

Where People Come First

I. EXECUTIVE SUMMARY

Provide a high-level overview about key considerations for the proposed budget, highlighting any adjustments required to the budget reference year (FY22 actuals) Indicate areas where the proposed budget deviates from parameters specified in this Guidance.

For hospitals whose budget interacts with or includes other entities, explain any differences in what is happening at the hospital versus consolidated level.

About Us

Springfield Hospital is a Critical Access Hospital (CAH) with 25 Acute/Swing beds and 10 Mental Health beds. The Medical/Surgical/Observation unit is currently staffed for 15 beds and The Windham Center for Psychiatric Care is staffed for 10. Hospital utilization for fiscal year to date (FYTD) through May 2023 includes:

	Avg daily census for acute patients	6.8
		0.0
•	Avg daily census for swing patients	1.5
•	Avg daily census for psychiatric patients	7.2
•	Emergency visits/day	36.5
•	Surgery volume	601
•	Endoscopy	659
•	Pain Management (Service began Sept '22)	
	Clinic visits	240
	OR procedures	81
•	Specialty practice visits	12,451
•	Diagnostic Imaging Services	18,227
•	Physical Therapy	30,380

Springfield Hospital currently has 377 employees and is a major economic contributor in Springfield and the surrounding region.

Goals for FY24

In FY24, Springfield Hospital is focusing on continuing financial stabilization efforts and rebuilding volume. Our recent Community Health Needs Assessment identified access to primary care and specialty medical care services as a priority. Cost of insurance, healthcare and prescription drugs, and availability of services, were key barriers identified. Springfield Hospital

continues to work with Valley Health Connections and other community partners to inform the community regarding insurance and financial assistance options to help address the cost issue. Primary Care in the Springfield service area is provided by our local FQHC network (North Star Health), which has made significant progress in adding new medical staff to improve access to primary care. Springfield Hospital's availability of appointments for specialty care is prompt, so we are planning further research to probe more deeply into this area of concern to determine whether there are opportunities for new local services or other barriers that we need to explore further.

Primary Care Network Relationship Evolving:

Springfield Hospital does not own or control any primary care services. The hospital continues a strong working relationship with North Star Health (the local FQHC network formerly known as Springfield Medical Care Systems and the former parent corporation to Springfield Hospital) since the two organizations split into distinct corporations as part of a Chapter 11 reorganization in December 2020. As the relationship matures, and corporate processes and systems separate, we expect the need for the shared services agreement, in which we share staff and expenses, will continue to play a lesser role over time as each corporation redefines itself to best serve the needs of its patients. This natural progression is showing in our 'FY24 budget as we move our Technology Management team in house to focus on important hospital projects around security, interoperability, and efficient data and revenue capture. Other services migrating and evolving over time include quality, accounting, human resources, health information management and pharmacy.

Significant Changes

Comparing FY22 actuals to FY24 budget, some significant service changes have occurred that will have a positive impact on volume. We have added two full-time GYN providers, allowing us to provide services that previously were referred out of Springfield due to lack of physician coverage. Our Urology medical staff have increased days of service and capacity, and our Podiatrist is now full-time providing regular office hours, as well as visits to off-site locations. In addition, we expect to add two part-time General Surgeons and one part-time URO/GYN specialist in the first quarter of FY24. The combination of these efforts is designed to help us reduce unnecessary outmigration and overall health system costs while improving local access to care and long-term sustainability for Springfield Hospital.

We continue to offer oncology telemedicine services, and on-site infusion services. Cardiology services are temporarily on hold while we search to replace our cardiologist who has departed from the area.

We also expect to re-establish our Nuclear Medicine service once renovations and installation of the new equipment are complete -- anticipated for first quarter FY24.

Utilization (Attachment A)

Inpatient utilization anticipates increased discharges for surgical care patients as well as increased referrals for step-down care from tertiary facilities to swing beds. This transfer to local, less-expensive care is appropriate when it is safe to move patients closer to home to recuperate from complicated surgeries or intensive care. Our FYTD '23 projected is expected to finish the year below budget, so we have budgeted FY24 as flat from FY22 with an average daily census target of 7.9.

Recognizing demand for Psychiatric services, we are increasing the Psychiatric inpatient average daily census from 7.3 FY22 to 8.4 FY24.

Other projected increases in volume for FY24 include increasing Surgery cases (881 in FY23 projected to 1,197 in FY24) due to added Surgeons with a focus on GYN, Urology, Podiatry and General Surgery. Endoscopy procedures are anticipated to increase from 929 to 1,000. Nuclear Medicine procedures are a new budget item (390 procedures) due to new equipment installation. Increased outpatient visits are budgeted across the board, and include major increases in General Surgery (1,000 visits FY24) due to new surgeons, and Gynecology (2,500 visits FY24) due to adding two full-time Gynecologists. (Further detail in Attachment A.)

Emergency Room visits have been budgeted with only a very slight increase as we continue our ACO work and our collaborative efforts with North Star Health, the local FQHC primary care network, to increase primary care access and walk-in care availability in the region. Visits per day were 36.2 for FY22, 36.5 projected for FY23, and 37.0 for FY24 budgeted.

Compared to FY22, Operating Expenses are budgeted at a 6.4% increase for FY24 at \$61,791,752, including 2% COLA and 3% inflation. Major expense category increases include Salary and Wages, Employee Benefits & Payroll Taxes, Management and Contracted Services, and Other Expenses. Compared to FY23 projected, Operating Expenses are expected to increase 3.2%. (Please see Part II Questions for further explanation).

Summary

In summary, Springfield Hospital is requesting:

- 6.95% price increase, or \$9,381,421 in gross revenue.
- 15.6% Net Revenue (NPR/FPP) increase over FY22, or \$8,256,803

Our Charge Increase Request includes a 6.95% increase:

Gross Revenue

The NPR/FPP increase over FY22 includes the impact of volume growth and the 6.95% charge increase:

Utilization/Volume	6,406,345	12.1%
Charge Increase	1,850,458	3.5%
	\$ 8,256,803	15.6%

Compared to FY23, the NPR/FPP increase is:

Utilization/Volume		4,875,246	8.9%
Charge Increase		1,850,458	3.4%
	\$.	6,725,704	12.3%

Springfield Hospital's goal is to deliver the right care, at the right time, at the right cost. We are investing in specialty medical staff to respond to community needs identified through our Community Health Needs Assessment, and to provide access to specialty services that can be delivered locally for less cost.

We are rebuilding consumer confidence and our financial footing, post Chapter 11 reorganization, which will take time. The work continues and ongoing flexibility in balancing financial and other key resources will be necessary to manage variable price increases, staffing challenges, and other unplanned expenses as we work to improve our daily operating results and long-term sustainability.

Income Statement, Operating Margin and Cash Flow – Attachment B

We recognize this is a very tight budget with a minimal operating margin. However, given the guidelines, we are putting forth our best judgement for predictable operating performance. The overall impact of the 6.95% charge increase, volume increases and expense changes is expected to result in a small operating margin of \$476,716 or 0.77%. Net estimated cash flow is almost breakeven at \$116,716 which takes into account estimated principal debt payments, annual funding for frozen defined benefit plan, and capital purchases.

II. QUESTIONS

a. Concisely describe necessary adjustments to your FY22 actuals or other considerations required for the proposed budget. Examples may include physician transfers, accounting adjustments, or changes to service offerings, staffing, or infrastructure.

Planning considerations for FY24 focus on aligning services that deliver value to our community in terms of quality, convenience and cost, and strengthening our overall performance. To improve local access, we have:

- added two full-time GYN providers
- expanded (days of operation) in Urology, increasing from 4-6 days to 8-10 days each month
- transitioned Podiatry from part-time to four days each week, based on demand
- adding a part-time URO/GYN specialist
- budgeting for two part-time General Surgeons (expected to arrive first quarter FY24)

Our Oncology service transitioned from an on-site service to telemedicine due to lack of medical staff availability through our Dartmouth Health (DH) collaboration. In addition, for FY24, we are temporarily halting on-site availability for Cardiology services for the same reason. We are actively recruiting to secure Cardiology coverage so we can continue that essential service locally.

We are upgrading our Diagnostic Imaging Department, including:

- software and hardware for Echocardiograms (completed)
- new digital C-arm unit (completed)
- new Nuclear Medicine/CT Scanner (Jurisdictional Determination approved, project in process)
- new MRI Scanner (Jurisdictional Determination request to be submitted in July 2023)
- two new X-ray units (Radiology and Fluoroscopy) and one new, portable X-ray unit
- new X-ray positioning platform (completed)

Other planned upgrades include our boiler system, HVAC/air handlers for the operating room and pharmacy areas, pedestrian bridge, nurse call system, and medical office building renovation. Many of these expenses are covered through grant funding.

