

Schedule A

Notice of Provider Practice Transfer/Acquisition

Please submit information 30 days prior to the effective date of the transfer/acquisition.

Hospital Name: Northwestern Medical Center
Provider Practice Name: Neurology (not a distinct physician practice, but rather a part-time service offered through UVM at NMC)
Provider Practice Location (prior to acquisition): N/A
Effective Date of transfer/acquisition: 9/24/2020

Please briefly describe the need for this transfer/acquisition, including whether the hospital-based service:

- The need for this transfer/acquisition
- Plans to provide the newly acquired service at the same, or decreased cost, as the independent service
- Does the hospital expect service levels to maintain

This reflects the discontinuation of Neurology services provided through a contracted UVM physician at NMC.

For transfers/acquisitions with an effective date between:

October 1 - May 1: Please complete both Section One and Section Two.

May 2 - September 30: Please complete Section One only and include as part of your annual budget submission. Please remember to include information about this transfer/acquisition in the hospital's budget narrative.

SECTION ONE: Acquired Practice Budget

Complete Section One for any transfer/acquisition, regardless of effective date.

	A	B	C
	Prior Year Fiscal Year	Current Fiscal Year Projection	Next Fiscal Year (annualized)
Gross Patient Care Revenue	\$	279,533	\$ -
Deductions from Revenue	\$	158,400	\$ -
Net Patient Revenue - Physician	\$	121,133	\$ -
Provider Salaries	\$	64,513	\$ -
Provider Fringe Benefits	\$	-	\$ -
Staff Wages & Benefits (Non MD)	\$	60,285	\$ -
Malpractice	\$	-	\$ -
Depreciation/Amortization	\$	-	\$ -
Rent	\$	-	\$ -
Billing Service	\$	-	\$ -
Medical/Surgical Supplies	\$	-	\$ -
Other Costs	\$	72,950	\$ -
Total Operating Expense	\$ -	\$ 197,748	\$ -
Net Operating Income/Loss	\$ -	\$ (76,615)	\$ -

Relative Value - Units of Service	1,445	
Total Provider FTEs Acquired/Transferred	0	0
Total Non- Provider FTEs Acquired/Transferred	0.8	

A: The operations of the practice for the previous fiscal year (if available)

B: The operations of the practice for the projected fiscal year

C: The operations of the practice for the upcoming fiscal year

SECTION TWO: Hospital Budget

Only for off-cycle transfers/acquisitions with effective dates between October 1 and May 1.

	Prior Year Fiscal Year	Current Fiscal Year	Partial Current Year	Current Year	% Change from
	Actual	Approved Budget	Projections (from Section One)	Budget Including Change	Approved Budget
NPR and FPP				\$ -	#DIV/0!
Other Operating Revenue				\$0	#DIV/0!
Total Operating Revenue		\$ -		\$0	#DIV/0!
Total Operating Expenses				\$0	#DIV/0!
Net Operating Income (Loss)		\$0		\$0	
Non-Operating Revenue			\$ -	\$ -	0.0%
Excess (Deficit) of Revenue or Expense	\$ -	\$ -	\$ -	\$ -	0.0%