendants or co-plaintiffs with or involving issuers mentioned in this material is based on public inform

This information has been prepared independently of any issuer of securities mentioned herein and not in connection with any proposed offering of securities or as agent of any issuer of any securities. None of BofAS any of its affiliates or their research analysts has any authority whatsoever to make any representation or warranty on behalf of the issuer(s). BofA Global Research policy prohibits research personnel from disclosing a recommendation, investment rating, or investment thesis for review by an issuer prior to the publication of a research report containing such rating, recommendation or investment thesis.

Any information relating to the tax status of financial instruments discussed herein is not intended to provide tax advice or to be used by anyone to provide tax advice. Investors are urged to seek tax advice based on their particular circumstances from an independent tax professional.

The information herein (other than disclosure information relating to BofA Securities and its affiliates) was obtained from various sources and we do not guarantee its accuracy. This information may contain links to third-party websites. BofA Securities is not responsible for the content of any third-party website or any linked content contained in a third-party website. Content contained on such third-party websites is not part of this information and is not incorporated by reference. The inclusion of a link does not imply any endorsement by or any affiliation with BofA Securities. Access to any third-party website is at your own risk, and you should always review the terms and privacy policies at third-party websites before submitting any personal information to them. BofA Securities is not responsible for such terms and privacy policies and expressly disclaims any liability for them.

All opinions, projections and estimates constitute the judgment of the author as of the date of publication and are subject to change without notice. Prices also are subject to change without notice. BofA Securities is under no obligation to update this information and BofA Securities ability to publish information on the subject issuer(s) in the future is subject to applicable quiet periods. You should therefore assume that BofA Securities will not update any fact, circumstance or opinion contained herein.

Certain outstanding reports or investment opinions relating to securities, financial instruments and/or issuers may no longer be current. Always refer to the most recent research report relating to an issuer prior to making an investment decision.

In some cases, an issuer may be classified as Restricted or may be Under Review or Extended Review. In each case, investors should consider any investment opinion relating to such issuer (or its security and/or financial instruments) to be suspended or withdrawn and should not rely on the analyses and investment opinion(s) pertaining to such issuer (or its securities and/or financial instruments) nor should the analyses or opinion(s) be considered a solicitation of any kind. Sales persons and financial advisors affiliated with BofAS or any of its affiliates may not solicit purchases of securities or financial instruments that are Restricted or Under Review and may only solicit securities under Extended Review in accordance with firm policies.

Neither BofA Securities nor any officer or employee of BofA Securities accepts any liability whatsoever for any direct, indirect or consequential damages or losses arising from any use of this information.