Also, during FY23, we have invested in a number of minor medical equipment items that were needed to replace aging and broken equipment.

b. Clearly and succinctly explain the factors used in your proposed budget and how they compare with those outlined in Section I of the FY24 GMCB Hospital Budget Guidance, providing evidence to support your assumption(s). Each factor should be addressed: Please see Attachment B for the Income Statement budget.

Labor expenses

Salaries and Wages in the FY24 budget show an increase of 19.5% over FY22 actual. This equals \$3.5M over a two-year period. The budgeted increase from FY23 projected to FY24 is \$1.7M or 8.7%.

The FY24 budget includes impact from the RN collective bargaining agreement, a 2% cost of living adjustment for FY24 (including a 2% COLA given in FY23), \$250K budget for market adjustments (including necessary market adjustments in FY23 to retain and recruit staff), and \$100K anticipated expense increase to transfer Technology Management staff from North Star Health to the Hospital. Technology Management was previously a service provided to the Hospital through a shared service agreement with North Star Health.

Our FY22 actuals also include unfilled positions that were budgeted for in FY22 and also included in our FY24 budget. This represents a significant portion of the 2-year increase. In FY22, travelers and contracted expenses filled many of these open positions. The FY24 budget includes an increase of 10.82 FTEs outlined below:

Technology Management Services (FQHC Transfer)	5.0
Emergency Room (New Graduate Development Program)	1.8
Physical Therapy-Bellows Falls (Volume)	1.0
Physical Therapy-Mountain View (Volume)	1.0
Nuclear Medicine (Volume)	.75
Springfield Pain Clinic (Volume)	.50
Patient Financial Services	.25
Human Resources	<u>.52</u>
Total	10.82

There have also been 2.17 FTE additions during FY23 to support volume growth in the Specialty practices, primarily GYN, Podiatry, Urology.

Total Labor Expenses and Employee Benefits for employed staff and providers are 41.4% and 8.7%, respectively, of total operating expenses.

Employee Benefits and Payroll Taxes increased by \$680,948, or 14.5% over FY22 actual -- an increase of \$179,310 or 3.5% from FY23. We experienced increases in the Hospital's FY23 self-funded health insurance plan but expect minimal increases in FY24. FICA expense and 401k employer matching related to the rise in labor costs represents a portion of the Employee Benefit and Payroll Tax increase as well.

Utilization

Our FY24 budget includes projections based on investments in new or expanded services -- primarily Gynecology, URO/GYN, Podiatry, General Surgery and Ancillary Services. Our budgeted increase in Medical/Surgical Inpatient anticipates increasing our Swing Bed program and some increased utilization as a result of additional Surgical volume. Average Daily Census

for Inpatient Psychiatric utilization is budgeted at 8.4 vs. 7.3 FY22 actual. We feel this is conservative based on our needs assessment results and demand for the service.

Pharmaceutical expense

Our FY24 budget reflects a 14.5% decrease (\$289,082) from FY22 actual. The decrease reflects the impact of reduced oncology service. Also anticipated in this budget is increased cost due to supply chain challenges. Our budget is net of these issues.

Cost Inflation

Springfield Hospital's FY24 budget includes a \$198,980, or 10.1%, increase over FY22 actual costs for medical supplies, and 10.6% over FY23 projected, but includes an impact from both volume and inflation. Medical Supplies account for 3.4% of Total Operating Expenses, and overall Supplies represents 5.4%. Overall, the budget for inflation is budgeted at 3%. The inflation impact represents \$344K and was factored into areas where prices for FY24 did not have known increases. See breakdown below:

Inflation

<u>Total</u>	\$ <mark>344,292</mark>
Other Expenses*	124,415
Other Purchased Services	50,986
Medical Supplies	54,734
Management & Contract Services	64,488
Drugs	\$ 49,669

^{*}Includes food, non-medical/office supplies, utilities, maintenance and repairs, postage/freight, employee wearing apparel, data processing, lease/rent building and equipment

Commercial Price Changes

Commercial payer price changes are based on contract terms. The net impact of the charge increase to net revenue is \$1,850,458, compared to FY22 actual, or 3.5%. Our budget assumes the same payer mix for commercial payers for FY24.

Financial indicators

GMCB to review per S. Lindberg

Known pricing changes for Medicare and Medicaid

We assumed no increase from Medicaid related to the charge increase. Medicare is budgeted at allowable cost, using the Critical Access Hospital reimbursement methodology. Our budget assumes the same payer mix for Medicaid and Medicare for FY24.

Uncompensated care

As a % of gross revenue, Charity Care is anticipated to increase to .9% (.2% increase over FY22) and Bad Debt is expected to decrease to 1.8% (1.3% decrease over FY22).

We are working to enhance our financial assistance policy and collaborating with several local agencies and the Vermont Department of Health to proactively minimize the impact of the Medicaid Unwind. This includes assisting with Medicaid re-enrollment, or enrollment with VT Health Connect or Medicare, as well as connecting people to other health and social services.

Hospitals should include other factors material to the proposed budget along with supporting material.

Provider taxes are budgeted at \$3,232,692, estimated using current monthly billed amounts, which represents 5.2% of total operating expenses. Payments will change in April-June when the prior year NPR reconciliation is completed. Payments will change again in June 2024 at the start of the State of Vermont fiscal year, but we cannot estimate the cost (6% of NPR) at this time since it requires completion of the NPR reconciliation.

Disproportionate Share (DSH) income is included in the FY24 budget at a new amount of \$550K, which anticipates a decrease of \$200K.

Other Operating Income is a significant decrease from FY22 as the Hospital recognized significant grant revenue in FY22 related to COVID relief funding. The budget also includes a reduction in revenue from the Master Shared Services Agreement with North Star Health, as previously noted, where the shared services between the two entities are evolving and services previously shared are separating to best meet the needs and efficiencies of each individual organization. Adult Day revenue is also represented in this category and is anticipated to increase due to demand as we rebuild that service post-COVID. There are no grants budgeted in FY24. We are actively pursuing many grants currently and, if successful, these would mainly be designated to fund capital projects.

Management and Contracted Services are increasing \$740,864 (10.2%) over FY22 and \$313,161 (4.1%) over FY23. The change is primarily driven by replacing Surgery locums included in Physician Fees by two contracted, part-time General Surgeons that are included in the Management and Contracted Services category. Pain Management is a new service for FY23 that is a change from FY22. Providers for this service are contracted through the same provider group that provides our Anesthesia services. This category also includes provider contracts for the Emergency Department, Hospitalists, and Anesthesia.

Increases are also anticipated in contracts related to Information Technology and Cybersecurity, as well as Revenue Cycle. A revenue cycle assessment was recently conducted by an outside vendor and we will continue to review and implement recommendations and opportunities identified in that assessment. There is no impact built into this FY24 budget due to timeline uncertainty.

Cost decreases are expected for our Radiology PACS services as the result of a five-year contract renewal.

Physician Fees, which includes both employed and locum providers, are a decrease \$380,216 (7.2%) for FY22 and \$403,308 (7.6%) for FY23 as noted previously where surgery locums are anticipated to decrease (coverage will still be required but at a minimum) and replaced by two part-time surgeons that will be reflected on the Management and Contracted Services expense line. This primary decrease is netted with increases related to our Podiatrist becoming full-time in FY23 and having two GYN providers in FY23 (one started mid FY23).

Traveler Expenses are expected to decrease from FY22 and will be a slight decrease from FY23. We continue to anticipate the need for travelers for nursing (Inpatient and Emergency Department), Lab (Medical Technologists), Respiratory (Technicians) and have budgeted a total of 14.5 FTE's including both international and national agencies. International agencies, which represent about half of the FTE's, provide lower rates but are difficult to secure due to demand and visa issues. The cost of these FTE's is removed from the labor budget and included as traveler expense. If these positions are replaced in FY24 with employed staff, this will increase labor costs and decrease traveler expense. We are currently using an outside agency for inpatient Physical Therapy and Occupational Therapy which are also reflected on this line.

Depreciation and **Interest Expense** are expected to increase as we upgrade Diagnostic Imaging equipment and invest in the Hospital's other capital needs for aging equipment that will require financing.

