# Rutland Regional Medical Center

Fiscal Year 2019 Budget Analysis

Report Date: 7/30/2018

Rutland Regional Medical Center Fiscal Year 2019 Budget Analysis QUESTIONS

#### **QUESTIONS:**

- 1. Have the hospital's projections for FY2018 changed?
- 2. Bad Debt is increasing while Free Care is decreasing; please explain the factors contributing to those changes, including policy changes if any.
- 3. Please provide more specificity about what is included in Other Operating Expense for FY2017 Actuals, FY2018 Budget and Projections, and FY2019 Budget, and explain the variation from year to year.
- 4. Please explain the calculation of the estimated value of a 1% rate/price increase; the hospital's estimate varies from the GMCB staff estimate.
- 5. Please explain whether the CONs approved in the past year and/or other factors account for the increase in Long Term Debt to Capitalization.
- 6. Please specify the positions and discretionary spending that are eliminated.
- 7. Please complete the most recent table in Appendix V of the FY2019 hospital budget guidance and reporting requirements for proposed 2019 Health Care Reform Investments. Provide information about APM Quality Measures and summarize the evidence and/or rationale for each investment; identify Population Health Goals impacted by the last four investments.
- 8. Please complete the table that has been provided to clarify accounting of ACO-related revenue and expenses.

Fiscal Year 2019 Budget Analysis	F	Rutland Region	nal Medical Ce	nter					
INCOME STATEMENT	FY2015A	FY2016A	FY2017A	FY2018B	FY2018P	FY2019B	2018B - 2018P % Chg	2018B - 2019B % Chg	2018P - 2019B % Chg
Revenues									
Gross Patient Care Revenue	493,394,512	528,854,315	511,529,874	530,938,307	551,322,958	564,314,703	3.8%	6.3%	2.4%
Disproportionate Share Payments	4,576,163	4,573,554	5,269,069	3,995,289	3,995,289	3,090,930	0.0%	-22.6%	-22.6%
Bad Debt	(5,520,297)	(4,183,690)	(7,056,413)	(5,309,383)	(9,553,196)	(8,803,309)	79.9%	65.8%	-7.8%
Free Care	(4,167,120)	(5,838,729)	(5,753,971)	(6,121,719)	(3,969,525)	(4,063,066)	-35.2%	-33.6%	2.4%
Deductions from Revenue	(259,954,621)	(277,582,498)	(261,795,128)	(272,539,164)	(288,174,594)	(321,114,147)	5.7%	17.8%	11.4%
Net Patient Care Revenue	228,328,637	245,822,952	242,193,431	250,963,330	253,620,932	233,425,111	1.1%	-7.0%	-8.0%
Fixed Prospective Payments &									
Reserves	0	0	0	0	0	25,500,000	#DIV/0!	#DIV/0!	#DIV/0!
Net Patient Care Revenue & Fixed									
Payments & Reserves	228,328,637	245,822,952	242,193,431	250,963,330	253,620,932	258,925,111	1.1%	3.2%	2.1%
Other Operating Revenue	9,275,938	8,598,283	12,083,366	12,290,310	13,363,394	15,699,404	8.7%	27.7%	17.5%
Total Operating Revenue Expenses	237,604,575	254,421,235	254,276,797	263,253,640	266,984,326	274,624,515	1.4%	4.3%	2.9%
Salaries Non MD	70,594,783	78,446,783	81,623,868	86,033,134	85,495,640	89,707,829	-0.6%	4.3%	4.9%
Fringe Benefits Non MD	27,728,540	25,172,851	24,176,644	26,970,680	27,009,847	29,001,380	0.1%	7.5%	7.4%
Fringe Benefits MD	2,101,246	1,375,451	1,332,753	1,475,722	1,509,169	1,565,999	2.3%	6.1%	3.8%
Physician Fees, Salaries, Contracts	30,053,013	30,000,115	32,106,201	31,552,125	32,928,897	31,716,662	4.4%	0.5%	-3.7%
Health Care Provider Tax	13,002,474	14,052,304	14,644,716	14,810,108	14,736,369	15,396,699	-0.5%	4.0%	4.5%
Depreciation & Amortization	12,433,769	13,596,263	12,784,354	12,728,164	12,231,805	12,904,769	-3.9%	1.4%	5.5%
Interest - Long Term & Short Term	1,897,138	1,803,469	1,549,155	1,688,565	1,382,431	1,532,255	-18.1%	-9.3%	10.8%
Other Operating Expense	75,385,579	79,195,624	81,895,722	82,290,825	89,640,927	86,395,202	8.9%	5.0%	-3.6%
Total Operating Expense	233,196,542	243,642,860	250,113,413	257,549,323	264,935,085	268,220,795	2.9%	4.1%	1.2%
Net Operating Income (Loss)	4,408,033	10,778,375	4,163,384	5,704,317	2,049,241	6,403,720	-64.1%	12.3%	212.5%
Non-Operating Revenue	(492,377)	11,380,794	16,154,020	8,794,172	6,443,603	5,939,237	-26.7%	-32.5%	-7.8%
Excess (Deficit) of Rev Over Exp	3,915,656	22,159,169	20,317,404	14,498,489	8,492,844	12,342,957	-41.4%	-14.9%	45.3%
Benchmarks-Hospital									
Operating Margin% Total Margin % Cost per Adjusted Admission	1.9% 1.7% 13,552	4.2% 8.3% 13,611	1.6% 7.5% 14,022	2.2% 5.3% 15,254	0.8% 3.1% 14,295	2.3% 4.4% 14,194			

