

Brattleboro Retreat

Pricing for Selected Services

This page provides gross charge information for the hospital's top admissions of adults and children & adolescents. Because each patient receives treatment based on their individual needs, the gross charge to each patient will vary. Admissions with fewer than 15 cases are excluded.

Actual 2010 Inpatient Gross Charges

Inpatient						
	Description	Number of Cases	Hospital Avg. Gross Charge	System Average	System Lowest Average	System Highest Average
	Adult:					
	OPIOID DEPENDENCE	557	12,914.76			
	ALCOHOL DEPENDENCE	383	10,788.39			
	MAJOR DEPRESSIVE DISORDER, RECURRENT, SE	285	20,470.56	No comparative data currently exists.		
	DEPRESSIVE DISORDER NOS	160	15,255.75			
	MAJOR DEPRESSIVE DISORDER, RECURRENT UNS	118	15,385.72			
	MOOD DISORDER NOS	110	17,115.23			
	BIPOLAR DISORDER NOS	73	16,406.23			
	POSTTRAUMATIC STRESS DISORDER	69	15,575.58			
	SCHIZOAFFECTIVE DISORDER	59	36,697.71			
	BIPOLAR I DISORDER, MOST RECENT EPISODE	35	23,374.00			
	MAJOR DEPRESSIVE DISORDER, RECURRENT MOD	33	13,494.39			
	BIPOLAR I DISORDER, MOST RECENT EPISODE	33	18,379.24			
	SEDATIVE, HYPNOTIC, OR ANXIOLYTIC DEPEND	29	15,147.24			
	MAJOR DEPRESSIVE DISORDER, RECURRENT, SE	25	31,831.60			
	PSYCHOTIC DISORDER NOS	25	33,722.40			
	BIPOLAR I DISORDER, MOST RECENT EPISODE	18	22,724.72			
	BIPOLAR I DISORDER, MOST RECENT EPISODE	18	38,732.78			
	Child & Adolescent:					
	MOOD DISORDER NOS	269	30,568.94			
	DEPRESSIVE DISORDER NOS	118	25,810.51			
	MAJOR DEPRESSIVE DISORDER, RECURRENT, SE	72	25,937.78			
	POSTTRAUMATIC STRESS DISORDER	43	30,262.09			
	BIPOLAR DISORDER NOS	28	35,823.21			
	ANXIETY DISORDER NOS	22	26,105.23			
	MAJOR DEPRESSIVE DISORDER, RECURRENT UNS	18	24,143.06			
	MAJOR DEPRESSIVE DISORDER, SINGLE EPISOD	15	20,080.67			
Percent of inpatient cases and gross revenues generated by these admissions:		89.1%	86.6%			

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Gross Revs

\$7,193,520
 \$4,131,955
 \$5,834,110
 \$2,440,920
 \$1,815,515
 \$1,882,675
 \$1,197,655
 \$1,074,715
 \$2,165,165
 \$818,090
 \$445,315
 \$606,515
 \$439,270
 \$795,790
 \$843,060
 \$409,045
 \$697,190
 \$0
 \$0
 \$8,223,045
 \$3,045,640
 \$1,867,520
 \$1,301,270
 \$1,003,050
 \$574,315
 \$434,575
 \$301,210

\$49,541,130 Total in list
\$57,232,397 2010 Total IP gross revenues

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Pricing for Selected Services

This page provides gross charge information for the hospital's top outpatient visits. Because each patient receives treatment based on their individual needs, the gross charge to each patient will vary.

Actual 2010 Outpatient Gross Charges

Outpatient						
	Description	Number of Visits	Hospital Avg. Gross Charge	System Average	System Lowest Average	System Highest Average
	Adult Partial Hospitalization (1)	3,266	\$663			
	Starting Now/IOP(2)	7,380	\$117	No comparative data currently exists.		
	Child/Adolescent Partial Hospitalization (1)			program closed summer 2008		
	Hospital Outpatient (2)	2,856	\$418			
	Uniform Serive Program (3)	1,062	\$1,143			
	(1) Services provided 5 days/wk, 6-8 hr per day					
	(2) Services provided 3-5 days/wk, 3-4 hr per day					
	(3) Servies provided 7 days/wek, 6-8 hr per day					
	A patient visit includes multiple group sessions and therapies per day for treatment of their condition.					

