# FY 2019 Annual Operating and Capital Plan

**Board of Directors Budget Meeting** 

June 12, 2018



Passion. People. Purpose."

# Agenda

#### **Executive Summary**

#### **FY 2019 Budget Overview:**

• Key Plan Drivers | Inflationary Assumptions

#### **Key Statistical / Growth Indicators**

#### Revenue:

- Key Revenue Assumptions / Payor Mix
- Revenue Trend Analysis

#### Salaries, Wages, Benefits & FTEs:

Salary, Benefits, and FTE Trend Analysis

#### **Non Labor Analysis:**

• Supplies | Professional Fees | Purchased Services | Other Direct Expense

#### 2019 Annual Budget Summary / EBIDA Recap

**Three-Year Capital Plan** 



### **Executive Summary**

The FY 2019 Annual Budget lays out a plan for the coming year that puts Palomar Health on a pathway toward achieving the 5-year Strategic Financial and Capital Plan (EBIDA growth of \$17M from the FY 2018 Projection). The plan:

- Refocuses the organization on capital deployment after the 2017 issuance of Certificates of Participation (revenue bonds)
- Includes strategic Service Line development and design to optimize resource utilization and better serve the community
- Reflects a continued effort to absorb inflation and drive efficiency throughout the organization
- Incorporates hiring initiatives to drive targeted improvements in utilization of premium pay dollars
- Supports key organizational goals regarding quality improvement and regulatory compliance
- Aligns the operating and capital budgets with our current year and long-term strategic plan initiatives



# FY 2019 Budget – Key Drivers & Overview



### **Key Plan Drivers**

- Strategic Plan alignment including year-over-year EBIDA improvement, which is consistent with the long-range Financial and Capital Plan targets
- Service Line development in Cardiology Services (including Cardio-Thoracic Surgery), Neuro-Spine, Orthopedics, Oncology, and Bariatric Surgery driving margin improvements in the latter half of the fiscal year
- Planned movement of targeted volume to the Poway Campus to better balance volume and resources throughout the district
- Reassessment of overhead costs at the Downtown Campus throughout FY 2019
- Concerted supply management initiatives to offset inflationary impacts and reduce costs through strategic purchasing and vendor renegotiations, supported by industry benchmark intelligence
- Alignment with the provisions of the new labor union agreements
- Continued reimbursement pressures driven by industry/payor relationships, offset by revenue capture improvement initiatives in Revenue Cycle



## **Inflationary Assumptions**

- FY 2019 Budget assumes the absorption of a significant amount of industry inflation through inventory and utilization improvements
- Palomar Health will continue its relationship with Captis Regional Supply Network to support strategic supply management efforts
- Partnership with Cardinal Health will drive efficiencies in drug cost per case
- Implant costs continue to be a significant driver of overall supply costs with new focus on Cardio-Thoracic Surgery and Neuro-Spine – as such, inflation in this category will pose the most risk

#### **Healthcare Industry Inflations Comparison**

Category / Expense	2019 Budget	Industry Expectation
Implants	1.5%	1-5%
General Surgery Supplies	1%	0-1.8%
Surgical Needles	1%	1-2%
Oxygen – Gas	3%	3-5%
IV Solutions	6%	6-12%
Pharmaceuticals	5%	7.35%
Radioactive and X-Ray Material	0%	0.6-1.3%
Other Medical	0%	0-1.6%
Food / Meat	2.5%	2.5-3%
Linen	1%	1-7%
All Other: Cleaning, Forms, Office, Uniforms	1%	0-7%