Other Expenses comprises many expense categories including advertising, legal, audit, bank and miscellaneous fees, utilities, building and equipment rent, maintenance and repairs, minor equipment, recruiting, non-medical supplies, postage and freight, training, travel, etc. Comparing FY22 actual and FY23 projected, Other Expenses is increasing 5.3% and 3.2%, respectively. Major contributors to the increase are increased advertising and marketing efforts, minor equipment replacements, housing for staff/locums, increased non-medical supplies predominantly related to volume increases (i.e., Operating Room, Specialty Clinics (Urology, Podiatry, Gynecology)), education and training, and recruitment fees. As noted earlier, \$124,415 of the Other Expense category increase is related to inflation.

c. Briefly summarize known risks in the budget as submitted and indicate how the risks are being addressed. Include the cost, any realized benefit, and descriptions of new or ongoing measures used to reduce or otherwise manage budgeted expenses. Understanding the dollars associated with efforts to decrease or slow the increase in specific categories of expenditures is most helpful in understanding implications for the proposed budget.

Variables are numerous, including volumes, health insurance expenses, staffing shortages, pharmaceutical and supply costs, and traveler costs to name a few. We are utilizing our premium per diem program to help reduce the use of travelers and the associated cost, and are

reviewing contracts for possible savings and improved efficiencies. The Provider Tax and the Medicaid Unwind project are also both variables that have the potential to have a negative impact on the budget.

- d. Provide up-to-date chart or graphic outlining the corporate structure associated with the hospital. See Attachment C Org Chart dated 6-21-23
- e. For any referrals or appointments requested in the first two weeks of May 2023, report the following metrics separately for each hospital-owned primary and specialty care practice as well as the top five most frequent imaging procedures:
- 1. **Referral lag,** the percentage of appointments scheduled within 3 business days of referral (percentage of all referrals where the clinic or hospital has completed scheduling an appointment within 3 business days of receiving the referral, regardless of the date on which the appointment will take place), and
- 2. **Visit lag,** the percentage of new patient appointments scheduled for the patient to be seen within 2 weeks, 1 month, 3 months, and 6 months of their scheduling date. (The scheduling date is the date the hospital or practice schedules the appointment, not the date the referral was received or the date the patient will be seen.)

If you are unable to report these metrics, explain what is preventing the calculation and when you will be able to report them. In their place, provide the third next available appointment for practices and imaging procedures identified above along with those for comparable hospitals or other industry benchmarks. See Attachment D for Springfield Hospital 2023 referral studies.

f. In accordance with 18 V.S.A. 9435(a)(6), indicate the known depreciation schedules on existing buildings, a four-year capital expenditure projection, and a one-year capital expenditure plan. Indicate any planned expenditures associated with regulatory compliance and/or accreditation. Depreciation Schedule and One-Year Capital attached (Attachments F&G).

g. Describe planned expenditures related to cybersecurity.

\$28,800 annually for our Security Operations Center \$21,200 annually for our endpoint malware protection (software on all computers).

h. Indicate the estimated annual expenditures associated with providing care that cannot be reimbursed due to the inability to transfer patients to post-acute or other more appropriate care settings. Examples include stays that exceed length of stay requirements for reimbursement or other care that would not generally be provided in a hospital setting. Provide these estimates for as many fiscal years as possible, including the estimates for FYs 23 and24. Indicate how the values are derived or otherwise estimated. How are these unreimbursed expenses captured in the proposed budget? Include an estimate of how many boarding episodes occurred in your Emergency Department for that period, the associated total patient days and charges, and the proportion of each associated with a primary diagnosis related to

mental health.

This information requires extensive report analysis and is not available at this time, but will be provided as soon as available.

i. How much revenue did the hospital net for reimbursements above cost for pharmaceuticals in FY22 actuals, FY23 projections, and in estimates used for the proposed budget? Include estimates for rebates associated with the 340B program.

340B mixed use (outpatient services at SHP) is not based on rebates, but a lower cost of goods pricing (\$700K/year savings in spend which amounts to net revenue). The 340B contract pharmacy (certain scripts filled at outside pharmacies) is in the early stages, so actual value is hard to predict. Projections are also difficult due to the vast number of changes in this program over the past 12 months and going forward. We estimate it will generate approximately \$100K per year.

How does the hospital spend or otherwise account for the net revenue?

This goes into the general operating fund of the Hospital and helps fund hospital operations.

j. Facility Fees: Does your institution charge "facility fees" to patients who access your emergency department? Facility fees have been defined as 'the cost of walking in the door' that are billed separately to cover overhead and other costs to provide care in addition to the charges for specific services received by the patient. If your institution charges facility fees, please provide an estimate of the total sum of the facility fees billed and collected in FY22.

An estimate of the total sum of the facility fees billed and collected for patients accessing the Emergency Department in FY22 is \$3,407,172, and potential payments approximately \$1,360,000.

k. Patient Financial Assistance:

Are patients given a financial assistance plan or policy with the first attempt to collect a debt? We send patient statements including language to guide the patient/guarantor about how to access financial assistance if desired. Information is also available at every point of entry.

If a contract with a third party exists to collect payments from patients, please provide this contract and disclose the amount paid for such collection efforts and the revenue generated therefrom.

We do have an outside contract with a third party for collections. Further information to be provided.

At what point of non-collection does the hospital write off the money owed as bad debt? After 140 days - four attempts to collect the debt, two statements, and two collection letters.

What happens if a debt is collected outside of the allowed payment window? Does it show up as revision of the FY in which the services were provided or does it show up in some revenue line in the FY it was collected?

For accounts currently in bad debt, the payments are categorized as recovery to bad debt and would be accounted for as a reduction to bad debt expense.

What, if any effort does the hospital undertake to evaluate whether a patient can pay money owed to the hospital?

If/when the patient/guarantor requests financial assistance, we evaluate income and assets.

What, if any, effort does the hospital undertake to proactively evaluate whether a patient, prospective, current, or past, is eligible for the hospital's free care program?

Proactively, we evaluate a patient/guarantor's eligibility for the financial assistance program if they submit an application and all necessary supporting documentation. Upon determination

they submit an application and all necessary supporting documentation. Upon determination approval of financial assistance, we review retroactively 240 days and bring any open balances into consideration for financial assistance.

Please provide the quantitative and/or qualitative evidence the hospital used to determine the appropriate Federal Poverty Limit ranges used for free care eligibility.

Upon receipt of a completed application for financial assistance including supporting documentation, we review all income and assets. A decision is made, based on income and assets, and applied to the Federal Poverty Guidelines to determine the financial assistance award or denial.

I. Administrative Costs:

- i. Please provide a breakdown of administrative costs by activity type and title (billing and insurance, non-billing and insurance, Executive, VP, Director, etc). If no such disaggregation can be provided or a different breakdown more accurately reflects the specific structure of your hospital, please explain. See Attachment E
- ii. Please provide the number of FTEs by type by average and median salary and total compensation (i.e. total cost of FTE to the organization) by clinical (physicians, PAs, NPs, nurses, etc.) and non-clinical (C-suite, managerial, other).

Position Type	Staff/Provider	TOTAL WAGES	FTE's excluding Travelers	Average Salary	Median Salary
		\$		\$	\$
Clinical	Provider	3,841,784	11.00	307,705	295,360
		\$		\$	\$
Clinical	Staff	12,053,473	154.59	76,289	82,467
		\$		\$	\$
Non-Clinical	Staff	9,066,844	136.44	66,214	57,018
		\$		-	

24,962,100 **302.03**

FORM 990 (TAX YEAR 2022)

No later than June 30, 2023, file a complete copy of the hospital's most recent Form 990 (for FY21), including the most current version of Schedule H that has been submitted to the Internal Revenue Service as part of the hospital organization's Form 990 reporting obligations under Section 501c(3) of the Internal Revenue Code.

We have an extension for the 990 for FY22 until 8/15/2023 and will send when completed.

A. **COMMUNITY HEALTH NEEDS ASSESSMENT**

No later than June 30, 2023, file a complete copy of the hospital's most recent Community Health Needs Assessment (CHNA) and/or most recent Implementation Strategy, as required by the Patient Protection and Affordable Care Act.

This pdf file has been uploaded.