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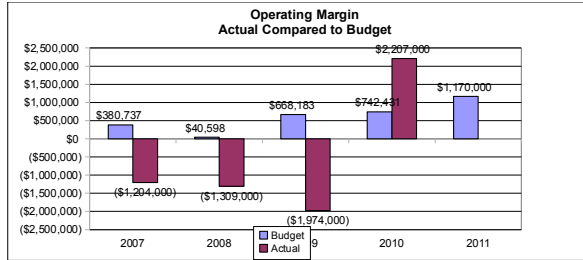
Brattleboro Retreat

Budget and Financial Information

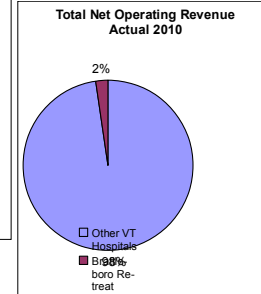
This page provides information about the hospital's finances, workforce, and patient admissions and visits.

Income, Expenses & Margin		(all #'s in thousands; #'s in parentheses are negative)			
Definition		Actual 2008	Actual 2009	Actual 2010	Budget 2011
Gross Patient Revenue	Total of all patients' bills.	\$71,385	\$78,018	\$94,700	\$100,662
Uncompensated Care	Total of all patient bills not paid by insurance or patients.	(\$767)	(\$1,031)	(\$199)	(\$213)
Contractual Allowances	Discounts or amounts of charges not paid by insurers, Medicare, and Medicaid.	(\$36,725)	(\$41,978)	(\$51,940)	(\$57,497)
Other Operating Revenue	Money collected for non-medical services such as cafeteria services.	\$1,561	\$2,287	\$2,267	\$3,585
Total Net Operating Revenue	Actual money collected for services.	\$35,454	\$37,296	\$44,828	\$46,537
Salaries & Fringe	Wages and benefits for all hospital employees. Includes contracted physicians.	\$26,344	\$28,658	\$30,864	\$33,484
Other Operating Expense	Non-wage costs such as supplies, drugs, utilities, and insurance.	\$9,154	\$9,312	\$10,433	\$10,605
Depreciation / Amortization	Current costs of buildings, property, and equipment.	\$1,265	\$1,300	\$1,324	\$1,278
Total Operating Expense	Total of the above three items.	\$36,763	\$39,270	\$42,621	\$45,367
Operating Margin	Revenues remaining after expenses are paid.	(\$1,309)	(\$1,974)	\$2,207	\$1,170
Non-Operating Revenue	Revenues earned from non-patient services such as investments and contributions.	\$371	\$471	\$458	\$500
Total Margin	The sum of Operating Margin and Non-Operating Revenue.	(\$938)	(\$1,503)	\$2,665	\$1,670

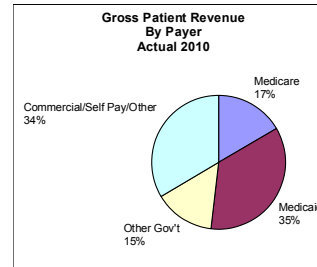
Operating Indicators		Actual 2008	Actual 2009	Actual 2010	Budget 2011
Acute Admissions	Number of hospital patients who stay overnight.	2,105	2,375	2,935	2,915
Residential Admissions	Number of Child and Adolescent patients residing at the Retreat	84	118	119	124
Acute Avg. Length of Stay	How long the average patient stays in the hospital (in days).	10.4	9.7	9.5	9.4
Residential Ave Length of Stay (Range)	How long the average patient stays in the Residential Program (in days).	126	108	103	89
Outpatient Gross Revenue %	Percentage of billings for those receiving care in outpatient settings such as day surgery.	9.1%	8.2%	8.3%	8.5%
Professional Office Visits	Patient visits for outpatient counseling	27,400	28,664	29,644	30,084
Direct Care Staff	Rn's, MHW's, Social Workers, Psychologists, Activity Therapists, Teachers-Staff	260	257		
Non-MD Employees	Number of full-time employees who are not doctors.	236	222		
Physician Employees	Number of full-time hospital-employed doctors.	8	11	12	16