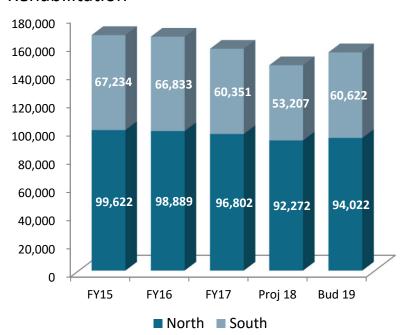
# **Key Statistical Indicators**



## Key Statistical Indicators | Inpatient

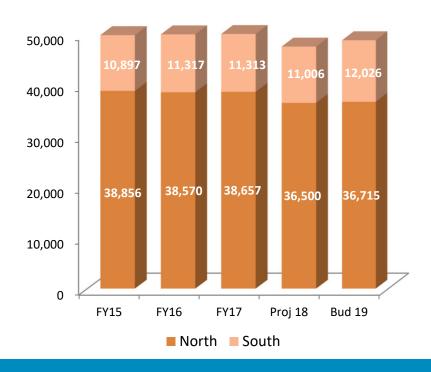
### **Total Patient Days**

FY 2019 Planned Acute Patient Days are increasing by 6.3%, from growth in Skilled Nursing, Gero-Psychiatry, and Acute Rehabilitation



### Adjusted Discharges (Incl. SNF)

FY 2019 Adjusted Discharges are growing by 1,235 discharges, or 2.6%, year over year





## Key Statistical Indicators | Inpatient

### **Deliveries**

FY 2019 Deliveries are relatively flat, following current year trends



### Surgeries

FY 2019 Inpatient Surgeries are growing by 198 cases, or 2.2%, based on planned Service Line development

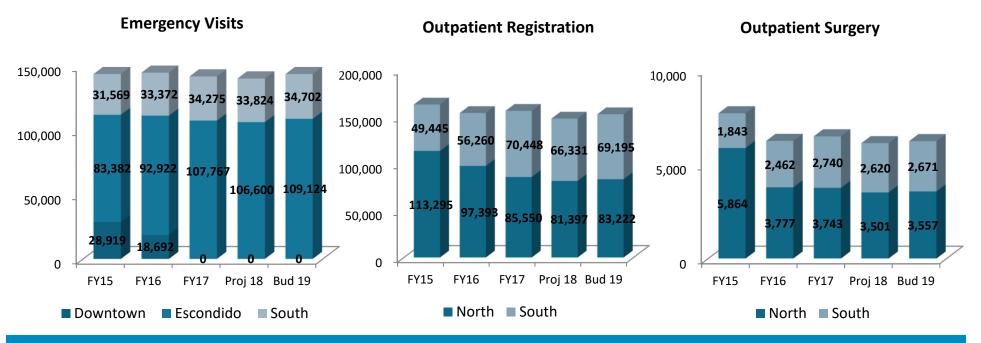




## Key Statistical Indicators | Outpatient

### **Outpatient Services**

- Emergency Visits are increasing by 3,402, or 2.4%, to align with seasonal trends
- Outpatient Registrations are increasing by 4,689, or 3.2%
- Outpatient surgeries are increasing by 106 cases, or 1.7%





# Revenue

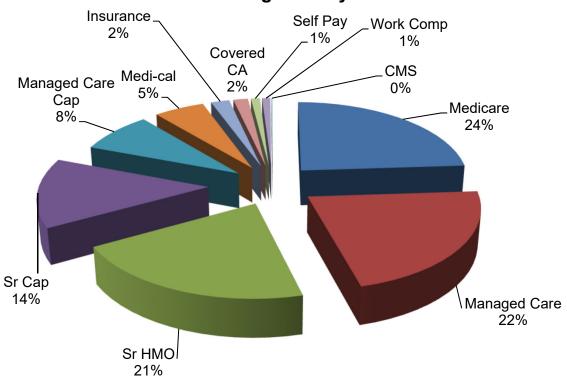


### **Key Revenue Considerations**

Payor Category (in thousands)	Total Charges
Medicare	1,016,633
Managed Care	932,989
Senior HMO	889,596
Senior Capitation	587,834
Managed Care Capitation	346,723
Medi-Cal	233,182
Insurance	85,306
Covered California	67,506
Self Pay	41,416
Workers' Compensation	37,816
CMS	4,940
Total	4,243,943