ATTACHMENT A - UTILIZATION

FY24 Volume Budget	FY22 Actual	FY23 Projected (based on YTD April)	FY24 Budget	FY24 Budget vs. FY22 Actual (\$)	FY24 Budget vs. FY22 Actual (%)	FY24 Budget vs. FY23 Projected (\$)	FY24 Budget vs. FY23 Projected (%)
Admissions							
Medical/Surgical	652	567	721	69	11%	154	27%
Swing	63	41	65	2	3%	24	58%
Psychiatric Admissions	307 1,022	302 910	365	58 129	19% 13%	63 241	21% 26%
Total Hospital Observation	379	351	1,151 365	(14)	-4%	14	4%
Patient Days	379	331	303	(14)	-4/0	14	470
Medical/Surgical	2,876	2,451	2,884	8	0%	432	18%
Swing	628	595	700	72	11%	105	18%
Psychiatric	2,676	2,623	3,079	403	15%	456	17%
Total Hospital	6,180	5,669	6,663	483	8%	993	18%
Observation	595	591	700	105	18%	109	18%
Average Length of Stay							
Medical/Surgical	4.4	3.8	4.0	-0.4	-9%	0.2	5%
Swing	10.0	9.6	10.8	0.8	8%	1.2	12%
Psychiatric	8.7	7.2	8.4	-0.3	-3%	1.2	17%
Average Daily Census							
Medical/Surgical	7.9	6.7	7.9	0.0	0%	1.2	18%
Swing	1.7 7.3	1.6 7.2	1.9 8.4	0.2	11%	0.3	18% 17%
Psychiatric Ancillary Services	7.3	1.2	8.4	1.1	15%	1.2	1/%
Emergency Room Visits	13,197	13,328	13,505	308	2%	177	1%
Emergency Room Visits Emergency Room Visit/Day	36.2	36.5	37.0	0.8	2%	0.5	1%
Operating Room Cases*	854	881	1,197	343	40%	316	36%
Pain Management - OR	-	101	180	180	1070	79	78%
Endoscopy Procedures	1,111	929	1,000	(111)	-10%	71	8%
Laboratory Tests	229,010	203,750	204,000	(25,010)	-11%	250	0%
Pharmacy Drugs Dispensed	260,937	222,116	225,727	(35,210)	-13%	3,611	2%
Clinic: Infusion	see total below	1,538	1,572	see total below	see total below	34	2%
Clinic: Cardiology	see total below	615	-	see total below	see total below	(615)	-100%
Clinic: Hematology	see total below	129	140	see total below	see total below	11	9%
Clinic Total	2,751	2,356	1,712	(1,039)	-38%	(644)	-27%
Xray Exams	8,629	9,513	9,500	871	16%	(13)	0%
Bone Density	incl xray line	561 1,265	550	40	incl xray line	(11)	-2% 7%
MRI Procedures Nuclear Medicine Proc.	1,302 21	1,265	1,350 390	48 369	4% 1757%	85 390	7%
Mammography	2,213	2,865	3,000	787	36%	135	5%
Ultrasound Procedures	2,294	2,251	2,250	(44)	-2%	(1)	0%
Echo	771	684	725	(46)	-6%	41	6%
CT Procedures	4,890	5,019	5,000	110	2%	(19)	0%
EKG Procedures	4,720	5,103	5,508	788	17%	405	8%
Respiratory Procedures	22,372	20,222	16,976	(5,396)	-24%	(3,246)	-16%
PT Units	44,714	45,235	50,971	6,257	14%	5,736	13%
Adult Day	3,148	2,991	4,000	852	27%	1,009	34%
Specialty Practices							
Surgery	612	662	1,000	388	63%	338	51%
CVOSM Radiology	5,558	5,697	6,000	442	8%	303	5%
CVOSM - Radiology	3,219	3,098	3,336 1,750	117 6	4% 0%	238	8% 1%
ENT Hospitalist	1,744 4,291	1,733 3,777	1,750 4,352	61	1%	17 575	15%
Urology	2,502	2,587	2,600	98	4%	13	1%
Gynecology	1,429	1,819	2,500	1,071	75%	681	37%
Podiatry	1,187	2,085	2,400	1,213	102%	315	15%
Pain Management Clinic	- '-	331	480	480		149	45%
Specialty Practices Total	20,542	21,789	24,418	3,876	19%	2,629	12%
	Duine Vane			FY24 Budget	_	FY24 Budget	FY24 Budget
I	Prior Year - FY22	FY23 Projected	FY24 Budget	vs. FY22 Actual (\$)	vs. FY22 Actual (%)	vs. FY23 Projected (\$)	vs. FY23 Projected (%)
*Onerating Room Cases (Ry Specialty)		. 123 1 10 Jected					4%
*Operating Room Cases (By Specialty) Ortho		352	377		10/2	171	
Ortho	364	358 196	372 250	8 58	2% 30%	14 54	
Ortho General	364 192	196	250	58	30%	54	28%
Ortho	364			58 78		54 97	
Ortho General Urology	364 192 137	196 118	250 215	58	30% 57%	54	28% 82%
Ortho General Urology GYN	364 192 137 58	196 118 58	250 215 216	58 78 158	30% 57% 272%	54 97 158	28% 82% 272%

ATTACHMENT B – FY24 OPERATING BUDGET Income, Expenses, EBITDA and Cash Flow

(Based on April

Springfield Hospital		YTD)								
FY24 Operating Budget				FY24 BUDGET						
		FY23		FY24 BUDGET - 6.95% Price						
	FY22 Actual	PROJECTED	FY23 BUDGET	Increase		vs. FY22 Actual	١,	vs. FY23 Projected	vs. FY23 Bu	ıdaat
	1 122 Actual	PROJECTED	1123 000001	ilicicase		VS. FTZZ ACTUAL	<u> </u>	vs. F125 Projected	VS. F125 BU	iuget
GROSS PATIENT SERVICE REVENUE:										
Inpatient Revenue	\$ 19,833,798	\$ 18,664,587	. , ,			,,			\$ (4,124,383)	-16.0%
Outpatient Revenue	\$ 85,376,346	\$ 94,274,315		\$ 107,643,939					\$ 14,933,881	16.1%
Professional Services Total Gross Patient Service Revenue	\$ 11,872,704 117,082,848	\$ 11,935,724 124,874,626	\$ 14,376,827 132,901,337	\$ 15,123,886 144,457,894	\$	3,251,182 27.4 27,375,045 23.4	_	3,188,162 26.7% 9,583,267 15.7%		5.2% 8.7%
	117,002,040	124,874,020	132,301,337	144,437,834		27,373,043 23	/0 1:	5,363,207 13.7/6	11,330,337	6.776
Deductions from Revenue:										
Contractual Allowances	\$ 60,961,855	. , ,				-, - ,		2,701,033 18.9%		12.3%
Charity Care & Other Allowances Provision for Bad Debts	\$ 867,163 \$ 3,670,719	\$ 730,600 \$ 3,273,060		\$ 1,343,679 \$ 2,611,199			% \$ % \$	613,079 83.9% (661,862) -20.2%	. ,	44.0% -11.1%
Disproportionate Share	\$ (1,483,691)	. , ,		1 ' ' '			% \$	205,314 -27.2%	, ,	-26.7%
Total Deductions from Revenue	64,016,046	70,276,725	74,122,716	83,134,289		19,118,243 29.9		2,857,563 18.3%	9,011,573	12.2%
Net Patient Service Revenue	53,066,802	54,597,901	58,778,621	61,323,605		8,256,803 15.6	% (6,725,704 12.3%	2,544,984	4.3%
Other Operating Revenue*	\$ 8,316,386	\$ 1,775,155	· · · · · · · · · · · · · · · · · · ·	\$ 944,863	\$		% \$	(830,292) -46.8%		-66.8%
TOTAL OPERATING REVENUE	61,383,188	56,373,056	61,624,609	62,268,468		885,280 1.4	% !	5,895,412 10.5%	643,859	1.0%
Charity Care & Other Allowances	0.7%	0.6%	0.7%	0.9%	,	0.2%		0.3%	0.2%	
Provision for Bad Debts	3.1%	2.6%	2.2%	1.8%	;	-1.3%		-0.8%	-0.4%	
NPSR %	45.3%	43.7%	44.2%	42.5%	5	-2.9%		-1.3%	-1.8%	
OPERATING EXPENSES:										
Salaries & Wages	\$ 18,212,780	\$ 19,664,911	\$ 20,350,517	\$ 21,757,873	\$	3,545,093 19.5	% \$ 2	1,705,879 8.7%	\$ 1,407,356	6.9%
Employee Benefits & Payroll Taxes	\$ 4,688,878	\$ 5,381,502	\$ 5,190,516	\$ 5,369,826	\$	680,948 14.5	% \$	(39,728) -0.7%	\$ 179,310	3.5%
Medical Supplies	\$ 1,929,350	\$ 1,870,167	\$ 2,261,886	\$ 2,123,653	\$	194,303 10.1	% \$	198,980 10.6%	\$ (138,233)	-6.1%
Drugs	\$ 1,995,379	\$ 1,580,759	\$ 1,465,530	\$ 1,706,297	\$	(289,082) -14.5	% \$	75,869 4.8%	\$ 240,767	16.4%
Management & Contract Services	\$ 7,228,203	\$ 7,591,418	\$ 7,177,506	\$ 7,969,067	\$	740,864 10.2	% \$	313,161 4.1%	\$ 791,561	11.0%
Other Purchased Services	\$ 3,109,225	\$ 2,600,729	\$ 3,310,656	\$ 2,805,672	\$	(303,553) -9.8	% \$	153,957 5.9%	\$ (504,984)	-15.3%
Physician Fees	\$ 5,301,200	\$ 5,324,341	\$ 5,325,623	\$ 4,920,984	\$	(380,216) -7.2	% \$	(403,308) -7.6%	\$ (404,639)	-7.6%
Travelers	\$ 4,042,540	\$ 3,340,280	\$ 2,844,996	\$ 3,167,374	\$	(875,167) -21.6	% \$	(172,907) -5.2%	\$ 322,378	11.3%
Depreciation	\$ 1,368,712	\$ 1,077,092	\$ 1,264,752	\$ 1,200,000	\$	(168,712) -12.3	% \$	122,908 11.4%	\$ (64,752)	-5.1%
Interest	\$ 156,536	\$ 150,275	\$ 140,004	\$ 260,000	\$	103,464 66.1	% \$	109,725 73.0%	\$ 119,996	85.7%
Insurance	\$ 685,670	\$ 698,064	\$ 594,960	\$ 605,735	\$	(79,935) -11.7	% \$	(92,329) -13.2%	\$ 10,775	1.8%
Provider Tax	\$ 3,363,263	\$ 3,216,865	\$ 3,526,716	\$ 3,232,692	\$	(130,571) -3.9	% \$	15,827 0.5%	\$ (294,024)	-8.3%
Other Expenses	\$ 5,991,799	\$ 6,216,287	\$ 6,433,194	\$ 6,672,581	\$	680,783 11.4	% \$	331,879 5.3%	\$ 239,387	3.7%
TOTAL OPERATING EXPENSES	58,073,534	58,712,692	59,886,856	61,791,752		3,718,218 6.4	% 2	2,319,913 4.0%	1,904,896	3.2%
O PERATING INCOME (LOSS)	3,309,654	(2,339,636)	1,737,753	476,716		(2,832,938) -85.6	%	3,575,499 -152.8%	(1,261,037)	-72.6%

