

## Southwestern Vermont Medical Center

# May 5, 2016



## **Todays Presentation**

- SVMC's Service Area
- SVMC's Revenue Budget
  - FY 2015
  - FY 2016
  - FY 2017



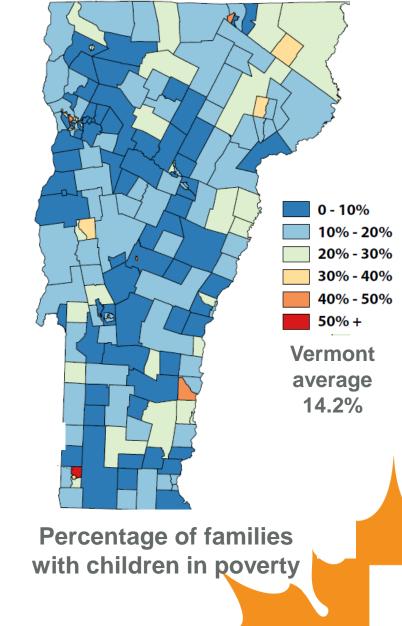
## Bennington: Region in Crisis



#### Extreme Poverty

- 1 in 3 children live in poverty
- 81% of children on free/reduced lunch
- Average wages at 75% Vermont average
- Bennington's household income ranks 188 out of 282
   Vermont towns
- 900 net jobs lost since 2006
- 45 net business closures since 2006

Bennington is an outlier in Vermont

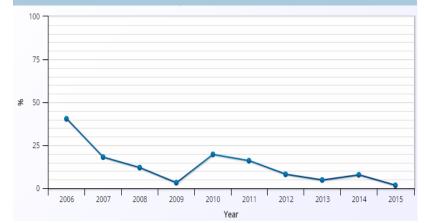


#### Education System

- 2 out of 3 children attend a failing elementary school
- 30% of 5<sup>th</sup> grades are proficient in writing
- Less than 30% of 11<sup>th</sup> graders are proficient in math or science
- 38% higher teen pregnancy rate than across Vermont

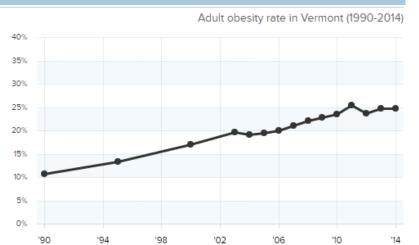
Bennington needs economic and educational intervention

## Bennington's Elementary School ranking compared to other schools in Vermont



#### Bennington Health Status

- 60% of adults are overweight or obese
- 11% diagnosed with diabetes
- 25% are regular smokers
- 35% of moms smoked during pregnancy
- 18% had at least one tooth removed due to decay
- 20% of middle school students have dental decay
- 56% of motor vehicle deaths related to alcohol
- Drinking water contamination (PFDA) in three communities
- Opioid epidemic 300% increase in treatment volumes



#### **Adult Obesity Rate in Vermont**



#### SVMC supports safety net providers

- Approx. 50% region's residents visit SVMC's Primary Care
- Addressing primary care shortage in Hoosick Falls
- New primary care sites:
  - Pownal
  - ExpressCare
  - Battenkill Valley FQHC (financial support)
- Financial support to Bennington Free Clinic
- Others (Confidential)

SVMC is the largest employer in the region and with a median wage above region's average



Bennington Free Clinic

## **Build Healthcare System of the Future**

#### Focus on Population Health

- Bennington Redevelopment
- Healthy Home Ownership Project
- Partnering with Dartmouth-Hitchcock Health
- Project Catalyst
- Partnering with Designated Agency
- Safe Arms
- Partnership with Department of Health for PFOA testing
- Transitional Care Nurses
- Dental Services
- Community Coalitions

If not us, then who?

#### Addressing the Social Determinants of Health (SDOH)



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## Southwestern Vermont Medical Center

## FY 2015 Patient Revenue Variance

## Purpose of Revenue Variance Presentation

- Provide the GMCB and with an understanding of SVMC's excess FY 2015 revenues over the approved budget:
  - Provide an understanding of SVMC's actual revenues;
  - Physician Practices and Primary Care;
  - Reduction of inpatient revenues;
  - Significant outpatient changes;
  - Changes in Bad Debt and Charity Care;
  - Unusual and non-reoccurring transactions;
  - Summary of FY 2015 revenue variances;
- FY 2016 and FY 2017 Budget
  - NPSR exceeding budget through March 2016;