### Assumptions -

#### FY 2019 Budgeted Payer Mix

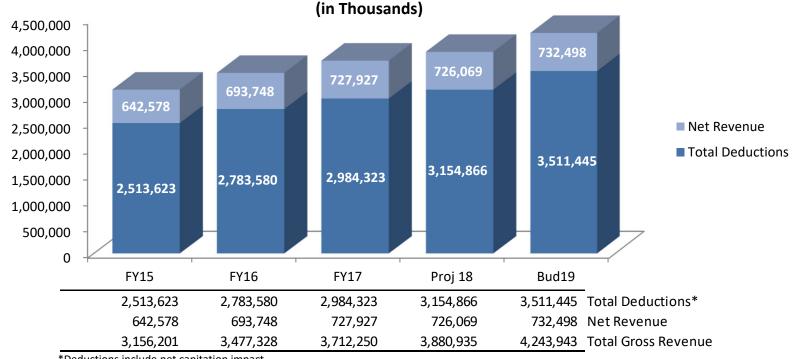


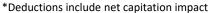
- 7.3% overall effective rate increase (targeted 8%)
- Bad Debt and Uncompensated Care 1.5%; FY 2018 Budget = 1.7%
- Government sources continue to be predominant, with self-pay decreasing year over year



## Revenue Trend Analysis

- Net Revenue is anticipated to increase by \$6.4M, or 1%, year over year
- Increased annual revenues of \$20M from Huron Consulting, with \$15M to be recognized within FY 2019
- Initial revenue improvement from expansion of Service Lines begins in the second half of the year, though the majority of benefit will not be realized until FY 2020







# Salaries, Wages, Benefits & FTEs



### **Labor Impact Summary**

- The FY 2019 Operational Budget reflects a concerted effort to set achievable staffing benchmarks across the district, while complying with California mandatory nurse staffing requirements
- Several hiring initiatives are designed to minimize overtime pay and contract labor
- New position control will prevent unauthorized increases in staffing
- Maintains a significant focus on training positions for New Grad and/or New-to-Specialty RNs
- Targeted staff education is planned to support operational initiatives around quality improvement and technology implementation
- Includes increases in FTEs in key targeted areas to support organizational priorities, including quality & regulatory management
- New sitter program is designed to optimize skill-mix while maintaining patient safety and keeping CNAs on unit
- Planned benefit realignment, including implementation of narrow network, will control
  annual premium increases



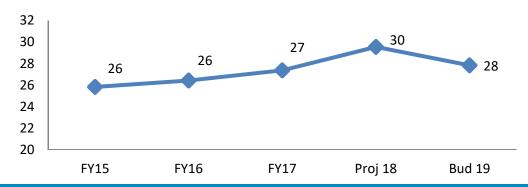
### **FY 2019 Annual Operating and Capital Plan**

# Labor Analysis | FTEs

FY 2019 Budgeted FTE Roll Forward	FTEs
FY 2018 Paid FTEs (as of 12/23/2017)	3,834
Volume-Related Changes	35
Operational Efficiencies	(115)
Targeted FTE Changes	(12)
Efficiency at Downtown Campus	(25)
FY 2019 Paid FTE's	3,716

### FTEs per Adjusted Discharge (Incl. SNF)

Consistent with planned changes, FY 2019 assumes a reduction in FTEs on a per Adjusted Discharge basis

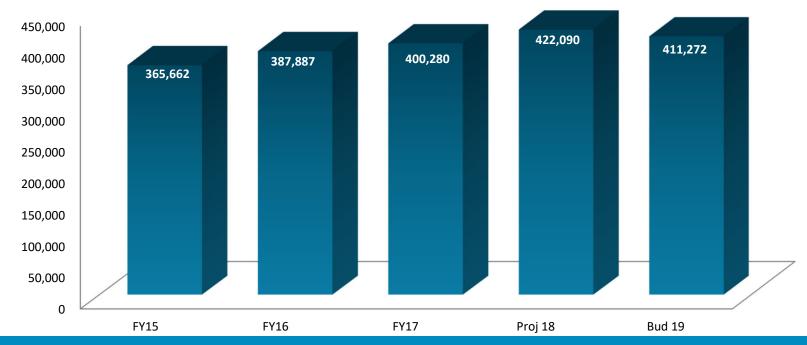




# Labor Analysis | Salaries, Wages & Benefits

- FY 2019 Total Salaries, Wages, Contract Labor, and Benefits are decreasing by \$10.8M, or 3%
- Salary increases are offset by staffing reorganization and significant declines in Agency / Registry Expense over current year