<u>OBSERVATIONS</u>: RRMC's FY2019 budget for NPR & FPP is an increase of \$8 million or 3.2% over the FY2018 budget, and 2.1% over the FY2018 Projections. The largest cost-saving initiative the hospital has projected and budgeted is for position eliminations; see narrative. Cost per Adjusted Admission is similar to FY2018 Projections and lower than FY2018 Budget.

**QUESTIONS:** Bad Debt is increasing while Free Care is decreasing; please explain the factors contributing to those changes. Please provide more specificity about what is included in Other Operating Expense.

Fiscal Year 2	2019 Budget Analysis R	utland Regional Me	edical Center						
NET DAVED DI	EVENUE CHANCE DAVEDO				2018B - 2018P	2018B - 2019B	2018P - 2019B	Change due to Rate	Change due to Non-Rate
NEI PAYEK KI	EVENUE CHANGE - PAYERS	FY2018B	FY2018P	FY2019B	% Chg	% Chg	% Chg		Items
All Payers	Gross Patient Care Revenue	\$530,938,307	\$551,322,958	\$564,314,703	3.8%	6.3%	2.4%		
	Contractual Allowances	(\$272,539,164)	(\$288,174,594)	(\$321,114,147)	5.7%	17.8%	11.4%		
	Bad Debt	(\$5,309,383)	(\$9,553,196)	(\$8,803,309)	79.9%	65.8%	-7.8%		
	Free Care	(\$6,121,719)	(\$3,969,525)	(\$4,063,066)	-35.2%	-33.6%	2.4%		
	Graduate Medical Education Payments	\$0	\$0	\$0	#DIV/0!	#DIV/0!	#DIV/0!		
	Disproportionate Share Payments	\$3,995,289	\$3,995,289	\$3,090,930	0.0%	-22.6%	-22.6%		
	Net Payer Revenue	\$250,963,330	\$253,620,932	\$233,425,111	1.1%	-7.0%	-8.0%		
	Fixed Prospective Payments & Reserves	\$0	\$0	\$25,500,000	#DIV/0!	#DIV/0!	#DIV/0!		
	Net Patient Care Rev & Fixed Payments & Reserves	\$250,963,330	\$253,620,932	\$258,925,111	1.1%	3.2%	2.1%	\$2,488,953	\$5,469,708
Commercial	Gross Patient Care Revenue	\$164,990,822	\$167,366,693	\$172,245,408	1.4%	4.4%	2.9%		
	Contractual Allowances	(\$23,308,594)	(\$31,875,923)	(\$30,444,994)	36.8%	30.6%	-4.5%		
	Bad Debt	(\$5,309,383)	(\$9,553,196)	(\$8,803,309)	79.9%	65.8%	-7.8%		
	Free Care	(\$6,121,719)	(\$3,969,525)	(\$4,063,066)	-35.2%	-33.6%	2.4%		
	NPR	\$130,251,126	\$121,968,049	\$128,934,039	-6.4%	-1.0%	5.7%		
	Fixed Prospective Payment & Reserves	\$0	\$0	\$0	#DIV/0!	#DIV/0!	#DIV/0!		
	Total Net Payer Revenue & Fixed Prospective Payment	\$130,251,126	\$121,968,049	\$128,934,039	-6.4%	-1.0%	5.7%	\$2,488,953	(\$5,089,089