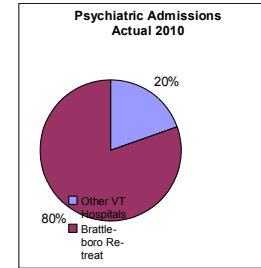
This graph shows the actual total amount the hospital earned as a surplus compared to what it planned to earn. 2011 does not have actual results yet.



This graph shows Brattleboro Retreat's share of the total amount of revenues collected by Vermont hospitals in 2010.



This graph shows who was charged for hospital services by the different payer types (Medicare, Medicaid, other government, commercial insurers, self payers).



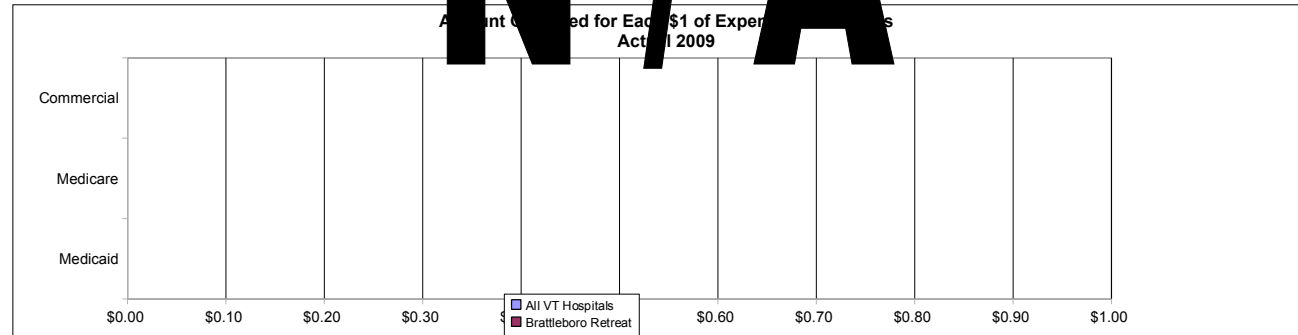
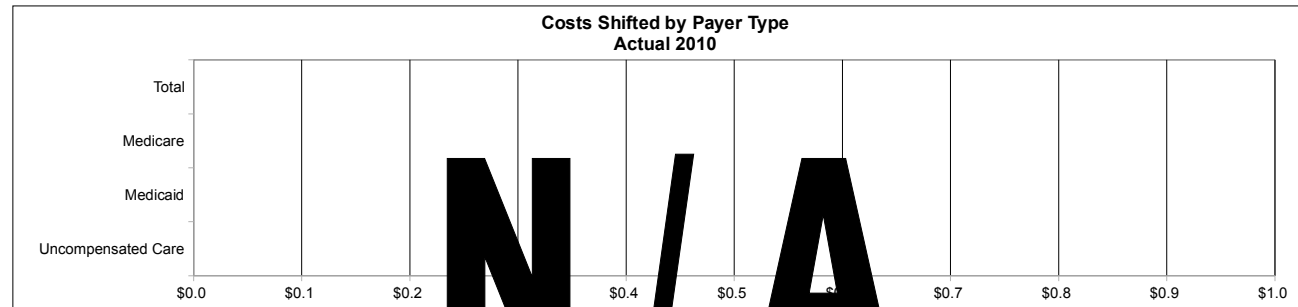
This graph shows Brattleboro Retreat's share of psychiatric acute admissions in Vermont in 2010.