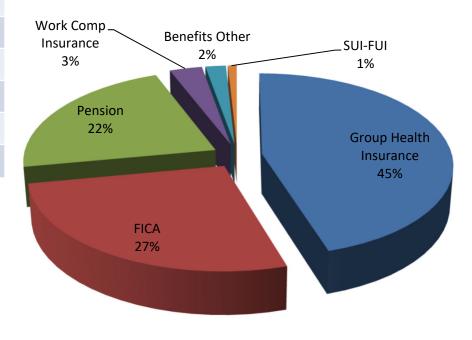
## Labor Analysis | Benefits (excl. PTO)

Type of Benefits	% to Total Benefits
Group Health Insurance	45%
FICA	27%
Pension	22%
Workers' Compensation Insurance	3%
Benefits Other	2%
SUI-FUI	1%
Total Benefit Spend (in thousands)	86,112

### Significant Impacts

- Group Health Insurance premiums have increased by 6.5%, which is offset by savings due to the Narrow Network and other initiatives
- Unemployment Insurance is increasing \$225K, while other benefit categories are relatively flat year over year

#### **Labor Benefits Analysis**





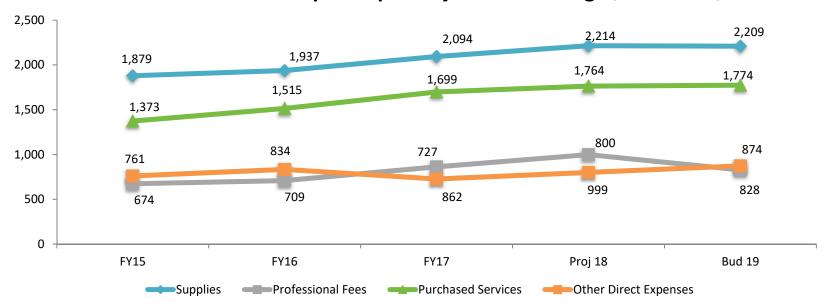
# **Non-Labor Analysis**



# Non-Labor Analysis | Summary

- FY 2019 Non Labor expense is increasing \$2.6M, or 1%
- Non-labor expense is increasing by \$92 on a per Adjusted Discharge basis, primarily driven by supply inflation, building rental expenses, and the cost of revenue collection initiatives

### Trended Non-Labor Expense per Adjusted Discharge (In thousands)





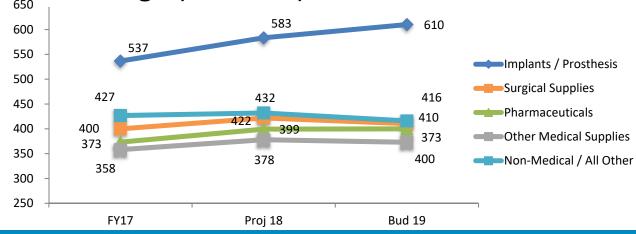
### Non-Labor Analysis | Supplies

FY 2019 Supply Roll-Forward	Expense (in thousands)
FY 2018 Supply Expense (Dec 2017 Projection)	\$105,202
Increases due to Volume and Utilization	2,728
Inflationary Increases (Net of Absorption)	1,755
Supply Reduction Initiative (Captis, Cardinal, & PRAC*)	(2,000)
FY 2019 Budgeted Supply Expense	\$107,685

\*Physician Resource Allocation Committee

### Supplies per Adjusted Discharge (Incl. SNF)

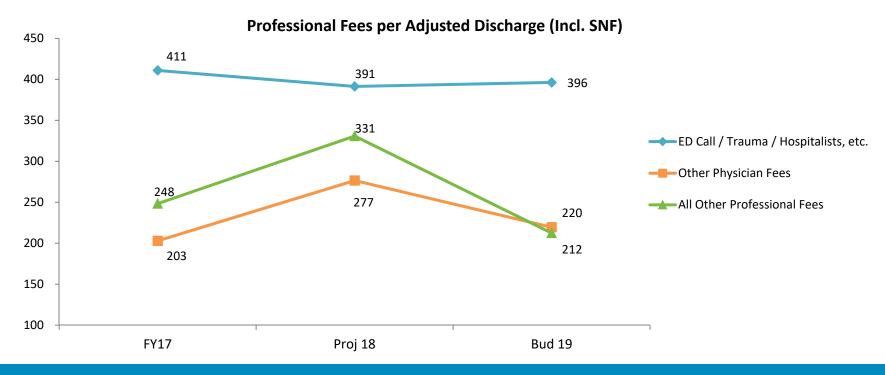
FY 2019 Budgeted supply management efforts and reduction initiatives total \$2M in savings, which is helping to offset significant inflation projected for the coming year