Medicaid	Gross Patient Care Revenue	\$88,506,925	\$92,759,032	\$95,202,239	4.8%	7.6%	2.6%		
	Contractual Allowances	(\$63,817,904)	(\$65,727,019)	(\$94,624,599)	3.0%	48.3%	44.0%		
	Bad Debt	\$0	\$0	\$0	#DIV/0!	#DIV/0!	#DIV/0!		
	Free Care	\$0	\$0	\$0	#DIV/0!	#DIV/0!	#DIV/0!		
	Graduate Medical Education Payments	\$0	\$0	\$0	#DIV/0!	#DIV/0!	#DIV/0!		
	NPR	\$24,689,021	\$27,032,013	\$577,640	9.5%	-97.7%	-97.9%		
	Fixed Prospective Payment & Reserves	\$0	\$0	\$25,500,000	#DIV/0!	#DIV/0!	#DIV/0!		
	Total Net Payer Revenue & Fixed Prospective Payment	\$24,689,021	\$27,032,013	\$26,077,640	9.5%	5.6%	-3.5%	\$0	\$2,272,267
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Medicare	Gross Patient Care Revenue	\$277,440,560	\$291,197,233	\$296,867,056	5.0%	7.0%	1.9%		
	Contractual Allowances	(\$185,412,666)	(\$190,571,652)	(\$196,044,554)	2.8%	5.7%	2.9%		
	Bad Debt	\$0	\$0	\$0	#DIV/0!	#DIV/0!	#DIV/0!		
	Free Care	\$0	\$0	\$0	#DIV/0!	#DIV/0!	#DIV/0!		
	NPR	\$92,027,894	\$100,625,581	\$100,822,502	9.3%	9.6%	0.2%		
	Fixed Prospective Payment & Reserves	\$0	\$0	\$0	#DIV/0!	#DIV/0!	#DIV/0!		
	Total Net Payer Revenue & Fixed Prospective Payment	\$92,027,894	\$100,625,581	\$100,822,502	9.3%	9.6%	0.2%	\$0	\$9,190,889
	Total Net Layer Nevenue & Likea Liospective Layment	<i>\$32,027,034</i>	\$100,025,501	\$100,022,502	3.370	3.070	0.270	<b>,</b>	<b>\$3,130,003</b>
	Disproportionate Share Payments	\$3,995,289	\$3,995,289	\$3,090,930	0.0%	-22.6%	-22.6%		(\$904,359
	NPR to Gross Commercial (no dsh)	78.9%	72.9%	74.9%					
	NPR to Gross Medicaid (no dsh)	27.9%	29.1%	27.4%					
	NPR to Gross Medicare (no dsh)	33.2%	34.6%	34.0%					
	NPR to Gross All (no dsh)	46.5%	45.3%	45.3%					

#### Observations:

The hospital is participating in the Medicaid portion of the ACO APM and is budgeting \$25.5 million. NPR to Gross for Commercial has declined while Medicare and Medicaid have improved. Utilization has increased across all payers. Program changes reducing NPR are reported in Medicaid (\$682,440) and Commercial (\$545,494). Disproportionate Share Payments have decreased more than 22%.

## **Rutland Regional Medical Center**

#### RATE AND NET PATIENT REVENUE INCREASE

Rate is the average change in price for services provided.