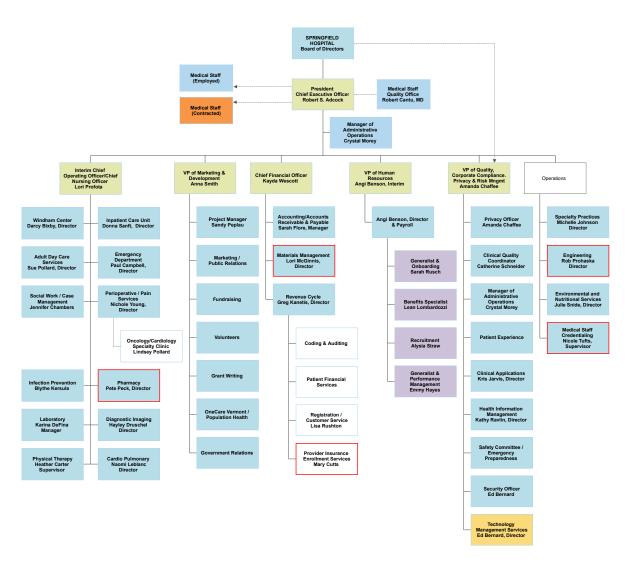
Operating Margin % 5.39% -4.15% 2.82% 0.77%

EBITDA and Cash Flow EBITDA: Operating Income 476,716 Add Depreciation \$ 1,200,000 State of VT Accrued Interest 60,000 EBITDA Total 1,736,716 Debt Payments (530,000) Pension Expenses Funding (340,000) Capital (750,000) Purchases Net Cash Flow 116,716

ATTACHMENT C

SPRINGFIELD HOSPITAL ORGANIZATIONAL CHART

Effective 6/21/202







June 21, 2023 V22

ATTACHMENT D SPRINGFIELD HOSPITAL REFERRAL INFORMATION 1st TWO WEEKS OF MAY 2023

	% Schedule within		% Seen within 1	% Seen within 3	% Seen within 6
SPECIALTY	3 days of receipt of	% Seen within 2 wks	month of schedule	months of schedule	months of schedule
PRACTICES	referral	of schedule date	date	date	date
ORTHOPAEDICS	95%	95%	5%		0%
UROLOGY	89%	44%	44%	11%	0%
GYNECOLOGY	83%	33%	55%	11%	0%
PODIATRY	71%	33%	67%		0%
GEN SURGERY	67%	58%	33%	8%	0%
ENT	85%	4%	4%	92%	0%

	% Schedule within			% Seen within 1	% Seen within 3	% Seen within 6	
DIAGNOSITC	3 days of receipt of	% Seen within 1 wk	% Seen within 2 wks	month of schedule	monthsofschedule	months of schedule	
IMAGING	referral	of schedule date	of schedule date	date	date	date	Quantity
CT	33%	40%	21%	5%	0%	0%	42
MRI	33%	47%	18%	2%	0%	0%	45
BONE DENSITY	0%	19%	31%	38%	13%	0%	16
ECHO	17%	8%	8%	50%	17%	0%	12
MAMMO	26%	33%	26%	9%	4%	2%	54
ULTRA SOUND	0%	24%	41%	32%	3%	0%	34

ATTACHMENT E ADMINISTRATIVE & GENERAL EXPENSES

Fy24 Budget Narrative (L) Admininstrative & General Total Costs

Expense Type	Department	FY24 Budget
Admin & General	Accounting & Finance	842,965
	Administration	873,996
	Central Sterile	85,648
	Clinical Application	379,410
	Coding & Auditing	369,237
	Education	45,264
	Financial Services	427,712
	Health Information Management	422,418
	Housekeeping	614,140
	Human Resources	788,336
	Information Desk	111,115
	Laundry and Linen Services	307,366
	Marketing & Development	365,904
	Materials Management	266,250
	Nutritional Services	815,151
	Patient Care Services	419,669
	Patient Financial Services	1,601,322
	Practice Operations	334,835
	Quality & Risk	380,361
	Registration	513,475
	Social Services	209,574
	Technology Management Services	1,332,067
	Medical Staff	14,832
	Security	291,400
	Printing	21,939
	Telephone	107,410
	Windham Center Building Expenses	78,679
	Mailroom	46,865
	Fringe Benefits	1,611,545
	Engineering/Facility	2,183,605
Admin & General To	tal	15,862,487
Other:		
	Insurance (General Liability,	
	Property, Malpractice, D&O, etc)	605,735
	Depreciation (All)	1,200,000
	Interest (All)	260,000
	Provider Tax	3,232,692
Total Admin & Gene	ral including Other	21,160,914