### Non-Labor Analysis | Professional Fees

- FY 2019 Professional Fees are decreasing by \$7.1M, or 15%, after growing substantially for the past two years
- The reductions are primarily driven by decreases in consulting and physician contracting

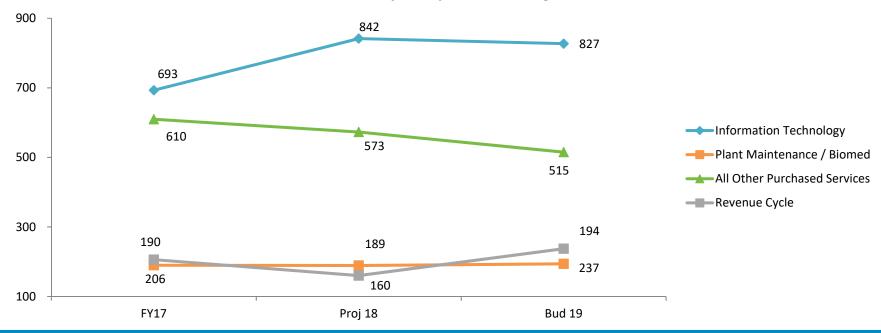




### Non-Labor Analysis | Purchased Services

- FY 2019 Purchased Services are increasing by \$2.7M, or 3.2%
- Increases in Revenue Cycle Improvement costs for Huron consultants and Facilities Maintenance drive the majority of the increases, while Information Technology is relatively flat compared to the FY 2018 Projection

#### Purchased Services per Adjusted Discharge (Incl. SNF)





# Purchased Services | IT Roadmap

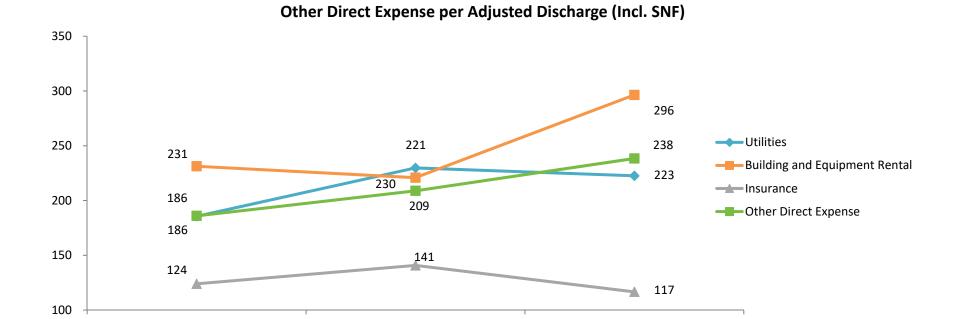
FY 2018 Accomplishments				
PMC Poway Cellular Remediation	IT Security Systems			
Cerner v. 2017 Upgrade	ClairVia - Acuity			
VSee OnDuty Telehealth (CSU)	PMC Escondido Pod D Applications			
Echo Online Application Module	Surgical Instrument Tracking System			
PRIME Projects – Year 2	TeleTracking Upgrade			
Call Manager	Crimson Continuum of Care			
Infusion Center in Clarity (Cerner)	MedAssets Claims Scrubber			

FY 2019 Planned Projects					
Cerner Anesthesia	Clinical Documentation Optimization				
ACR Select	Promoting Interoperability Program (MU3)				
Single Sign On	Health Information Exchange Integration				
Patient Safe	Wound Advantage				
PACS Upgrade	SNF Integration Liaison				



### Non-Labor Analysis | Other Direct Expense

- FY 2019 Budgeted Other Direct Expense is increasing by \$4.6M, or 12%
- Increases of \$3.3M in building rental expenses and \$502,000 in water utilities are the primary drivers