	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
Weighted Average Approved Rate (all hospitals)	6.82%	4.37%	1.67%	2.04%	
Weighted Average Submitted Rate (all hospitals)	6.82%	4.40%	2.21%	2.34%	3.12%
Rutland Regional Medical Center Approved Rate	8.40%	3.71%	-5.10%	4.90%	
Rutland Regional Medical Center Submitted Rate	8.40%	3.71%	-5.10%	4.94%	3.00%

Hospital Inpatient Gross Revenue	0.0%
Hospital Outpatient Gross Revenue	0.0%
Physician Outpatient Gross Revenue	0.0%
Chronic/SNF Gross Revenue	0.0%
Swing Gross Revenue	0.0%

Net Patient Revenue Change Due to Rate Request	
Commercial	\$ 2,488,953
Medicaid	\$ (0)
Medicare	\$ 0
Disproportionate Share	\$ -
Total Change Due to Rate Request	\$ 2,488,954

Value of 1% Rate - Calculated by GMCB	\$ 829,651
Value of 1% Rate - Calculated by RRMC	\$ 912,381
Variance	\$ (82,729)

## **OBSERVATIONS:** RRMC has a rate/price request of 3.00%.

The 3.00% rate/price increase will result in increased NPR of \$2.5 million. The narrative indicates that the rate/price request is related to payment reductions in Medicare and Medicaid and increased reserves for Bad Debt and Free Care combined. For RRMC, every 1% increase in rate/price is worth approximately \$829,651 in net patient revenue. This estimate calculated by GMCB staff does not match the estimated value of a 1% increase calculated by the hospital.

**QUESTIONS:** Please explain the calculation of the estimated value of a 1% rate/price increase.

al Year 2019 Budget Analysis	Rutland Regional Medical Center											
DASHBOARD	FY2015A	FY2016A	FY2017A	FY2018B	FY2018P	FY2019B						
Net Patient Care Revenue	228,328,637	245,822,952	242,193,431	250,963,330	253,620,932	233,425,						
Net Patient Care Rev & Fixed Payments & Reserves	228,328,637	245,822,952	242,193,431	250,963,330	253,620,932	258,925,						
NPR & FPP % Variance		7.7%	-1.5%	3.6%	1.1%	3						
Three Year NPR & FPP CAGR* (FY16A - FY19B)						1						
Operating Expense	233,196,542	243,642,860	250,113,413	257,549,323	264,935,085	268,220,						
Oper Exp % Variance		4.5%	2.7%	3.0%	2.9%	4						
Three Year Oper. Exp. CAGR* (FY16A - FY19B)						3						
Revenue												
Operating Margin %	1.9%	4.2%	1.6%	2.2%	0.8%	2						
Total Margin %	1.7%	8.3%	7.5%	5.3%	3.1%	4						
Bad Debt %	1.1%	0.8%	1.4%	1.0%	1.7%	1						
Free Care %	0.8%	1.1%	1.1%	1.2%	0.7%	C						
Cost												
Cost per Adjusted Admission	13,552	13,611	14,022	15,254	14,295	14						
Overhead Exp. as a % of Total Operating Exp.	27.9%	26.6%	27.3%	28.3%	27.9%	29						
Productivity & Utilization												
Acute Admissions	5,941	6,495	6,525	6,279	6,908	6						
Adjusted Admissions	17,208	17,901	17,837	16,884	18,533	18						
Average Length of Stay	5	5	5	5	5							
FTEs Per Adjusted Occupied Bed	5	5	5	6	5							
FTEs per 100 Adj Discharges	7	7	7	8	7							
Cash												
Days Cash on Hand	195.1	204.5	216.1	223.9	206.3	2						
Current Ratio	3.2	3.7	4.5	5.7	4.3							
Capital												
Age of Plant	11.5	11.8	13.3	14.7	14.9							
Long Term Debt to Capitalization				15.7%	15.1%	18						
Debt Service Coverage Ratio	4.48	7.11	5.53	5.66	4.82							