24.14.1.6	-	561154415		ACQU	IRED	PURCHASE			ACCUM
ASSET.	DEPT	EXP.	DESCR	DATE		VALUE	Life	FISCAL DEPREC	DEPR
000687	99	40091030	79-80 BUILDING AD B	9	/30/1980	752,666	40	-	752,666
000994	99		BLD. RENOV B		/30/1984	54,022	40		54,022
001415	03		DONATION OF SPFLD B		/30/1988	41,400	25		41,400
001461	99		PENTHOUSE STRUCTU B		/31/1989	69,493	40		61,241
001494	99		CONCRETE ENCASEME B		/31/1989	28,124	40		24,725
001642	21 21		O/R RM - STRCTL S B		7/3/1990	53,417	40 25	,	45,627
001648 001650	21		O/R RM - MASONARY B O/R RM - REINFORC B		7/3/1990 7/3/1990	129,931 368,905	40		129,931 315,106
001630	81		OVERHEAD DOORS CT B		/30/1990	4,636	7		4,636
001082	57		ELECTRICAL TELEPO B		/31/1990	2,176	5		2,176
001729	80		KITCHEN CEILING N B		/31/1990	6,302	12		6,302
001775	44		STEEL FRAME @ X-R B		/31/1991	7,116	40		5,900
001793	57		MED RECORDS/CNTRL B		/31/1991	67,497	40		55,967
001795	57	40091030	MED RECORDS/CNTRL B		/31/1991	71,935	40		59,647
001801	57	40091030	MED RECORDS/CNTRL B	3	/31/1991	139,568	40	3,489	115,725
001802	57	40091030	MED RECORDS/CNTRL B	3	/31/1991	380,001	40	9,500	315,084
001822	93	40091030	F/S STRUCTURAL ST B	3	/31/1991	36,816	40	920	30,527
001824	93	40091030	F/S BLDG EXCAVATI B	3	/31/1991	39,237	40	981	32,534
001830	93	40091030	F/S MASONRY B	3	/31/1991	76,128	40	1,903	63,123
001831	93	40091030	F/S REINFORCED CO B	3	/31/1991	207,273	40	5,182	171,864
001860	99	40091030	ENTRY STRUCTURAL B	3	/31/1991	49,088	40	1,227	40,703
001862	99		ENTRY BLDG EXCAVA B		/31/1991	52,318	40	•	43,381
001873	99		ENTRY MASONRY LOB B		/31/1991	101,503	40	,	84,163
001876	99		ENTRY REINFORCED B		/31/1991	276,365	40		229,152
001888	99		ANTHONY ASSOC - S B		/30/1991	4,605	20		4,605
001987	99		ROOFING / FLASHIN B		/30/1991	10,000	10		10,000
001991	21		O/R RENOVATIONS A B		/31/1991	5,099	25		5,099
002047	99		ROOF-MULTI-STATE B		/31/1992	2,213	20		2,213
002077 002091	29 57		SPRINKLER REVISIO B		/30/1992	3,527	25 15		3,527
002091	81		MEDICAL RECORDS R B MAIN DOORS DOOR C B		/30/1992 /30/1992	2,729 13,738	10		2,729 13,738
002097	83		EXTERIOR RENOVATI B		/30/1993	2,014	25		2,014
002207	75		PHYSICIAN IMPROVE LH		/30/1993	15,854	15		15,854
002284	09		BUILDING ST FLOOR B		/30/1994	22,599	20		22,599
002285	13		BUILDING MATERNIT B		/30/1994	28,452	20		28,452
002290	20	40091030	BUILDING MAMMO B		/30/1994	8,279	20	=	8,279
002293	44	40091030	BUILDING RADIOLOG B	9	/30/1994	38,207	20	-	38,207
002297	57	40091030	BUILDING MEDICAL B	9	/30/1994	7,708	20	-	7,708
002298	60	40091030	BUILDING DRS LOUN B	9	/30/1994	28,549	20	-	28,549
002299	60	40091030	RINDER,CRAIG AND B	9	/30/1994	39,800	20	-	39,800
002300	75	40091075	BUILDING BFUC REN B	9	/30/1994	3,890	20	-	3,890
002313	81	40091030	WATER PUMP REPLAC B	10	/31/1994	4,206	10	-	4,206
002335	18		REPLACE&REOLCATE LH		/31/1995	3,388	20		3,388
002441	18		BUILDING RENOVATI B		/30/1995	52,037	15		52,037
002466	57		RENOVATIONS-MEDIC B		/30/1995	4,923	20		4,923
002468	64		RENOVATIONS TO PU B		/30/1995	22,017	20		22,017
002590	80		DIETARY RENOVATIO B		/31/1996	207,090	15		207,090
002593	82		HEALTHWORKS INTER B		/31/1996	2,269	15		2,269
002594	82		HEALTHWORKS CARPE B		/31/1996	3,093	15		3,093
002607	99		BASEMENT RENOVATI B BASEMENT RENOVATI B		/31/1996	4,833	20		4,833
002608	99				/31/1996	5,877	15		5,877
002610 002723	99 60		BASEMENT RENOVATI B RENOVATOINS PROFE B		/31/1996 /15/1998	8,537 133,396	10 40		8,537 87,264
002723	28		ENDOSCPY RENOVATI B		/15/1998 /15/1998	16,059	40		10,506
002728	09		RENVATIONS, PATEI B		/15/1998	39,815	40		26,046
002732	83		ENERGY CONSERVATI B		/15/1998	61,232	40		40,056
002737	60		ROOF REPAIR B		/15/1998	116,060	40		75,923
002756	60		SIGNAGE IMPROVEME B		/15/1998	82,729	40		54,118
002757	60		WINDOW INSTALLATI B		/15/1998	189,414	40		123,908
002762	01		CHESTER MEDICAL C B		7/2/1998	610,157	40		399,144
					•	*		,	•

				ACQUIRED	PURCHASE			ACCUM
ASSET.	DEPT	EXP.	DESCR	DATE	VALUE	Life	FISCAL DEPREC	DEPR
002773	92	40091030	AIR CONDITIONING B	7/15/1998	9,200	40	230	6,019
002780	24	40091030	ONE DAY SURGERY R B	8/15/1998	169,763	40	4,244	111,053
002795	60		CHAPEL CONSTRUCTI B	9/15/1998	25,244	40	631	16,513
002800	01		CHESTER MEDICAL C B	10/1/1998	15,560	40	389	9,790
002801	81		PENTHOUSE ELEVATO B	10/1/1998	7,320	20	-	7,320
002835	60		WINDOW REPLACEMEN B	1/27/1999	2,306	15	-	2,306
002858	35		EXERCISE ROOM B	3/1/1999	6,185	15	-	6,185
002859	60		1955 ROOF - DUCTW B	3/1/1999	5,770	15	-	5,770
002861	81		DR RINDER'S OFFIC B	3/1/1999	9,393	15	-	9,393
002876	81		RENOVATIONS PROFE B	4/1/1999	6,921	15	=	6,921
002877	81		SPRINGFIELD HOSPI B	4/1/1999	9,144	15	-	9,144
002903	01		CHESTER FAMILY ME B	6/1/1999 6/1/1999	22,101	15	-	22,101
002905	80 81		STEAM LINES TO KI B SPRINGFIELD HOSPI B		4,274	15 20	-	4,274
002931 002983	18		WINDHAM CENTER B	7/1/1999 9/1/1999	69,332 284,488	40	- 7,112	69,332 178,990
002983	81		HOSPITAL MAIN ENT B	10/1/1999	4,761	20	7,112	4,761
003012	78		BUILDING IMPROVEM B	10/31/1999	10,355	40	259	6,256
003065	81		KITCHEN IMPROVEME B	12/31/1999	3,522	15	233	3,522
003076	81		Y2K UPGRADE ELECT B	1/1/2000	13,398	40	335	8,094
003070	81		TELEMED/EDUCATION B	2/1/2000	5,105	40	128	3,085
003160	81		SECURITY SYSTEM B	5/31/2000	8,240	10	-	8,240
003164	16		BUILDING IMPROVEM B	6/1/2000	47,990	40	1,200	28,994
003197	37		BUILDING RENOVATI B	8/31/2000	14,769	15	-,	14,769
003199	18		WINDHAM CENTER IM B	9/1/2000	5,928	15	_	5,928
003279	01		BUILDING IMPROVEM B	9/1/2001	1,181	40	30	684
003287	06	40091030	BUILDING IMPROVEM B	9/1/2001	676	40	17	392
003291	09		BUILDING IMPROVEM B	9/1/2001	1,395	40	35	808
003295	11	40091030	BUILDING IMPROVEM B	9/1/2001	8,133	40	203	4,710
003297	23	40091030	BUILDING IMPROVEM B	9/1/2001	2,188	40	55	1,267
003299	37	40091030	BUILDING IMPROVEM B	9/1/2001	2,511	40	63	1,454
003300	41	40091030	BUILDING IMPROVEM B	9/1/2001	11,762	40	294	6,812
003301	47	40091030	BUILDING IMPROVEM B	9/1/2001	925	40	23	536
003307	60	40091030	BUILDING IMPROVEM B	9/1/2001	1,650	40	41	956
003308	60	40091030	BUILDING IMPROVEM B	9/1/2001	1,765	40	44	1,022
003311	60		BUILDING IMPROVEM B	9/1/2001	8,197	40	205	4,748
003312	60		BUILDING IMPROVEM B	9/1/2001	9,259	40	231	5,363
003313	60		BUILDING IMPROVEM B	9/1/2001	28,129	40	703	16,291
003314	60		BUILDING IMPROVEM B	9/1/2001	47,733	40	1,193	27,645
003315	73		BUILDING IMPROVEM B	9/1/2001	1,800	40	45	1,043
003317	80		BUILDING IMPROVEM B	9/1/2001	3,206	40	80	1,857
003318 003319	81		BUILDING IMPROVEM B	9/1/2001	2,269	40 40	57 122	1,314
003319	81 83		EXTERIOR PAINTING B WINDHAM CENTER RE B	9/1/2001 9/5/2002	4,871 8,792	20	122	2,821 8,792
003413	83		CULLIGAN WATER SO B	9/9/2002	4,116	20	-	4,116
003414	02		BUILDING IMPROVEM B	9/30/2002	2,770	20	-	2,770
003417	18		FIRE ALARM-WINDHA B	9/30/2002	2,172	20	_	2,172
003433	18		BUILDING IMPROVEM B	9/30/2002	67,603	40	1,690	38,308
003435	44		BUILDING IMPROVEM B	9/30/2002	8,437	20	-,	8,437
003441	73		BUILDING IMPROVEM B	9/30/2002	122,083	40	3,052	69,180
003445	83	40091030	BUILDING IMPROVEM B	9/30/2002	2,157	40	54	1,222
003447	83	40091030	BUILDING IMPROVEM B	9/30/2002	29,392	20	_	29,392
003448	83	40091030	BUILDING IMPROVEM B	9/30/2002	59,015	20	-	59,015
003449	83		BUILDING IMPROVEM B	9/30/2002	69,551	40	1,739	39,412
003450	83	40091030	BUILDING IMPROVEM B	9/30/2002	96,586	40	2,415	54,732
003451	83	40091030	BUILDING IMPROVEM B	9/30/2002	264,399	40	6,610	149,826
003456	91	40091030	BUILDING IMPROVEM B	9/30/2002	35,819	40	895	20,297
003457	92	40091030	BUILDING IMPROVEM B	9/30/2002	9,295	40	232	5,267
003468	21	40091030	NEW VINYL FLOOR B	11/30/2002	2,139	10	-	2,139
003482	83		AIR HANDLER - X-R B	1/31/2003	55,038	10	-	55,038
003501	83	40091030	TRANSFER SWITCH (B	3/31/2003	21,775	20	=	21,775