## <u>SVMC Net Patient Revenue Variance</u> <u>FY – 2015</u>

Budgeted Patient Revenues \$139,041,542

Actual Patient Revenues

142,769,168

Difference

\$3,727,626

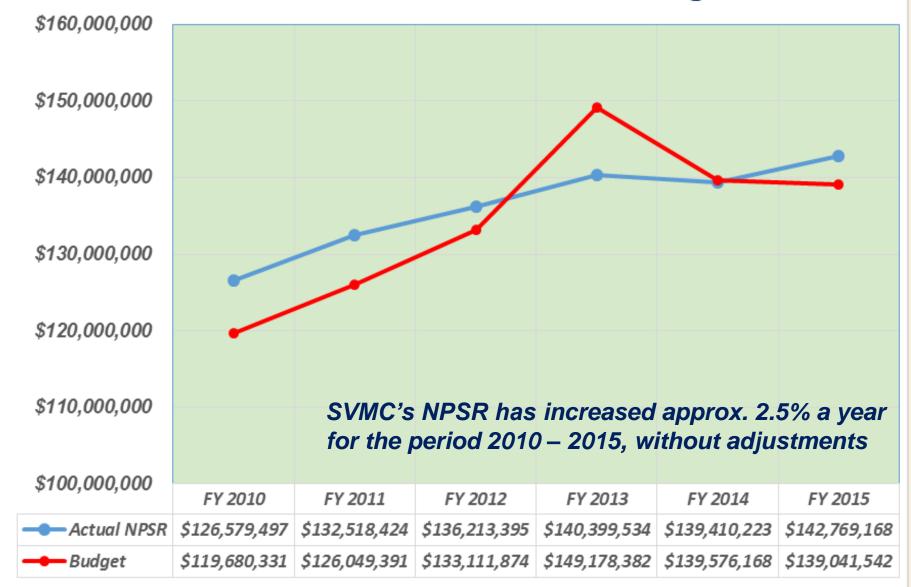
\$3,032,418

Percentage Difference

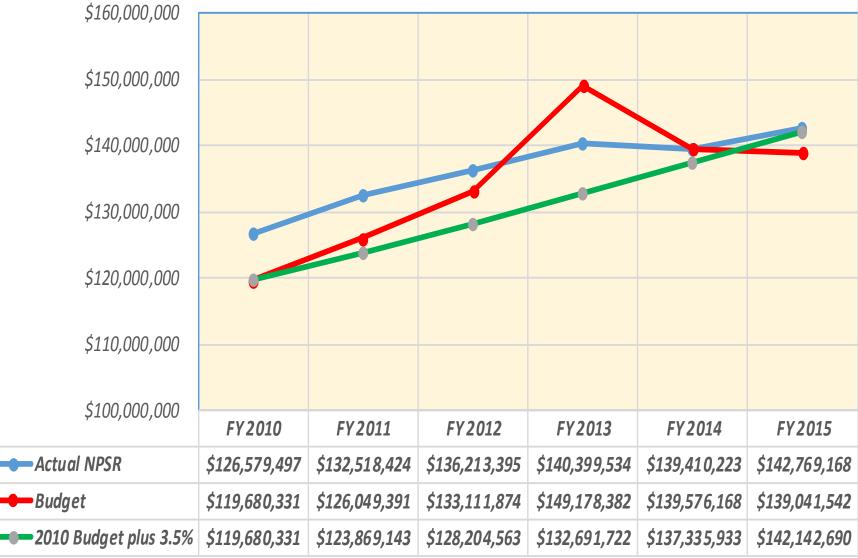
2.68%

**Overage -- 2.18%** 

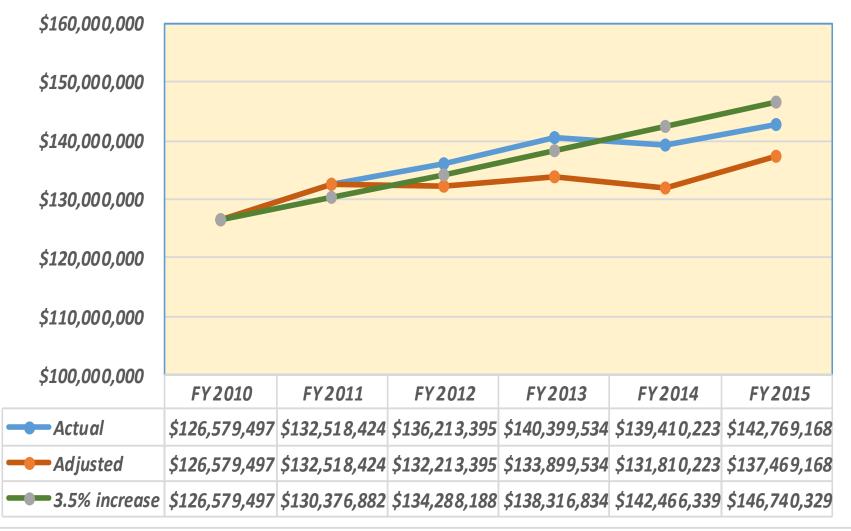
#### SVMC Net Patient Service Revenue 2010 -2015 Actual To Budget