Fiscal Year 2019 Budget Analysis			Rutia							
UTILIZATION & STAFFING	FY2015	Α	FY2016A	FY2017A	FY2018B	FY2018P	FY2019B	2018B-2018P	2018B-2019B	2018P-2019B
UTILIZATION										
Adjusted Admissions	17,	208	17,901	17,837	16,884	18,533	18,897	9.8%	11.9%	2.0%
Acute Admissions	5,	941	6,495	6,525	6,279	6,908	6,908	10.0%	10.0%	0.0%
Acute Average Length Of Stay		4.6	4.7	4.8	5.0	4.7	4.7	-6.2%	-6.2%	0.0%
All Operating Room Procedure	4,	539	4,885	4,964	5,037	5,128	5,128	1.8%	1.8%	0.0%
Tests	505,	<b>L26</b>	510,930	524,029	519,824	570,006	574,620	9.7%	10.5%	0.8%
<b>Emergency Room Visits</b>	34,	067	33,831	33,872	32,218	32,722	32,722	1.6%	1.6%	0.0%
CT Scan, Radiology - Diagnostic	54,	203	54,762	55,415	53,694	57,362	57,226	6.8%	6.6%	-0.2%
Exams	4,	594	5,085	4,987	4,941	5,101	5,101	3.2%	3.2%	0.0%
Provider Work RVU		0	0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!
Physician Office Visits		0	0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!
Clinic Visits	357,	586	396,746	396,055	391,090	407,110	408,845	4.1%	4.5%	0.4%
STAFFING										
FT Equivalents (Heads)	1,	166	1,243	1,265	1,301	1,284	1,316	(17)	15	32
Travelers, Travelers MD		93	92	100	78	110	75	32	(3)	(35)
Residents & Fellows		0	0	0	0	0	0	0	0	0
MLPs		0	0	0	0	0	0	0	0	0
Physician FTEs		88	68	70	73	72	71	(1)	(2)	(1)
Total FTEs	1,	347	1,403	1,435	1,452	1,466	1,462	14	10	(4)
Benchmarks-Hospital										
Salary per FTE - Non-MD	\$ 60,5	54 \$	63,124	\$ 64,519	\$ 66,110	\$ 66,560	\$ 68,147	0.7%	3.1%	2.4%
Salary & Benefits per FTE - Non-MD	\$ 84,3	39 \$	83,379	\$ 83,629	\$ 86,835	\$ 87,588	\$ 90,178	0.9%	3.9%	3.0%
FTEs Per Adjusted Occupied Bed		5	5	5	6	5	5	-4.1%	-3.6%	0.5%
FTEs per 100 Adj Discharges		7	7	7	8	7	7	-10.1%	-9.6%	0.5%
Benchmarks-Vermont System Averages										
Salary per FTE - Non-MD	\$ 61,3	26 \$	63,250	\$ 65,422	\$ 65,917	\$ 67,055	\$ 67,424	1.7%	2.3%	0.5%
Salary & Benefits per FTE - Non-MD	\$ 80,7	04 \$	81,921	\$ 85,211	\$ 84,856	\$ 86,361	\$ 86,812	1.8%	2.3%	0.5%
FTEs Per Adjusted Occupied Bed		6	6	6	6	6	6	-0.7%	2.8%	3.6%
FTEs per 100 Adj Discharges		7	7	7	8	8	8	-1.1%	1.3%	2.4%

Rutland Regional Medical Center

Fiscal Vear 2019 Rudget Analysis

<u>OBSERVATIONS:</u> Overall utilization as measured by FY2019 Budget Adjusted Admissions is projected to increase 9.8% over FY2018 budget and 2% from FY2018 Projections to FY2019 Budget. Acute Average Length of Stay is the only utilization metric showing a decrease. See narrative for additional information on utilization changes and FTE changes such as the Registered Nurse Hiring Program. The hospital's productivity metrics are steady.

