
DELIVERED ELECTRONICALLY

March 12, 2024

James Trimarchi, Director of Planning
Southwestern Vermont Medical Center
100 Hospital Drive
Bennington, VT 05201

RE: Docket No. GMCB-014-23con, Development of an Inpatient Mental Health Unit for Adolescents, Cost: \$9,543,006

Dear Mr. Trimarchi:

Thank you for the application received on February 28, 2024. Our consulting architect is reviewing all architectural information submitted. Architectural questions will be sent under separate cover. Please respond to the following:

1. Statutory Criterion 2(i) requires the applicant to address the financial implications of the project on hospitals and other clinical settings. On page 35 of the application, it is stated: “However, there is recognition that launching the unit at SVMC will not be without negative impact on the Brattleboro Retreat.” Please describe in detail the likely negative impacts on the Brattleboro Retreat’s programs for adolescents.
2. Explain in detail the similarity and differences, focus of services and programming, and ages of individuals to be served by SVMC’s new inpatient mental health unit relative to the Brattleboro Retreat’s program.
3. Explain in detail how SVMC will advertise and recruit for the required 44.1 FTE staff and 1.9 FTE physician staff noted in the Staffing Report, Table 8 and the list of staff noted on page 13 of the narrative application (including charge RNs, mental health technicians, mental health counselors, occupational therapists, unit coordinator, social work, nurse manager and providers from Dartmouth-Hitchcock) for weekday and weekend shifts. Of the total staff required, specify the number/percent of staff that will likely be travelers and those directly employed by SVMC for weekday and weekend shifts. If travelers are to be utilized, confirm whether the expenses associated with travelers are reflected in all affected financial tables. If not, please revise and resubmit all affected financial tables.



4. Explain in detail how SVMC will: (a) work with the Brattleboro Retreat to reduce possible negative impacts on its programs for adolescents; and (b) your intention for “collaborating with the Brattleboro Retreat on care plans for adolescents who previously received care at the other institution.” (See page 22 of application).
5. Confirm whether the anticipated payer mix for Medicaid is 78% or 75% and specify which percent is represented in the financial tables submitted with the application. If any financial tables and/or Assumptions are incorrect, please revise and resubmit all affected financial tables.
6. Confirm whether SVMC’s equity contribution is \$300,000 (as represented in the Balance Sheet Assumptions) or \$293,006 as represented in financial Table 2. If Table 2 and/or the P and L Assumptions are incorrect, please revise and resubmit the P and L Assumptions and/or Table 2 and all other affected financial tables.
7. Specify SVMC’s current Days Cash on Hand (specify date) and the amount of Days Cash on Hand with the equity contribution of \$293,006 or \$300,000 (whichever is the correct amount).

In responding, 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