				ACQUIRED	PURCHASE			ACCUM
ASSET.	DEPT		DESCR	DATE	VALUE	Life	FISCAL DEPREC	
003519	83		INSULATING DEAERA B	5/31/2003	3,190	10	-	3,190
003548	83		MEDICAL AIR COMPR B	8/31/2003	35,633	20	-	35,633
003551	83		FIRE SYSTEM UPGRA B	9/30/2003	25,000	20	-	25,000
003559 003560	03 55		DR.CAHILL OFFICE B	3/31/2003	59,344	20	-	59,344
	83		SQUEAKY SNEAKERS B	2/28/2003	32,701	20	-	32,701
003561			DR. KOEHLER'S OFF B	1/31/2003	39,960	40 40	999	21,145
003562	83 50		CHIMNEY REPAIR 19 B	2/28/2003	84,745	40	2,119 95	44,844
003563 003565	50 18		RESPITORY THERAPY B WINDHAM CENTER RE B	12/31/2002	3,818	20	95	2,021
003566	09		MED-SURG CONFIDEN B	5/31/2003	10,803 708	40	18	10,803 374
003567	09		DOCTOR'S CONFIDEN B	9/30/2003 9/30/2003	4,538	40	113	2,401
003568	73		ADULT DAY RENOVAT B	6/30/2003	3,200	20	- 115	3,200
003569	83		BOILER IMPROVEMEN B	9/30/2003	7,897	10	_	7,897
003575	83		PHASE 2 FIRE SYSTEM	10/1/2003	25,000	10	_	25,000
003573	99		THRIFT STORE ROOF	11/30/2003	2,462	10	_	2,462
003585	91		NETWORK DROPS	12/31/2003	8,227	15	_	8,227
003592	83		PHASE 3 FIRE INSTALLATION	10/1/2003	20,000	10	_	20,000
003593	83		TRANSFER SWITCH	2/29/2004	91,364	15	_	91,364
003533	83		HVAC AIR HANDLER	3/31/2004	85,069	15	_	85,069
003693			ACCESS CONTROL/PICTURE ID	9/30/2004	86,437	40	2,161	43,579
003694			LEVEL B DR CONSULT ROOM	6/30/2004	11,798	40	295	5,948
003695	45		CAT SCAN ROOM	12/31/2004	70,463	40	1,762	35,019
003708	99		INSTALL VACUUM/OXYGEN BOXES IN ER	11/1/2004	1,130	15	-,	1,130
003709	99		MED GAS SYSTEM INSTALLATION	10/12/2004	7,644	15	_	7,644
003727	90		OUTSIDE STAIRCASE-PATIENT FINANCIAL	10/1/2004	3,100	15	_	3,100
003745	23		REPLACEMENT DOORS FOR INFECTION CO		2,881	15	_	2,881
003748	47		REPAIR OF AIR FILTER SYSTEM	10/1/2004	2,386	10	_	2,386
003821	02	40091030	INSTALL 3-WAY SWITCH/PILOT LIGHT CO		1,178	15	_	1,178
003840	18		WINDHAM CENTER IMPROVEMENTS (CIP		25,742	10	=	25,742
003843	15	40091030	CONN VALLEY ENT RENOVATIONS	11/22/2004	5,570	5	_	5,570
003874	83	40091030	JCAHO 2005 PREP	4/30/2005	60,261	10	-	60,261
003902	99	40091030	PAINTING OF EXTERIOR MAIN BLDG	9/30/2005	4,200	5	-	4,200
003903	99	40091030	A-1 BATHROOM	5/31/2005	23,502	20	1,175	22,522
003904	99	40091030	LEVEL B RENOVATIONS	6/30/2005	28,644	10	-	28,644
003912	99	40091030	JCAHO FULFILLMENT	8/15/2005	26,763	10	-	26,763
003915	99	40091030	1940 BLDG RENOVATIONS	9/15/2005	130,084	10	-	130,084
003921	99	40091030	EMERGENCY ROOM DOORS	10/1/2005	5,073	20	254	4,608
004010	99	40091030	(2) SMOKING HUTS	3/13/2006	14,426	20	721	13,104
004062	99	40091030	CHEMPACK ROOM	2/28/2006	7,269	10	-	7,269
004084	15	40091030	ENT RENOVATIONS	3/15/2006	3,214	5	-	3,214
004086	90	40091030	192 PARK STREET UPSTAIRS RENOVATION	6/5/2006	5,373	10	-	5,373
004087	73	40091030	ADULT DAY EXPANSION	5/31/2006	92,366	10	-	92,366
004088	99	40091030	LEVEL B CONFERENCE ROOM	4/20/2006	106,411	15	-	106,411
004105	56		CARPET IN LIBRARY	10/6/2006	2,432	5	-	2,432
004140	44		X-RAY ROOM REMODELING	11/16/2006	2,959	7	-	2,959
004163	99		LEV B CONF ROOM BAL OF ASSET 004088		1,509	15	-	1,509
004210	92		PAINT FOR ACCOUNTING OFFICE	6/30/2007	3,300	5	-	3,300
004255	47		PHARMACY RENOVATIONS CIP#2005-011		384,970	40	9,624	165,216
004256	83		FACILITIES DESIGN	9/1/2007	48,034	10	-	48,034
004258	99		LEVEL D SOLARIUM	11/1/2006	27,212	40	680	11,678
004267	13		CARPET MATERNITY AREA	11/2/2007	5,970	5	-	5,970
004346	83		DR LOUNGE RM 116 0	10/1/2007	3,923	7	-	3,923
004352	34		PAINTING OF WALLS AND TRIM	2/1/2008	2,000	5	-	2,000
004369	60		MURAL IN FRONT LOBBY	4/10/2008	2,000	5	-	2,000
004371	29		CLINIC EXPANSION CIP 2006-016	3/1/2008	28,754	7		28,754
004374	99		LEVEL A / STAIRWELL CIP 2007-001	3/1/2008	244,898	39	6,279	101,518
004380	83		ROOF REPLACEMENT	5/21/2008	18,388	10	-	18,388
004385 004420	41	40091030		5/31/2008	2,008	5	-	2,008
004425	83 99		FLOORING HOSPITAL CANOPY CIP 2008-001	7/1/2008 5/31/2008	4,246 165,039	5 39	4 222	4,246 68,414
004423	22	+0031030	HOST HAL CANOFT CIP 2000-001	3/31/2008	105,039	39	4,232	00,414

