

Salary Information

Compensation Tables:

UVM Medical Center

Provide Headcount & Box 5 Wages from 2017 W2s			Employer Portion (allocation method allowed):	
Salary Range	Total # of Staff	Total Salaries (includes incentives, bonuses, severance, CTO, etc.)	Health Insurance Coverage	Retirement Contributions
\$0 - \$199,999	8336	392,455,509	52,377,338	27,069,871
\$200,000 - \$299,999	29	6,551,361	287,001	546,575
\$300,000 - \$499,999	24	9,023,407	248,716	516,789
\$500,000 - \$999,999	10	6,731,280	97,776	219,932
\$1,000,000 +	2	2,845,895	27,389	56,700

Central Vermont Medical Center

Provide Headcount & Box 5 Wages from 2017 W2s			Employer Portion (allocation method allowed):	
Salary Range	Total # of Staff	Total Salaries (includes incentives, bonuses, severance, CTO, etc.)	Health Insurance Coverage	Retirement Contributions
\$0 - \$199,999	1969	82,698,968	11,892,715	3,468,497
\$200,000 - \$299,999	51	12,734,454	718,751	535,190
\$300,000 - \$499,999	13	4,423,235	212,360	148,310
\$500,000 - \$999,999	3	1,670,832	11,171	56,016
\$1,000,000 +	0	-	-	0

Porter Hospital

Headcount & Box 5 Wages from 2017 W2s			Employer Portion (utilized allocation method)	
Salary Range	Total # of Staff	Total Salaries (includes incentives, bonuses, severance, CTO, etc.)	Health Insurance (Fiscal Year)	Retirement Contributions (Fiscal Year)
\$0 - \$199,999	659	26,648,523.18	3,530,076.58	1,053,804.95
\$200,000 - \$299,999	21	5,033,515.15	666,779.69	199,048.30
\$300,000 - \$499,999	3	1,219,185.51	161,503.07	48,212.19
\$500,000 - \$999,999	2	1,208,794.06	160,126.53	47,801.27
\$1,000,000 +	-	-	-	-

Compensation Policies: The UVM Health Network's Executive Compensation Philosophy is included at Attachment D. It applies to executives (SVP/VP) at all UVM Health Network

hospitals. The individual Network hospitals currently have their own compensation philosophies for various other categories of employees. The UVM Health Network is in the process of evaluating compensation policies across the Network and rationalizing them to ensure that its hospitals continue to attract and retain the skilled workforce necessary to provide high-quality and high-value care.

Benchmarking: The Network uses Integrated Healthcare Strategies/Gallagher as its consultant for benchmarking executive positions. The list of peers used by the Network and its compensation consultants to benchmark executive compensation is also included at Attachment D. For professional and clinical positions, it looks at regional data generally in the Northeast and New England but tries to avoid data from Boston/Massachusetts and Southern New England data.

When setting base pay for executives, the UVM Health Network targets the market median (50th percentile) rate. The actual base pay for executives is currently, on average, 6% over the market median. When setting total direct compensation (base pay + variable pay) for executives, the UVM Medical Center targets the market 65th percentile. The actual total direct compensation for executives is currently, on average, 3.3% over that target.

The UVM Medical Center occasionally uses Integrated Healthcare Strategies/Gallagher to benchmark Director level roles, but the rest are done in-house using over 15 market surveys and utilizing a software called Payfactors which aggregates all the survey data. For non-executive pay, the UVM Medical Center targets the market median (50th percentile). According to the latest available data sources, compensation for non-executive staff is 4.4% over the market median.

For physician total compensation (base pay + variable pay), the UVM Health Network Medical Group currently targets the 45th percentile of a blended all practice benchmark (Medical Group Management Association) plus a pure academic benchmark (American Association of Medical Colleges). Using just the academic (AAMC) benchmark, the target is the 60th percentile. The Medical Group expects to achieve that target this year. In the coming years, it expects to grow to the 50th percentile of the blended benchmark and the 65th percentile of the academic benchmark.

Central Vermont Medical Center and Porter Hospital have historically used their own outside consultants and peer group data to analyze and benchmark compensation for non-executive and provider employees. They, too, have normally targeted the mid-point of relevant peer groups. As with their compensation policies, the individual hospitals' benchmarking processes are in the process of being evaluated and rationalized across the UVM Health Network, with the goal of ensuring compensation that allows the hospitals to attract and retain the workforce necessary to provide our patients with the highest quality care and to promote success under a value-based payment model.