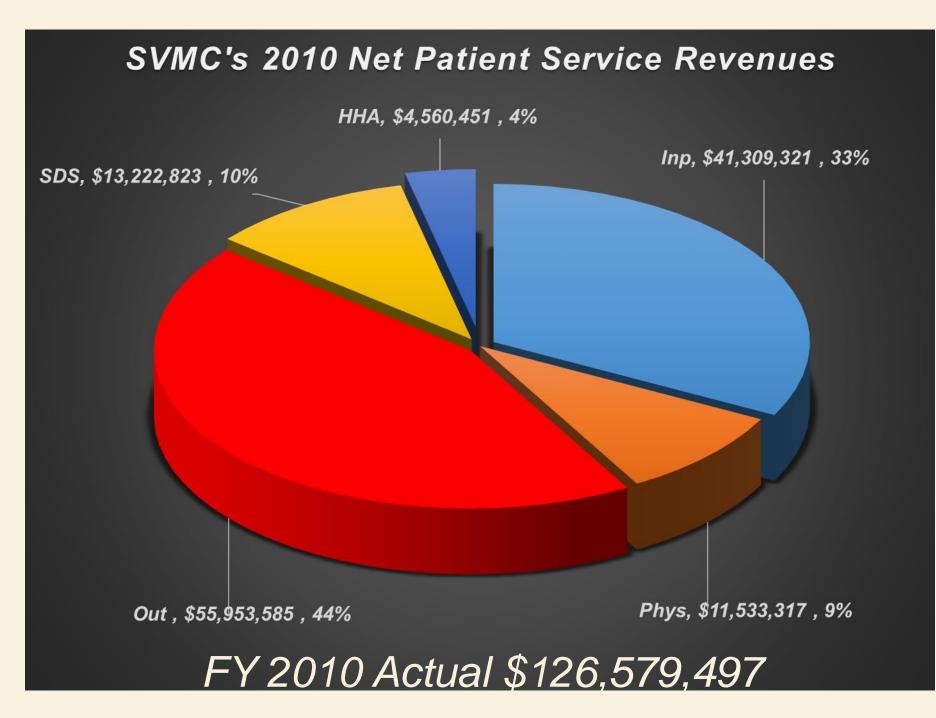


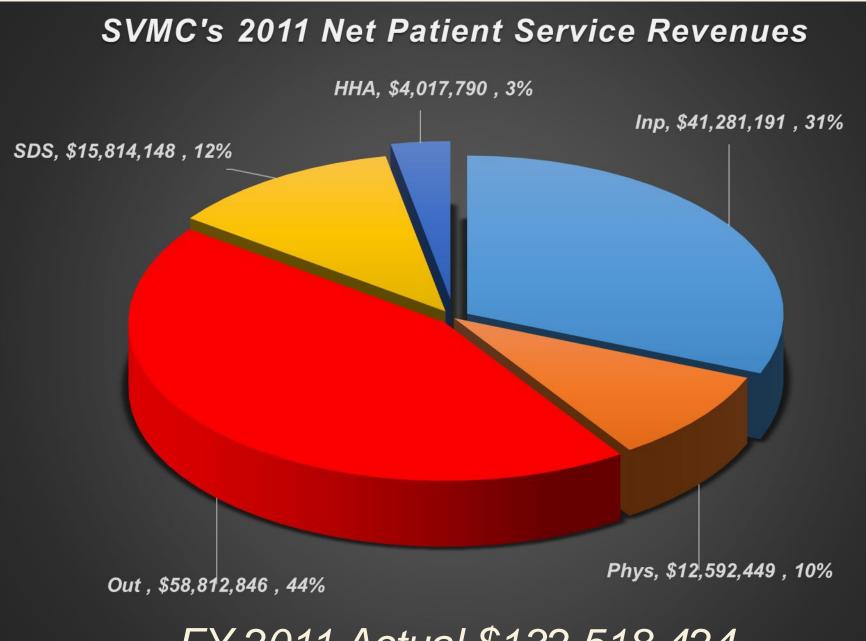
#### 2010-2015 Actual to Budget with 3.5% Trendline on Budget with no adjustments



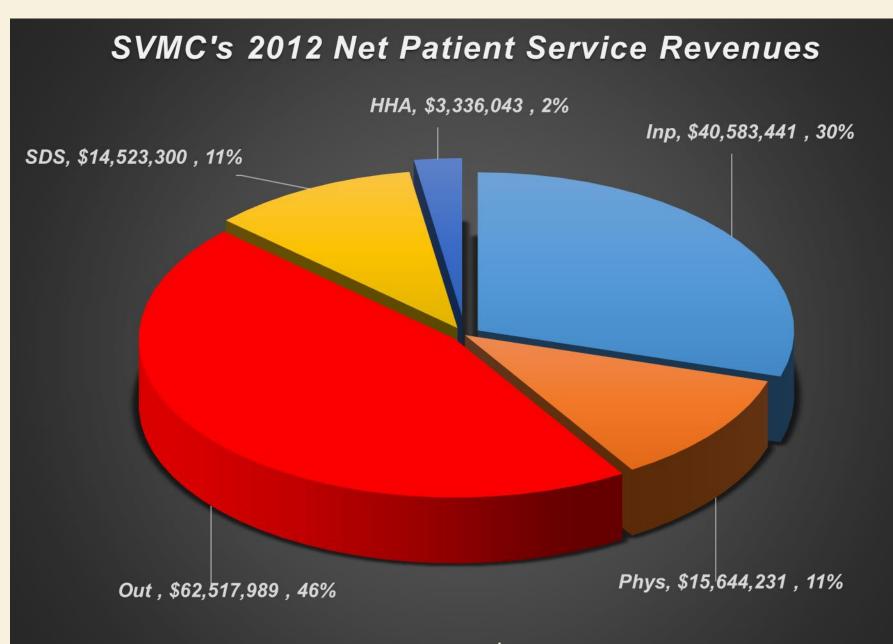
# Actual revenues vs. Revenues less added services vs. 3.5% Trendline on Actual