Fiscal Year 2019 Budget Analysis Rutland Regional Medical Center												
BALANCE SHEET		FY2015A		FY2016A		FY2017A		FY2018B		FY2018P		FY2019B
Cash & Investments	\$	12,803,315	Ş	12,941,834	Ş	9,725,785	Ş	14,576,141	Ş	8,611,862	Ş	7,770,719
Risk Reserve for Fixed Reform Payments		-		-		-		-		-		-
Other Current Assets		30,391,479		33,126,002		37,223,376		38,386,003		27,549,094		28,590,069
Current Assets		43,194,794		46,067,836		46,949,161		52,962,144		36,160,956		36,360,788
Board Designated Assets		106,222,958		117,001,552		130,876,603		135,634,258		134,310,334		136,214,205
Net, Property, Plant And Equipment		73,717,869		81,726,125		81,137,226		87,915,866		90,358,909		110,729,023
Other Long-Term Assets		9,289,915		10,526,690		10,512,958		5,266,692		10,350,358		10,392,859
Assets	\$	232,425,536	\$	255,322,203	\$	269,475,948	\$	281,778,960	\$	271,180,557	\$	293,696,875
C		22.067.040		24 042 426		22 207 405		24 000 040		20 240 240		20 005 022
Current Liabilities	\$	32,967,019	\$	31,942,436	Þ	32,287,405	\$	31,888,810	\$	29,340,210	\$	28,805,833
Long Term Liabilities		39,991,232		38,264,159		36,469,183		34,603,702		34,603,731		47,926,995
Other Noncurrent Liabilities		30,961,803		31,844,814		15,040,693		30,183,617		13,065,110		10,449,585
Fund Balance		128,505,482		153,270,796		185,678,667		185,102,831		194,171,506		206,514,463
Liabilities and Equities	\$	232,425,536	Ş	255,322,205	Ş	269,475,948	\$	281,778,960	\$	271,180,557	<b>Ş</b>	293,696,876
Benchmarks-Hospital												
Days Cash on Hand		195.1		204.5		216.1		223.9		206.3		205.7
Long Term Debt to Capitalization		23.7%		20.0%		16.4%		15.7%		15.1%		18.8%
Debt Service Coverage Ratio		4.5		7.1		5.5		5.7		4.8		6.0
Benchmarks-Vermont System Averages												
Days Cash on Hand		178.5		183.3		193.6		167.3		178.2		173.4
Long Term Debt to Capitalization		27.6%		30.5%		29.0%		29.6%		26.7%		25.4%
Debt Service Coverage Ratio		3.7		5.0		3.9		3.7		3.7		3.7

<u>OBSERVATIONS:</u> RRMC'S Days Cash on Hand has been higher than the Vermont System median for several years. The hospital's Board Designated Assets have shown a steady increase. Long Term Debt to Capitalization is budgeted to increase for FY2019 Budget; the hospital has had multiple CONs approved in the past year which may account for this change.

**QUESTIONS:** Please explain whether the CONs approved in the past year and/or other factors account for the increase in Long Term Debt to Capitalization.

Fiscal Year 2019 Budget Analysis		Rutland Regional Medical Center												
CAPITAL BUDGET	2015A	FY2016A	FY2017A	FY2018B		FY2018P		FY2019B	2020 Plan	2021 Plan	2	2022 Plan		
Non-Certificate of Need Capital Plans Total Certificate of Need Capital Plans				\$ 15,190,782 \$ 24,532,665	\$ \$	12,052,650 26,724,165	\$ \$	16,707,852 13,026,998			\$ \$	4,835,249 -		
Total Capital Purchases				\$ 39,723,447	\$	38,776,815	\$	29,734,850	\$ 27,939,442	\$ 6,031,000	\$	4,835,249		
Rutland Regional Medical Center														
Age of Plant	11.5	11.8	13.3	14.7		14.9		15.1						
Capital Expenditures to Depreciation	102.2%	113.3%	58.8%	119.3%		98.5%		129.5%						
Capital Cost % of Total Expense	6.1%	6.3%	5.7%	5.6%		5.1%		5.4%						
Benchmarks-Vermont System Averages														
Age of Plant	11.4	11.8	12.5	13.0		13.2		13.5						
Capital Expenditures to Depreciation				116.6%		116.5%		145.7%						
Capital Cost % of Total Expense				5.3%		5.3%		5.0%						

<u>OBSERVATIONS:</u> See the hospital's narrative for planned CONs. Non-CON Capital Plans include FCC waiting room expansion, AHU-3 and window replacements. The hospital's age of plant is higher than the Vermont System Average but Capital Expenditures to Depreciation is lower than the Vermont System Average. Capital Cost % of Total Expense is increasing due to approved CON costs included in the budget.