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Brattleboro Retreat					
DATA FOR CHARTS					
Total Net Operating Revenue					
	Act 10				
Other VT Hospitals	\$1,863,640	(includes State Hospital)			
Brattleboro Retreat	(\$44,828)				
Psychiatric Admissions					
	Act 10				
Other VT Hospitals	(714)	(includes State Hospital)			
Brattleboro Retreat	2,935				
Operating Margin					
	2007	2008	2009	2010	2011
Budget	\$380,737	\$40,598	\$668,183	\$742,431	\$1,170,000
Actual	(\$1,204,000)	###	(\$1,974,000)	\$2,207,000	
Payer Split, Gross Revenue					
	Act 10				
Medicare	16.6%				
Medicaid	35.2%				
Other Gov't	14.7%				
Commercial/Self Pay/Other	33.5%				
Total	100.0%	(should be 100%)			

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Cost Shift

A hospital incurs costs to provide services to their patients. All patients, regardless of their ability to pay, are billed the same price for the same service. Sometimes the payment received by the hospital is less than cost for the services provided. This includes payments from uninsured, Medicare, and Medicaid patients. When the payment doesn't cover the cost to provide those services, this unreimbursed cost is passed on to other payers; this is the "cost shift". The ability to cost shift helps the hospital maintain its financial health.



The cost shift for Brattleboro Retreat is not available at this time.

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DATA FOR CHARTS

Cost Shift

Total Dollars		feed
Uncompensated Care	\$0	\$0
Medicaid	\$0	\$0
Medicare	\$0	\$0
Total	\$0	

per Dollar	All VT Hospitals	Brattleboro Retreat
Uncompensated Care	\$0.02	\$0.01
Medicaid	\$0.00	\$0.00
Medicare	\$0.00	\$0.00
Commercial	\$0.00	\$0.00

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Financial Health Benchmarks & Indicators

This page provides information about the hospital's financial health. It includes information on the hospital's ability to pay its bills and how much it costs to run the hospital. Benchmarks provided here are for typical acute care community hospitals. Brattleboro Retreat does not provide the full scope of services of a typical acute care community hospital so comparisons to the benchmarks may not be appropriate.

	Definition	National Benchmarks				2009 ² S & P ³ A- Rated	Hospital Data				Vermont Budget 2011 Median
		2009 ¹					Actual 2008	Actual 2009	Actual 2010	Budget 2011	
		Major Teaching	New England	RNFP ³ 25-99 Beds	RNFP ³ 100-249 Beds						
Cash & Revenue Indicators											
Days Cash on Hand	The number of days of cash available to run the hospital.	N/A	N/A	N/A	N/A	170.3	19.3	4.7	19.5	28.7	Not Applicable
Current Ratio ⁴	Ability to pay short-term bills.	1.9	1.5	1.5	2.0	N/A	1.2	1.3	1.5	2.5	
Outpatient Gross Revenue %	Percentage of billings for those receiving care in less than 24 hours.	36.3%	57.6%	61.0%	50.6%	N/A	8.8%	8.4%	9.7%	11.0%	
Total Margin as % of Net Revenues	Percent of money left over after expenses are paid.	3.0%	1.8%	1.6%	2.1%	5.5%	-2.7%	-3.9%	6.2%	3.8%	
Productivity & Cost Indicators											
Return on Assets	One measure of how a hospital is doing financially.	3.1%	2.0%	1.9%	2.2%	N/A	-24.8%	-0.4%	8.8%	4.7%	Not Applicable
FTEs per 100 Adjusted Inpatient and Residential Discharges	A measure of employee efficiency.	8.6	5.8	5.0	5.6	N/A	18.0	16.6	14.1	16.0	
Overhead Expense w/ Fringe, as % of Total Operating Expense	Another measure of efficiency.	29.2%	31.8%	30.6%	30.4%	N/A	19.3%	18.3%			
Salary & Benefits per FTE, Non-MD	Total average cost for a full time employee who is not a doctor.	\$70,030	\$78,806	\$61,355	\$67,424	N/A	\$61,801	\$65,754	\$66,552	\$62,689	
Cost per Adjusted Admission (Inpatient and Residential)	The average hospital cost for a patient.	\$14,740	\$8,649	\$7,034	\$8,679	N/A	\$13,097	\$12,664	\$10,752	\$11,023	

Net Revenue per Adjusted Admission

FTEs per adjusted occupied bed measures the cost effectiveness of the organization related to the total labor costs required to provide services to patients on a daily basis.