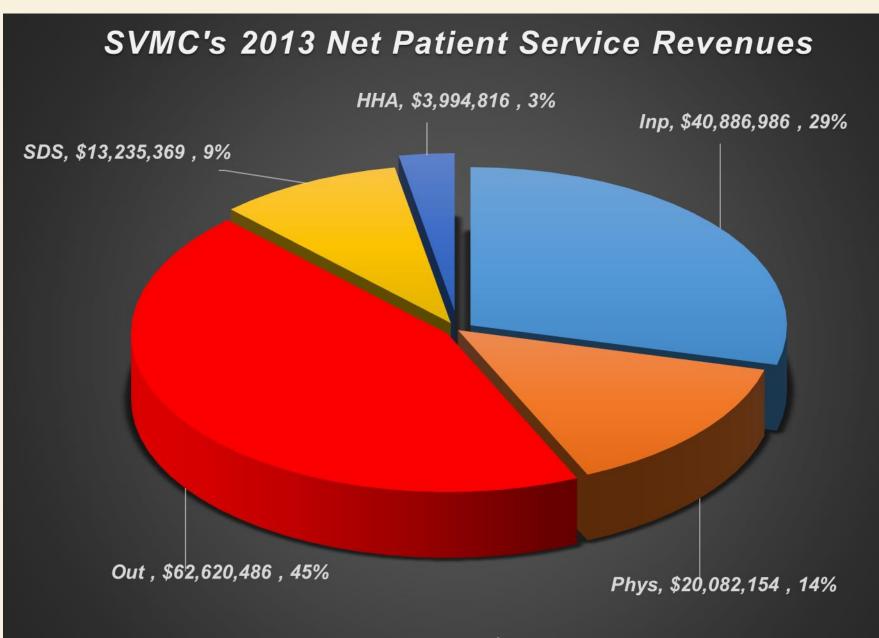




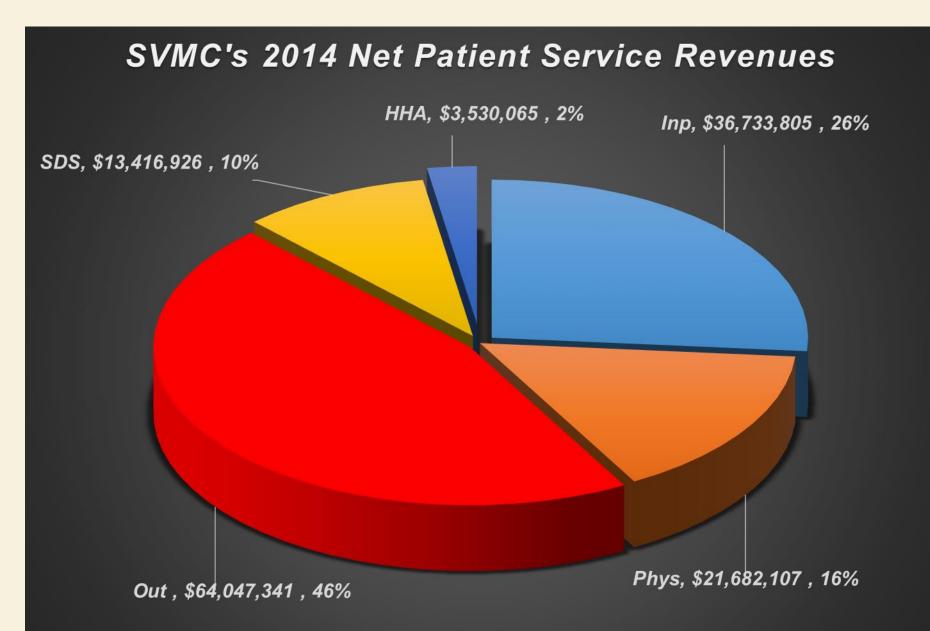
<u>FY 2011 Actual \$132,518,424</u>



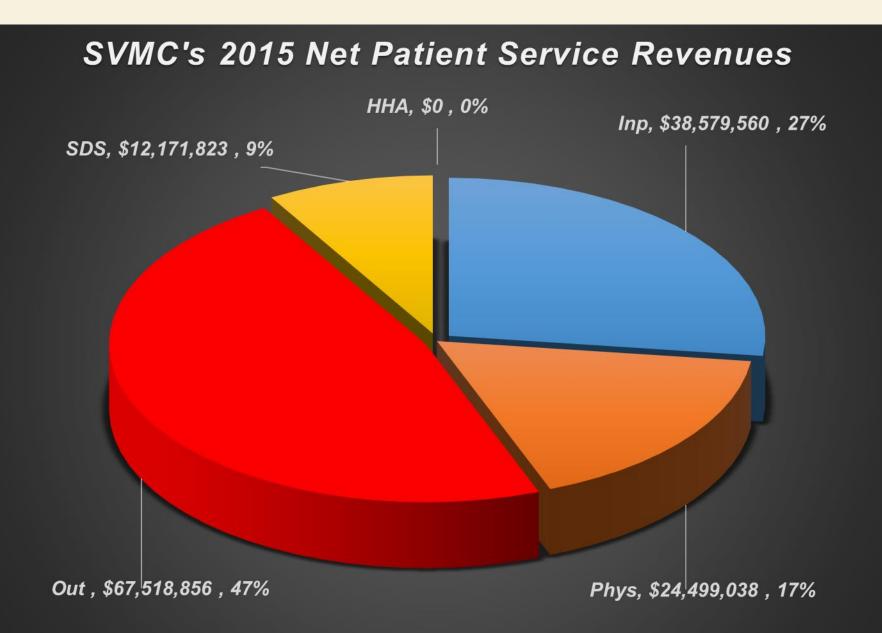
### FY2012 Actual \$136,213,395



FY 2013 Actual \$140,399,534



### FY 2014 Actual \$139,410,223



### FY 2015 Actual \$142,769,168

#### SVMC's 2015 Net Patient Service Revenues

HHA, \$0,0%

SDS, \$12,171,823 , 9%

Increase due to Medicare Sole Community Hospital enhanced reimbursement, not volumes

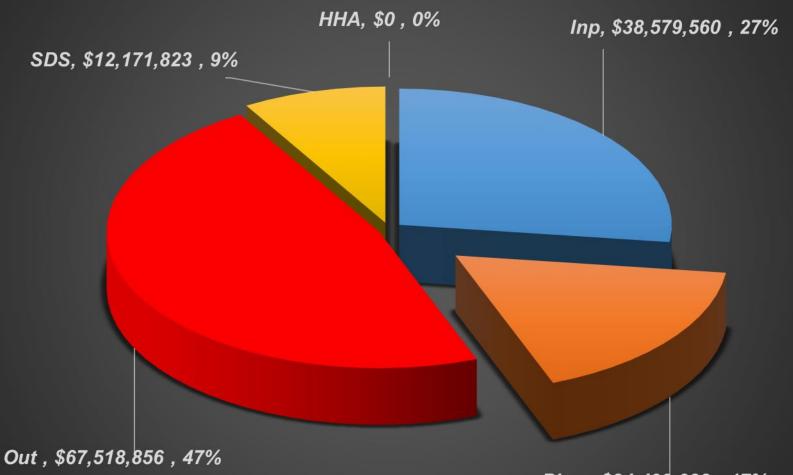
Inp, \$38,579,560, 27%

Out, \$67, 518,856, 47%

Phys, \$24,499,038 , 17%

FY 2015 Actual \$142,769,168

#### SVMC's 2015 Net Patient Service Revenues



Phys, \$24,499,038 , 17%