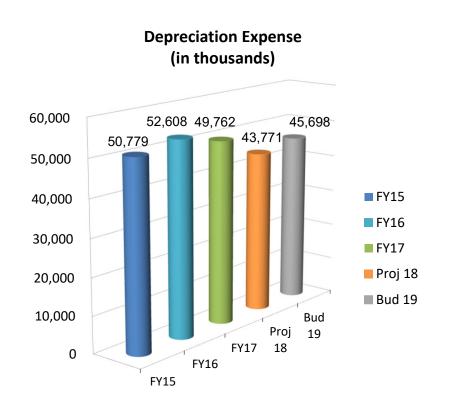


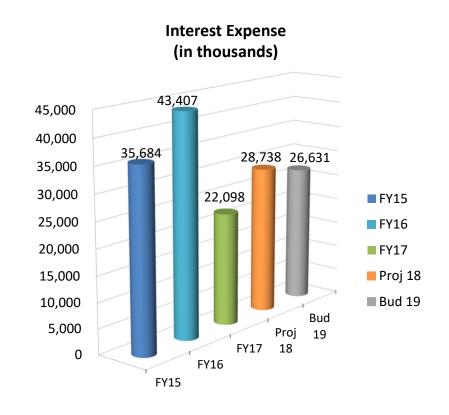
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### Depreciation and Interest Expense





\*Interest expense reflected for Revenue Bonds only



# Annual Operating Budget Summary & EBIDA Recap



### **FY 2019 Annual Operating and Capital Plan**

### Annual Operating Budget Summary and Trend

	F	Results FY16	F	Results FY17	Pı	rojected FY18	6	Budget FY19
Revenue:								_
Gross Revenue		3,477,330,136		3,712,250,300		3,880,935,131		4,243,942,620
Net Revenue		693,157,590		727,926,987		726,069,021		732,498,081
Other Operating Revenue		18,128,784		12,777,222		11,112,035		11,575,557
<b>Total Operating Revenue</b>	\$	711,286,374	\$	740,704,209	\$	737,181,056	\$	744,073,638
Expenses:								
Salaries, Wages, Registry,		387,973,785		400,280,015		422,089,581		411,271,560
Supplies		96,645,668		104,658,357		105,201,805		107,685,308
Depreciation		52,607,947		49,761,573		43,770,969		45,698,209
Other		152,866,993		164,296,945		169,262,975		169,418,562
<b>Total Operating Expense</b>	\$	690,094,393	\$	718,996,890	\$	740,325,330	\$	734,073,639
Operating Income		21,191,981		21,707,319		(3,144,274)		10,000,000
Non-Operating Income (Loss		3,092,752		(1,070,667)		(2,164,688)		(4,500,531)
(Interest Expense)		(43,407,152)		(22,097,513)		(28,738,139)		(26,631,343)
Property Tax Revenue		15,145,434		15,910,055		17,100,000		18,400,000
Income (Loss)	\$	(3,976,985)	\$	14,449,194	\$	(16,947,101)	\$	(2,731,875)
Net Margin %		-0.6%		2.0%		-2.3%		-0.4%
OEBIDA Margin (Excl Proper		10.4%		9.6%		5.5%		7.5%
OEBIDA Margin (Incl Propert		12.5%		11.8%		7.8%		10.0%
EBIDA Margin		12.9%		11.7%		7.5%		9.4%
Total Uncompensated Care		61,959,797		60,336,950		59,512,052		63,368,395
Total Uncompensated Care		1.78%		1.63%		1.53%		1.49%