				ACQUIRED	PURCHASE			ACCUM
ASSET.	DEPT	EXP.	DESCR	DATE	VALUE	Life	FISCAL DEPREC	
004441	83		ROOFING ON 1990 BLDG	9/26/2008	51,569	10	-	51,569
004475	83		ALUMINUM DOORS W/ SIDE LIGHTS	12/15/2008	9,719	10	-	9,719
004481	01		VNA CONSOLADATION CHESTER BUILDIN		3,654	15	244	3,492
004489	83		ROOFING MECHANICAL	10/31/2008	7,032	10	-	7,032
004494	83		LEVEL C FACELIFT - CIP 2008-008	10/1/2008	30,677	10	-	30,677
004506	02		SOUND PROOF WALL/ DOOR	2/20/2009	5,127	10	-	5,127
004540	99		CARPET FOR LEVEL A STAIRWELL	5/1/2009	3,468	5	-	3,468
004541	99		FLOORING FOR TRAUMA ROOM	5/27/2009	3,887	10	-	3,887
004554	83		ROOF FOR 78 WING	6/15/2009	45,597	10	-	45,597
004555	83		ROOF LINE HANDRAIL PROJECT	6/15/2009	2,480	5	-	2,480
004566	21		OR MODIFICATION CIP 2007-002	2/10/2009	30,384	10	-	30,384
004567	99		LOADING DOCKS CIP 2007-010	2/1/2009	78,281	15	5,219	74,694
004568	99		EXTERIOR DOOR CIP 2008-013	2/1/2009	29,571	20	1,479	22,147
004590	41		LAB CLINIC LEVEL C CIP 2008-006	7/15/2009	2,071,324	39	53,111	805,515
004604	83		RE-ROOFING 1940'S BUILDING	10/30/2009	40,396	10	-	40,396
004633	83		EXTERIOR PAINTING OF RIDGEWOOD BUI		15,050	5	-	15,050
004653	83		WINDOW REPLACEMENT	3/1/2010	8,166	10	-	8,166
004661	83		PAINT BOLLARD GUARDS	5/6/2010	5,033	5 5	-	5,033
004662	83		HANDRAIL POST	5/6/2010	2,838	5	-	2,838
004664	83		MOVE PHP TO MAIN LEVEL	4/16/2010	9,499			9,499
004675 004682	41 83		2008-006-2 LAB/ CLINIC LEVEL B PUMP HOUSE ROOF	6/1/2010	482,611	39	12,375 -	170,667
004688	65 44			9/30/2010	6,277	10 39	- 3,915	6,277
004688	44		X-RAY GOWNED WAITING CIP 2009-003 ALUM DOOR AND FRAME	6/15/2010	152,675	10	3,913	53,991
004708	48 83		CEILING TILE ARMSTRONG #584	10/10/2010 11/20/2010	2,414 10,912	5		2,414 10,912
004711	21		PAINT INNER CORRIDOR OF OR	12/15/2010	5,005	5	=	5,005
004719	83		VINYL FLOORING	2/15/2010	2,250	5	-	2,250
004757	83		EPOXY FLOOR COVERING	4/20/2011	4,375	5	-	4,375
004755	99		CIP 2010-003 CMS COMPLIANCE	4/29/2011	21,558	10	-	21,558
004753	90	40091030		5/31/2011	23,472	10	-	23,472
004702	18		WINDHAM CENTER PAINTING INTERIOR	3/1/2011	7,108	5	_	7,108
004774	83		OR - PACU ROOF	7/26/2011	44,062	10	_	44,062
004774	73		ADULT DAY CIP 2009-008	8/1/2011	371,321	39	9,521	122,980
004783	45		CAT SCAN CIP 2011-001	5/1/2011	52,596	7	-	52,596
004792	83		RECYCLING CIP 2011-006	8/1/2011	11,246	10	_	11,246
004793	17		CVOSM XRAY REPLACEMENT CIP 2011-00		6,397	10	_	6,397
004806	83		CIP 2011-002 REGISTRATION LEVEL C	10/1/2011	37,593	10	_	37,593
004814	99		CIP 2011-005 ENVIRO ROUND IMPROVEM		28,422	5	_	28,422
004815	17		FLOORING	3/26/2012	4,673	5	_	4,673
004817	83		CIP 2012-001 XRAY #2 GE ROOM	2/1/2012	63,226	20	3,161	37,672
004827	99		NURSES STATION COUNTER AND CABINE		3,972	5	-,	3,972
004841	21		LAMINATE DOORS	9/13/2012	18,492	15	1,233	14,999
004845	80		CAFETERIA HALLWAY FLOOR	8/1/2012	17,997	10	-,	17,997
004847	99	40091030	BOILER ROOM CIP 2012-004	4/1/2012	27,079	10	-	27,079
004857	83		ATRIUM ROOF REPAIR	11/20/2012	2,097	10	_	2,097
004868	083	40091030	SURESIGNS & WALL MOUNT	3/26/2013	14,562	10	-	14,562
004881	083	40091030	FRAME AND DOORS	6/10/2013	6,447	10	-	6,447
004893	073	40091030	ADULT DAY SWING DOOR	6/30/2013	21,187	10	-	21,187
004912	083	40091030	CEDAR DOOR	10/1/2013	2,332	10	-	2,332
004919	083	40091030	ROOF FOR 1990 ENTRANCE	11/15/2013	21,595	10	2,159	19,681
004922	083	40091030	BOTTOM LANDING LEVEL A HALL	12/16/2013	14,780	10	1,478	13,499
004941	009	40091030	COMBINED INPT UNIT	10/1/2013	124,399	40	3,110	30,711
004942	028	40091030	ENDO ROOM	10/1/2013	3,802	10	380	3,754
004945	015	40091030	ENT MOVE	10/31/2013	16,900	15	1,127	11,126
004967	083	40091030	ER KEYSWITCH AUTO LOCK	6/30/2014	6,978	10	-	6,978
004970	023		2013-005 ED SLIDING DOORS	3/15/2014	84,002	10	8,400	84,002
004996	013	40091030	90 MINUTE RATED DOOR	11/10/2014	1,513	10	151	1,372
005005	057	40091030	2014-005 MEDICAL RECORDS	10/1/2014	33,603	10	3,360	29,962
005006	099	40091030	2014-001 HVAC	10/1/2014	96,865	10	9,686	86,371
005007	023	40091030	2014-007 CMS LIGITURE WORK	10/1/2014	8,147	10	815	7,264

				ACQUIRED	PURCHASE			ACCUM
ASSET.	DEPT	EXP.	DESCR	DATE	VALUE	Life	FISCAL DEPREC	DEPR
005009	023	40091030	2014-003 ED RENOVATION	5/31/2015	1,467,239	40	36,681	328,295
005033	009	40091030	2014-004 RM 119 & 121 LEVEL C	7/1/2015	35,241	10	3,524	30,836
005047	017	40091030	2015-003 CVO PROJECT	12/1/2015	55,753	10	5,575	44,974
005055	099	40091030	DECK REMOVAL	3/1/2016	11,695	10	1,169	9,300
005056	094	40091030	LUDLOW PT RENOV	3/1/2016	28,523	12	2,377	18,902
005080	023	40091030	TRAUMA ROOM PROJECT	9/30/2016	14,638	5	-	14,638
005081	073	40091030	ADULT DAY ROOF PROJ	10/31/2016	10,118	5	-	10,118
005082	036	40091030	MRI PROJECT	9/30/2016	131,313	10	13,131	107,239
005113	018	40091030	REPAIR/PREP DR. MILLER/ROWLANDS OF	9/30/2017	3,300	3	-	3,300
005126	099	40091030	LIBRARY/CONFERENCE ROOM RENOVATI	10/31/2017	11,101	7	1,586	9,449
005127	099	40091030	HR TO MEETING HOUSE RENOVATION	10/31/2017	67,218	7	9,603	57,215
005128	099	40091030	192 PARK TO 2 RIDGEWOOD SWAP/RENO	10/31/2017	13,503	7	1,929	11,494
005151	025	40091030	CHILDBIRTH-NOW UROLOGY RENOVATION	1/31/2019	57,647	5	11,529	50,922
005160	081	40091030	IPCU TRANSITION TO GYNECOLOGY UNIT	3/11/2020	15,479	7	2,211	9,214
005164	018	40091030	WINDHAM RENO TO COVID CENTER	10/31/2020	591,636	20	29,582	93,676
005168	025	40091030	UROLOGY DEPT NEW VINYL FLOORING	6/11/2021	16,458	10	1,646	5,212
005185	083	40091030	GREASE TRAP REPLACEMENT	1/31/2022	23,025	7	3,289	7,127
					15,669,966		393,132	9,898,235
					13,009,900		393,132	2,030,233

ATTACHMENT G ONE-YEAR CAPITAL EXPENDITURE PLAN

Proposal Springfield Hospital GMCB FY24 Capital Budget Summary

Project	Description	Estimated Cost
Nuclear Medicine Renovation	Suite to house new NM/CT Unit	\$ 200,000
IV Pumps	Med/Surg	200,000
Information Technology	Technology Management	100,000
OR Tables	Operating Room	50,000
REMI Mini	Operating Room	50,000
Miscellaneous Items	Miscellaneous	<u>150,000</u>
Total		\$ 750,000
FUNDED BY GRANTS		
Surgery HVAC (AHU-1)	OR Air Handler Upgrade	\$ 304,000
Pharmacy HVAC (AHU-8)	USP 797/800 HVAC Upgrade	200,000
Pedestrian Bridge (Ridgewood)	Replace Bridge	300,000
Nurse Call System	Med/Surg	200,000
Total		\$1,004,000