## <u>FY 2015 Actual \$142,769,168</u>

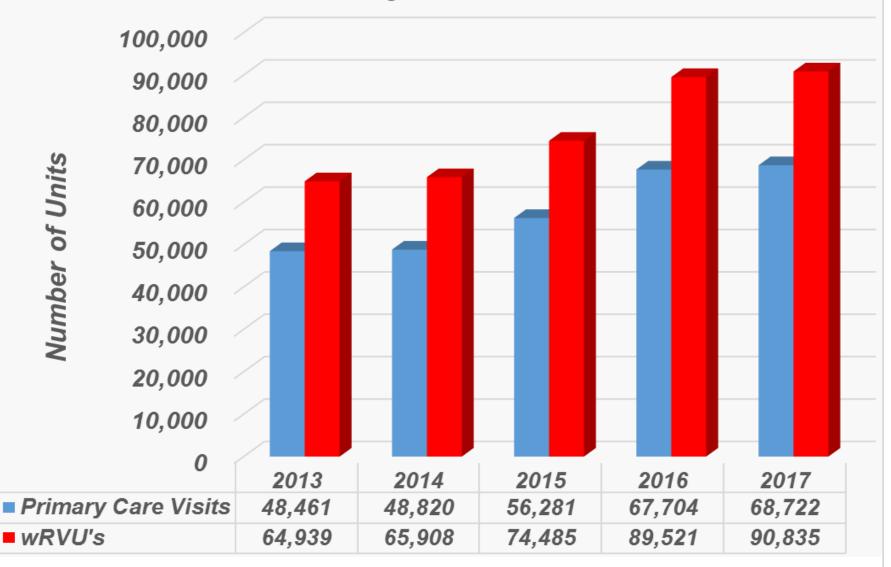
### Physician Practices (exc Hospital Based Physicians)

 Physician Practices revenues have grown from \$11.5 million to nearly \$25.5 million (FY 2010 to FY 2015):

New Practices and Activities:

2012 – 2015 increased Primary Care;
2012 Orthopedics (added) -- \$4 million annually;
2013 Cardiology (added) -- \$2.5 million annually;
2014 Dermatology (replaced) -- \$1.1 million annually;
2015 ExpressCare (added) -- \$650,000 in FY 2015 projected to be \$1 million + in FY 2016 and 2017
2015 Pulmonology (added) -- \$600,000 annually;
2015 Medicaid Provider Based Billing (new) -- \$2 mil.;
2016 Pownal Primary Care Campus (new) -- \$1 million.