### **FY 2019 Annual Operating and Capital Plan**

### FY 2019 EBIDA Recap (in thousands)

		Results FY 2015	Results FY 2016	Results Y 2017	Projected FY 2018	Budget FY 2019
Net Income from Ops (Excluding Interest Expense)		9,146	21,192	21,707	(3,144)	10,000
Depreciation Expense		50,779	52,608	49,762	43,771	45,698
OEBIDA	\$	59,925	\$ 73,800	\$ 71,469	\$ 40,627	\$ 55,698
OEBIDA Margin (Excl Property Tax Rev)	-	9.1%	10.4%	9.6%	5.5%	7.5%
OEBIDA Margin (Incl Property Tax Rev)		11.3%	12.5%	11.8%	7.8%	10.0%
EBIDA		82,003	92,038	86,309	55,562	69,597
EBIDA Margin		12.4%	12.9%	11.7%	7.5%	9.4%
Total Uncompensated Care & Bad Debt		72,995	61,960	60,337	59,512	63,368
Total Uncompensated Care as % of Gross		2.31%	1.78%	1.63%	1.53%	1.49%
Net Income/(Loss) after Non-Op Income	\$	(4,460)	\$ (3,977)	\$ 14,449	\$ (16,947)	\$ (2,732)



# **Capital Plan**



### **FY 2019 Annual Operating and Capital Plan**

### Capital Plan | Three-Year Planning Process

During the preparation of the three-year plan, capital priorities are based on:

- Equipment reaching technical obsolescence
- Organizational strategic initiatives
- Capital funding availability

# Funding sources for capital projects and acquisitions include:

- Proceeds from 2017 Certificates of Participation (COP) issuance
- Cash from operations
- Foundation fundraising



### Capital Plan | Bond Issuance

In December 2017, the Palomar Health Board approved the issuance of \$60M in Certificates of Participation (Revenue Bonds). These funds will allow Palomar Health to address deferred capital needs related to:

Routine Equipment Replacement

Facility Infrastructure

Information Technology

Strategic Initiatives



# Capital Plan | Three-Year Summary

### Three-Year Capital Budget Summary (in thousands)

	FY 2019	FY 2020	FY 2021	<b>Total Project Spend</b>
<b>Funded by Operations:</b>				
Equipment	815	1,400	1,500	3,715
Facilities	3,878	7,600	3,600	15,078
Information Technology	308	5,000	3,500	8,808
Subtotal	5,000	14,000	8,600	27,600
Funded by Bonds:				
Equipment	6,339	-	-	6,339
Facilities	14,154	23,200	-	37,354
Information Technology	4,911	-	-	4,911
Subtotal	25,404	23,200	-	48,604
Funded by Foundation:	308	2,700	-	3,008
Total	\$ 30,712	\$ 39,900	\$ 8,600	\$ 79,212



## Capital Plan | Bond Issuance Summary

#### **Bond Issuance Fiscal Year Allocation Summary**

Proceeds from Bond Issuance		60,043,866
Reserved for Floors 9, 10 Infrastructure		(23,200,000)
Available Proceeds:		36,843,866
Funds Budgeted:	FY 2018	(11,422,242)
	FY 2019	(25,404,183)
	FY 2020	-
	FY 2021	-
Total Budgeted:		(36,826,425)

PALOMAR HEALTH

**Unallocated Balance:** 

17,441

### **FY 2019 Annual Operating and Capital Plan**

# Capital Plan | Planned Capital Projects

Capital Project	Capital Allocation
Development of Strategic Service Lines	7,019,760
Poway Modernization	6,811,214
IT Projects & Equipment	4,672,103
Relocation of Downtown Campus Services	4,300,000
Facility Infrastructure Improvements	3,378,954
Defibrillator Replacement and Standardization	1,694,889
Routine Equipment Replacement	1,634,666
Villa Pomerado Modernization	288,132
Employee and Patient Safety	140,371
SART Program	107,800



# FY 2019 Budget Summary & Key Take-Aways



# Summary

- FY 2019 Budget is achievable and ties to the Strategic Financial & Capital Plan; however, it requires success in the following areas:
  - 6.3% increase in Patient Days and 2.6% growth in Adjusted Discharges
  - Successful execution of planned Service Line Development, resulting in 2.2% growth in Inpatient Surgeries
  - Improvement of \$7M in Net Patient Revenue year over year, with continued contributions from the PRIME Program
  - Normalized staffing to reduce reliance on overtime pay and registry labor
  - Transition of all outpatient services from PMC Downtown Escondido by the end of the Fiscal Year

#### Successful Execution will result in:



- Net Income improvement of \$14.2M year over year; Operating Income improvement of \$13.1M year over year
- EBIDA of \$70M

