

Springfield Hospital
GMCB responses to the July 9, 2021 Inquiry email from Lori Perry:

7/9/21

Hi Bob and Kayda,

Thanks for your submission!

We have taken a look at your submission and have found a few items that need to be corrected, we know it is a lot of work but we have many interested parties that review these documents. We bring this items to your attention so you see what we see.

I have attached 5 documents; your narrative, appendix workbook, our B22H35 SH workbook, and 2 Payer Revenue worksheets for your convenience.

- . **To be clear is your NPR/FPP growth FY21-22 is 7.8% (yes) and your charge request is also 7.8%? (No. 8.3%)**
- . **Corrected file tab #2, Table 2 for the outpatient revenue omitted. 8.3% is the gross revenue increase budget 2021 to budget 2022. See correction highlighted in the table.**
- . Take a look at your appendix workbook attached, #2 Table 1 For your Change in Charge Increase this should equal an overall weighted average of 7.8% and using the attached Payer Revenue Input for FY2021 and FY2022 please fill in as appropriate the yellow highlighted areas.
- . **This is correct. Reflects 8.3% charge increase. We did not break out professional fees in a separate line as we do not compute contractals separately on professional fees. They are included in IP and OP data.**
- . Table 4 Are you comfortable with the section about NPR/FPP value of 1% Overall Change in Charge? If GMCB changed your Change in Charge by 1% how much would that equal for your NPR/FPP?
- . **Yes, we are comfortable**
- . **The change as noted per 1% is \$513,000**
- . FYI We noticed in Adaptive that your Acute Care Ave Daily Census maybe calculated differently then what you report in your narrative. Acute Care Days/365. Maybe ADC from page 1 is added with page 2 to equal 18.5?
- . **18.5 includes acute of 10.5 and psyc of 8.0.**

- . Please review your narrative against the appendix workbook for utilization in the reconciliation worksheet which shows a decrease of \$4.7M not \$2.1M.
- . The narrative is incorrect. \$4.7M is the correct utilization decrease. Including a revised narrative reflecting this correction. Thank you for discovering this error.
- . For your charge request your narrative says \$11.8M and your appendix #2 table 1 reports \$9.1M and the weighted overall rate is 8.3% instead of 7.8%.
- . \$9.1M is correct and the overall rate increase of 8.3% is correct.
- . The statement on page 5 under Operating expenses-2022 Budget Compared to 2021 Projected is an increase of \$1.7M—we don't see that amount in what was reported in Adaptive see B22H35_SH file.
- . \$1.4M is the correct number. Adaptive is correct.
- . Page 7 about FY21 projected ACO dues is not what is in Adaptive \$90,563
- . \$90,563 is correct. Adaptive is correct.
- . Page 7 You estimate your maximum risk liability for Medicaid to be \$225,000, is this what should be reported in the appendix workbook #6 which says undeterminable?
- . The maximum risk liability by payer is undeterminable.
- . Please enter your Projected FY21 FTEs into Adaptive
- . The FTE Projection in Adaptive will be updated today.