#### SVMC Primary Care , Actual and Projected 2013 -- 2017



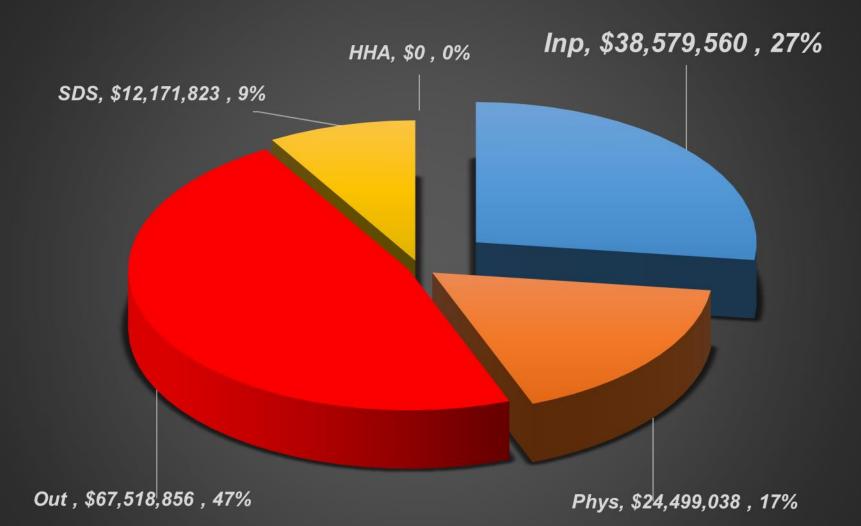
## **Physician Practices** (exc Hospital Based Physicians)

- Primary Care Development
  - Management's focus is to develop a primary care network in the region:
  - Region includes:
    - Southwestern Vermont;
    - Northwestern MA (12 miles);
    - Eastern NY (5 miles);
  - Barriers:
    - Recruitment of Physician and Assoc. Providers;
    - Need for capital and costs associated with Practice Management;
    - New York and MA regulations

# **Physician Practice Questions**

# **On to Inpatient Services**

#### SVMC's 2015 Net Patient Service Revenues

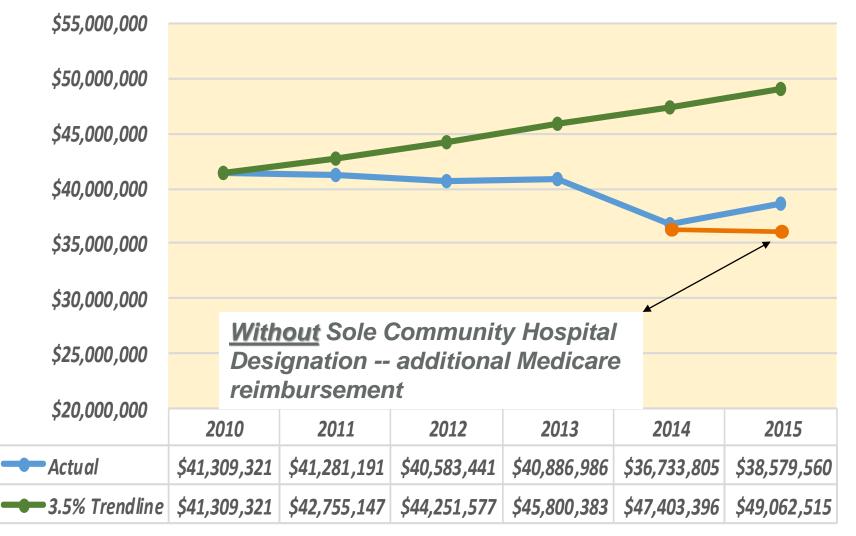


FY 2015 Actual \$142,769,168

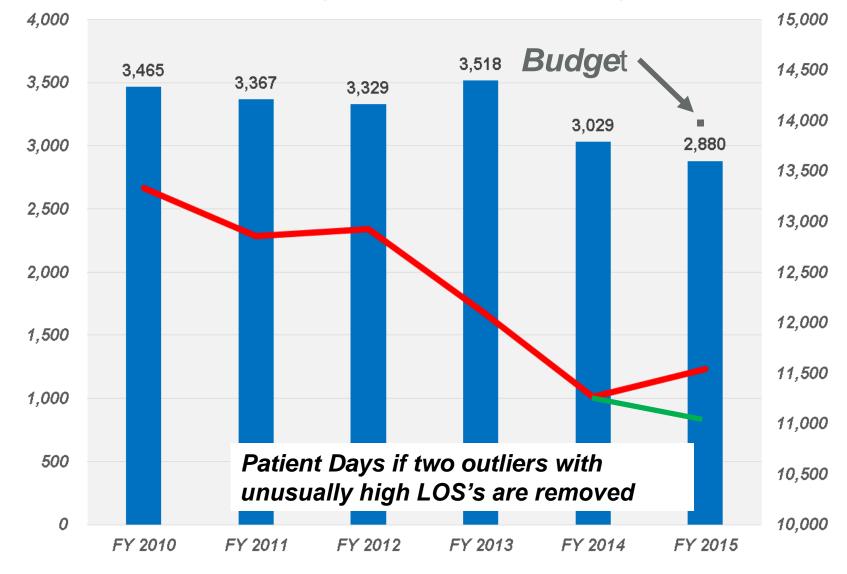
#### Inpatient – NPSR (<u>inc.</u> Hospital Based Physicians)

