

DELIVERED ELECTRONICALLY

January 25, 2024

Mr. Eric Miller, Sr. VP and General Counsel
The University of Vermont Medical Center
462 Shelburne Road, Suite 301
Burlington, VT 05401

RE: Docket No. GMCB-004-23con, Development of Outpatient Surgery Center on Tilley Drive, Project Cost: \$129,640,703

Dear Mr. Miller:

Thank you for your response to the most recent set of questions. In order for the Board to complete their review of your application, please provide the following:

1. Explain the methodology behind the Sg2 inputs that were incorporated into UVMMC’s demand model, including listing the impact factors and how each affects the demand forecast for this particular project.
2. Fill in the table below with Chittenden County resident population actuals/projections. Highlight in yellow all projections.

CY	Under Age 65		65 and Older	
	Public Opinion Strategies	Claritas	Public Opinion Strategies	Claritas
2019				
2020				
2021				
2022				
2023				



2024				
2025				
2026				
2027				
2028				
2029				

3. Revise the attached Excel Workbook [“20231116_UVMMC SURGICAL CASE CAPACITY AND VOLUME PROJECTIONS MODEL final”] from Q006, question 2 as follows:
 - a. Align the inpatient and outpatient surgical case counts in Table 2 with Claritas population estimates from question 1 above.
 - b. Refine the input “Number of Rooms” in Table 1a and Table 3 to reflect year-to-year changes to the number of available rooms.
 - c. Adjust the following inputs in Table 1a and Table 3 to reflect productivity changes, if any, after the OSC becomes operational: Turnover Time (OP) in Hours, Turnover Time (IP) in Hours, Average Length of Surgery (OP) in Hours, and Average Length of Surgery (IP) in Hours.

NOTE: Use the revised workbook in responding to all remaining questions below, where applicable.

4. Given the data provided in response to Q008, question 5, explain in more detail whether there are further efficiencies, reductions in turnover times, improved scheduling, etc. that would result in accommodating more surgeries with the existing ORs.
5. Identify the current share of total cases that are emergent and explain whether UVMMC expects the share of the total cases that are emergent to change between 2025 and 2029.
6. For each year from 2019 through the present, describe the history of opening and closing the five ORs at Fanny Allen. If all five ORs are not being used now, explain why not.
7. With existing high inpatient occupancy rates, explain how UVMMC will be able to ensure the availability of inpatient beds needed to accommodate the increased volume of inpatients before and after surgery. Detail how UVMMC will ensure its ability to accommodate the number of surgical inpatients and whether UVMMC plans to block off beds for the volume of inpatient surgeries projected. Additionally, explain whether there is sufficient pre- and post-op space in the 20 ORs on the main campus to accommodate



the increase in projected inpatient volumes. Explain how UVMMC will ensure that the pre-and post-op spaces will be sufficient.

8. Given UVMMC's projections for increases in surgeries, please specify the daily increase in the number of surgeries that will be performed in both the inpatient setting on UVMMC's main campus and at the proposed outpatient surgery center. Please show calculations.
9. In response to Q002, question 11, UVMMC discussed a facility fee reimbursement reduction of 60% for Medicare patients to reflect a shift away from HOPD billing. Was a similar facility fee reimbursement adjustment made for any other payers? If yes, describe the adjustment made for each payer and provide the adjustment amount by payer. If no, describe in detail why UVMMC did not apply a reduction for other payers.
10. Provide revenue-by-payer assumptions broken down by setting (inpatient, outpatient, professional, other) and revenue driver (rate, utilization, payer mix) using the attached worksheet. ["240112 CON_RevenueBreakdown"]
11. If UVMMC's current outpatient surgical cases from Franklin County were performed in the open capacity of operating rooms at Northwestern Medical Center (NMC), explain the extent to which that would reduce the number of new operating rooms required with this project.
12. Please confirm that UVMMC does not have a strategic intention to draw any additional surgery volume away from Copley or NMC, whether that be in orthopedics, general surgery, urology, ophthalmology, podiatry, etc.
13. In a table format, provide the total operating room capacity, capacity used, and excess capacity broken out by inpatient and outpatient for each facility in UVMHN's system (including Vermont and New York network hospitals) for FY 2019, 2020, 2021, 2022 and 2023. Describe in detail the manner in which the Network seeks to maximize the use of available ORs at its Network hospitals.

In responding to the questions, please restate the question in bold font and respond in unbolded font. Send an electronic copy to me at donna.jerry@vermont.gov and one hard copy (three-hole punched) with a Verification Under Oath to my attention at the Green Mountain Care Board, 1 National Life-Davis 3, Montpelier, Vermont 05633.

If you have any questions, please do not hesitate to contact me at 802-760-8162.

Sincerely,

s/ Donna Jerry
Senior Health Policy Analyst



Green Mountain Care Board

cc. Laura Beliveau, Staff Attorney, GMCB