The Retreat's cost per adjusted admission is higher than a general hospital due to the longer lengths of stay of the patients that are treated. For an acute inpatient psychiatric admission the length of stay is 10 days, which is double the length of stay of most general hospital patients. Psychiatric residential lengths of stay can be 100 days or more.

¹ 2009 benchmarks are 50th percentile data from "The Sourcebook: The Comparative Performance of U.S. Hospitals", published by Solucient, LLC, and are all national groupings except for New England.

² 2009 stand-alone hospital medians from Standard and Poor's, the bond rating agency. The bond rating is one indicator of how likely it is that a hospital would be able to borrow money.

³ Rural Not-For-Profit. The grouping includes rural not-for-profit hospitals in the U.S. having a number of beds between the number shown.

⁴ The calculation of current ratio includes funded depreciation, which is not included in the national benchmarks shown.

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Hospital Capital Investments

This page provides information about the hospital's capital spending plans for the next four years. Capital spending is money spent on purchases and improvements to the hospital including buildings, property, and equipment.

Capital Indicators	Definition	National Benchmarks					Hospital Data				Vermont	
		2009 ¹		2009 ²		S & P ³ A- Rated	Actual	Actual	Actual	Budget	Budget 2011 Median	
		Major Teaching	New England	RNFP ³ 25-99 Beds	RNFP ³ 100-249 Beds		2008	2009	2010	2011		
Age of Plant	The average age (in years) of buildings and equipment.	11.0	10.6	10.2	10.5	9.9	18.3	18.4	18.8	21.1	Not Applicable	
Age of Plant - Building	The average age (in years) of buildings.	N/A	N/A	N/A	N/A	N/A	18.2	19.1	19.7	22.1		
Age of Plant - Equipment	The average age (in years) of equipment.	N/A	N/A	N/A	N/A	N/A	18.8	16.2	15.9	17.9		
Net Property, Plant & Equipment per Staffed Bed	On average, the amount of buildings, property, and equipment for each hospital bed.	\$474,116	\$414,922	\$315,558	\$332,951	N/A	\$65,019	\$62,983	\$60,685	\$50,860		
Long Term Debt to Total Assets	The hospital's borrowing compared to what it owns.	33.0%	40.0%	27.0%	33.0%	N/A	35.5%	37.5%	31.6%	30.3%		
Capital Acquisitions as % of Net Patient Revenue	A measure of spending on buildings, property, and equipment.	N/A	N/A	N/A	N/A	N/A	3.8%	4.8%	2.0%	2.3%		
						Hospital Data						
						(all #s in thousands)	Actual 2010	Budget 2011	Plan 2012	Plan 2013		
Building & Property Capital Expenditures	Money spent to buy hospital buildings and property.										
Equipment Capital Expenditures	Money spent to buy hospital equipment.										
Possible Certificate of Need (CON) Projects	Projects the hospital needs a permit from the state to build or acquire.											
None						\$0	\$0	\$0	\$0		
											
Total Capital Expenditures	Total money spent on buildings, property, equipment, and possible CONs.					\$0	\$0	\$0	\$0		

Capital expenditures in a psychiatric hospital relate primarily to the physical plant and equipment expenditures relate more to the patients' physical surroundings. Investment in expensive technological diagnostic equipment for general medical services does not occur in a psychiatric facility as it would in a general medical hospital.

The Retreat's capital planning has a much shorter time horizon and is based on cash availability for a given year after the current year operating needs have been determined.

¹ 2009 benchmarks are 50th percentile data from "The Sourcebook: The Comparative Performance of U.S. Hospitals", published by Solucient, LLC, and are all national groupings except for New England.

² 2009 stand-alone hospital medians from Standard and Poor's, the bond rating agency. The bond rating is one indicator of how likely it is that a hospital would be able to borrow money.

³ Rural Not-For-Profit. The grouping includes rural not-for-profit hospitals in the U.S. having a number of beds between the number shown.