	Actual	Change	% of Change	
FY 2010 (33%)	\$41,309,321			
FY 2011 (31%)	\$41,281,191	(\$28,130)	-0.07%	
FY 2012 (30%)	\$40,583,441	(\$697,750)	-1.69%	
FY 2013 (29%)	\$40,886,986	\$303,545	0.75%	
FY 2014 (26%)	\$36,733,805	(\$4,153,181)	-10.16%	
FY 2015 (27%)	\$38,579,560	\$1,845,755	5.02%	

# Actual Inpatient Revenues 2010 - 2015 with a 3.5% trendline from 2010



#### SVMC Medical Surigical Volumes 2010 -- 2015 Discharges and Patient Days



M&S Discharges — Patient Days

Discharges

#### **Inpatient -- NPSR** (<u>inc.</u> Hospital Based Physicians)

- Inpatient volumes / revenues have declined:
  - FY 2010 to FY 2015 discharges / patient days have declined <u>16.8%</u> and <u>13.4%</u>, respectively;
  - Inpatient revenues as a portion of NPSR has declined from \$41,309,321 or 33% in FY 2010 to \$38,579,560 or 27%.
    - In FY 2015 SVMC received Sole Community Hospital Status which added over \$2 million of revenues over Medicare Dependent Hospital Status reimbursement.
  - Volume declines due to:
    - Shifting of services to outpatient;
    - Increased primary care/preventive care;
    - Reduced readmission rates;
    - Transitional care nurse program;
    - Outmigration of some services.

# **Inpatient Questions**

# **On to Outpatient Services**

# Outpatient Services -unbudgeted activity

## <u>Medical Oncology</u>

- FY 2015 SVMC budgeted an increase in the Oncology service revenues of 3%:
- In FY 2015:
  - Patients increased by 5%;
  - Pharmaceuticals infusions increased by 17%;
  - Visits per patient increased from 8.17 to 9.09 visits;
  - Costs of pharmaceuticals for these patients increased by over \$1.3 million;
  - Revenue per visit increased 2.5%;
  - Revenue increased by \$1.8 million over budget;

## Outpatient Medical Oncology Services

	Patients	Patient Visits with Pharm	Gross Charges	NPSR	NPSR Per Visit	% Change
FY 2013	401	3,136	\$18,090,933	\$9,308,046	\$2,968	
FY 2014	353	2,884	\$19,559,730	\$9,158,066	\$3,175	6.97%
FY 2015	371	3,371	\$24,029,948	\$10,977,778	\$3,256	2.55%

Increase of nearly \$1.8 million in NPSR

## **Outpatient "Tick Test"**

	Tick Tesing Non Lyme	Gross Charges	NPSR	NPSR Per Visit	% Change
FY 2013	175	\$48,141	\$14,259	\$81	
FY 2014	622	\$94,808	\$52,596	\$85	<b>4.94%</b>
FY 2015	2,582	\$650,254	\$324,213	\$126	48.50%

Increase of nearly \$275,000 in NPSR

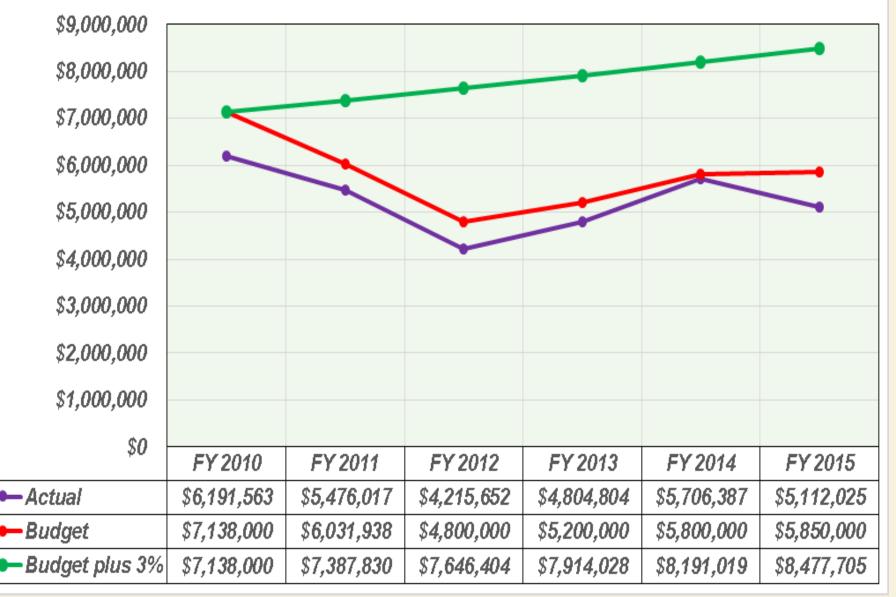
# **Other Outpatient Services**

- Outpatient surgery variance 154 cases under budget – causing a negative variance of \$800,000;
  - Outmigration of Ortho cases due to in ability to recruit and MD's retiring or leaving the service area;
  - All other specialties on target.
- Emergency room visits higher then budget causing a positive variance of approx. \$900,000:
  - Developing the FY 2015 budget with the opening of ExpressCare the assumption was that ER visits would be reduced approx. 1,000 visits. <u>That did not occur</u>.

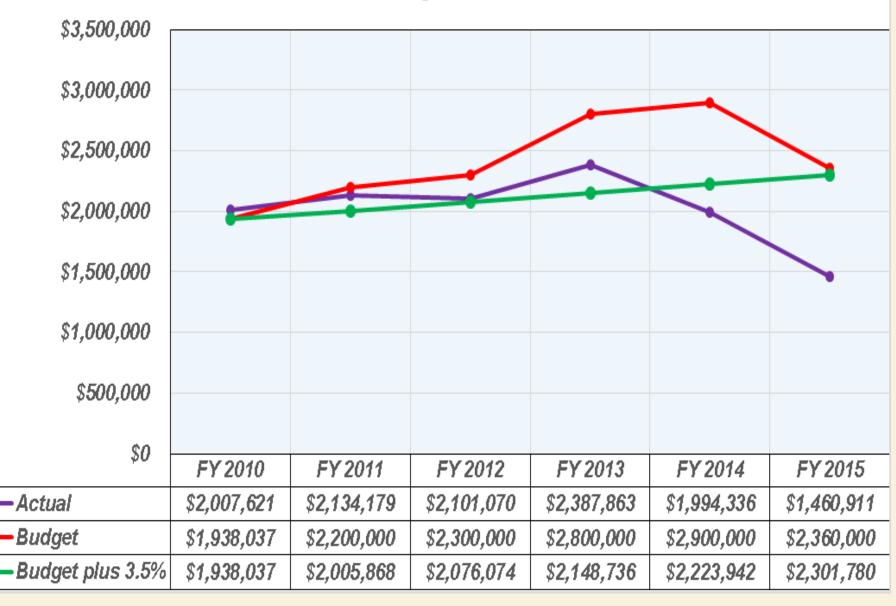
### **Outpatient Questions**

### **On to Bad Debt and Charity Care**

#### SVMC Bad Debt Expense 2010 -- 2015 Actual to Budget with 3.5% Trendline



#### SVMC Charity Care 2010 -- 2015 Actual to Budget with 3.5% Trendline



#### **Bad Debt and Charity Care**

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	Bad debt amounts	Charity care	Total accounts	% to total accounts
FY 2013	6,023	4,465	10,488	6.16%
FY 2014	7,095	4,028	11,123	6.37%
FY 2015	6,357	3,830	10,187	5.04%
	Bad debt amounts	Charity care	Total dollars	% of NPSR
FY 2013	\$4,804,804	\$2,387,863	\$7,192,667	5.1%
FY 2014	\$5,706,387	\$1,994,336	\$7,700,723	5.5%
FY 2015 B	\$5,850,000	\$2,360,000	\$8,210,000	5.9%
FY 2015 A	\$5,112,025	\$1,236,277	\$6.348.302	4.4%

### **Bad Debt and Charity Care**

- GMCB reports Bad Debt and Charity Care as a percentage of Gross Charge Revenues:
  - FY 2014 VT hospitals 3.3%
  - FY 2014 SVMC 2.7%
  - FY 2015 VT hospitals 2.8%
  - FY 2015 SVMC 2.1%
- Bad Debt and Charity Care as a percentage of NPSR:
  - FY 2014 VT hospitals 5.3%
  - FY 2014 SVMC 5.9%
  - FY 2015 VT hospitals 4.3%
  - FY 2015 SVMC 4.4%

# Bad Debt / Charity Care Questions

## On to Non-recurring transactions / Unbudgeted Items

## Unusual and nonreoccurring transactions

- 1. Medicaid provider based billing -- \$2 million+;
- 2. Sole community hospital -- \$2 million+;
- 3. Medicare RAC Settlement -- \$660,000:
  - a) In FY 2014, CMS offered Hospital's a settlement on cases in appeal status;
  - b) SVMC had over \$1 million of claims in appeal status;
  - c) SVMC accepted the settlement of \$660,000;
    - a) Eliminated between \$100,000 to \$200,000 of expenses;
    - b) Would take several years to resolve.
- 4. One Care Savings CY 2014 -- \$242,000

## **Non-recurring Questions**

## On to 2015 Summary

### **SVMC FY 2015 NPSR Variance Schedule**

	Volume	Rate
Inpatient / Observation	(\$3,100,000)	\$2,007,000
Outpatient		
Oncology	1,527,000	273,000
Lab"Tick-borne"	275,000	
ER	900,000	
SDS	(800,000)	
All other OP (1)	(806,000)	
Physician Practices	(1,325,000)	2,012,000
Non-recurring		
Medicare RAC		660,000
OneCare		242,000
Bad Debt / Charity Care	388,000	1,474,000
Total variance	<u>\$3,727,000</u>	

(1) All the dollars were labeled volume for this schedule

### **Questions on FY 2015**

#### FY 2016 and FY 2017

### FY 2016 / FY 2017 Budget

- Continued growth of the Medical Oncology patients;
- Continued growth of the "Tick Borne" testing;
- Rebuilding of the Ortho Practice in partnership with DH;
- Primary Care:
  - Need for continued growth;
  - NYS and Hoosick Falls;
  - Preventive care Colonoscopy backlog;
- Non-recurring transaction on an low volume appeal SVMC filed related to <u>2010</u>, for slightly over \$2 million;

#### Questions

#### and

### Thank you for your time!