

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 2022 Inpatient Gross Charges

Inpatient		
Description	Number of Cases	Hospital Avg. Gross Charge
Adult:		
MDD (major depressive disorder)(F32.9)	86	34,368.43
Major depressive disorder, recurrent severe without psychotic	68	31,276.16
Major depressive disorder, recurrent episode, severe(F33.2)	65	50,021.66
Schizophrenia(F20.9)	48	176,178.90
Schizoaffective disorder, bipolar type(F25.0)	46	153,397.68
MDD (major depressive disorder), recurrent episode, severe(F33.2)	45	33,696.40
Major depressive disorder(F32.9)	40	37,156.21
Schizoaffective disorder(F25.9)	38	173,914.10
MDD (major depressive disorder), recurrent severe, without	35	38,812.87
Unspecified psychosis(F29)	18	57,058.90
Unspecified psychosis not due to a substance or known physiological	17	103,208.38
Bipolar 1 disorder(F31.9)	15	56,018.61
Unspecified	15	27,680.26
Child & Adolescent:		
DMDD (disruptive mood dysregulation disorder)(F34.81)	100	76,507.29
MDD (major depressive disorder)(F32.9)	44	73,832.92
Disruptive mood dysregulation disorder(F34.81)	42	74,217.29
Major depressive disorder, recurrent severe without psychotic	19	53,339.34
Major depressive disorder, single episode, severe(F32.2)	16	53,438.63
Percent of inpatient cases and gross revenues generated by these admissions:		

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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 2022 Outpatient Gross Charges

Outpatient		
Description	Number of Visits	Hospital Average Gross Charge
Adult Partial Hospitalization (1)	2276	\$964
Starting Now/IOP(2)	2581	\$132
Child/Adolescent Partial Hospitalization (1)		
Hospital Outpatient (2)	1535	\$580
Uniform Service Program (3)	244	\$806
Health Care Workers Program	483	\$908
(1) Services provided 5 days/wk, 6-8 hr per day		
(2) Services provided 3-5 days/wk, 3-4 hr per day		
(3) Services provided 7 days/week, 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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Budget and Financial Information

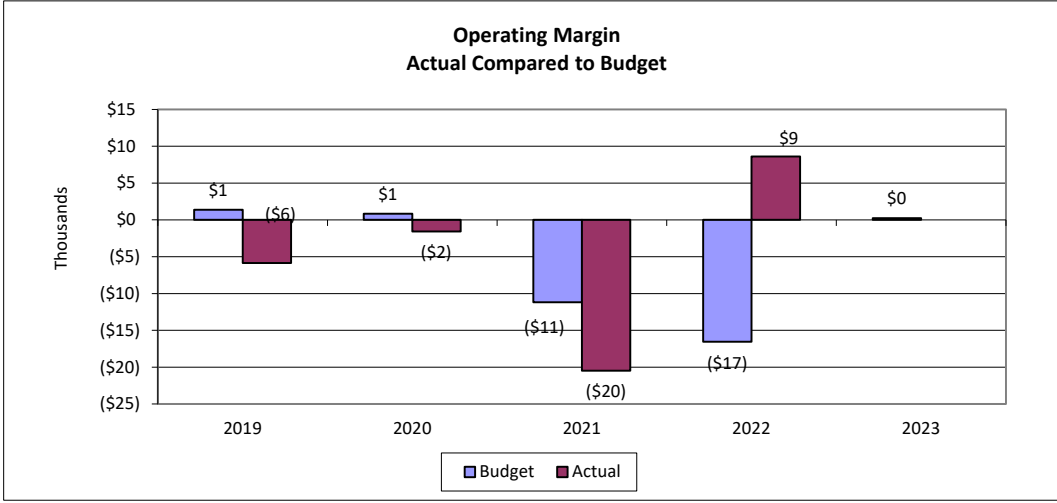
This page provides information about the hospital's finances, workforce, and patient admissions and visits.

Income, Expenses & Margin		(all #s in thousands; #s in parentheses are negative)			
	<u>Definition</u>	<u>Actual 2020</u>	<u>Actual 2021</u>	<u>Actual 2022</u>	<u>Budget 2023</u>
Gross Patient Revenue	Total of all patients' bills.	\$116,518	\$89,360	\$106,243	\$149,702
Uncompensated Care	Total of all patient bills not paid by insurance or patients.	(\$233)	(\$206)	(\$528)	(\$674)
Contractual Allowances	Discounts or amounts of charges not paid by insurers, Medicare, and Medicaid.	(\$67,155)	(\$53,562)	(\$43,006)	(\$64,749)
Bad Debt		\$0	(\$380)	(\$2,150)	(\$2,994)
Other Operating Revenue	Money collected for non-medical services such as cafeteria services.	\$20,375	\$25,596	\$20,184	\$909
Total Net Operating Revenue	Actual money collected for services.	\$69,505	\$60,808	\$80,743	\$82,194
Salaries & Fringe	Wages and benefits for all hospital employees. Includes contracted physicians.	\$53,338	\$44,029	\$56,282	\$65,013
Other Operating Expense	Non-wage costs such as supplies, drugs, utilities, and insurance.	\$15,986	\$14,284	\$13,875	\$14,984
Depreciation / Amortization	Current costs of buildings, property, and equipment.	\$1,760	\$1,755	\$1,968	\$1,976
Total Operating Expense	Total of the above three items.	\$71,084	\$60,068	\$72,125	\$81,973
Operating Margin	Revenues remaining after expenses are paid.	(\$1,579)	\$740	\$8,618	\$221
Non-Operating Revenue	Revenues earned from non-patient services such as investments and contributions.	\$243	\$89	(\$375)	\$0
Total Margin	The sum of Operating Margin and Non-Operating Revenue.	(\$1,336)	\$829	\$8,243	\$221

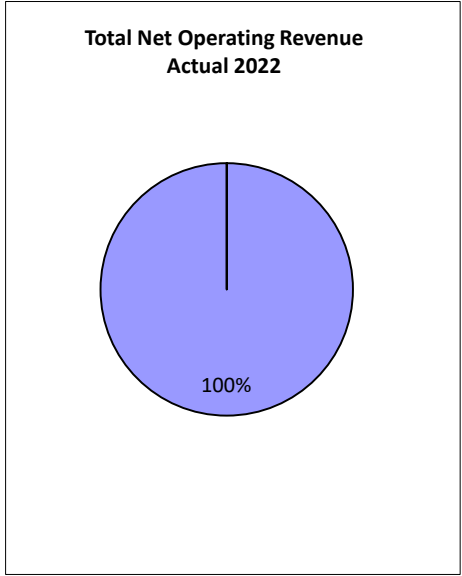
Operating Indicators		<u>Actual 2020</u>	<u>Actual 2021</u>	<u>Actual 2022</u>	<u>Budget 2023</u>
	<u>Definition</u>				
Acute Admissions	Number of hospital patients who stay overnight.	1,873	1045	1,232	2,043
Residential Admissions	Number of Child and Adolescent patients residing at the hospital.	16	6	8	6
Acute Avg. Length of Stay	How long the average patient stays in the hospital (in days).	12.7	17.9	18.3	16.6
Residential Ave Length of Stay (Range)	How long the average patient stays in the Residential Program (in days).	152	372	348	348
Outpatient Gross Revenue %	Percentage of billings for those receiving care in outpatient settings such as day surgery.	11.4%	13%	10.7%	10.0%
Professional Office Visits	Patient visits for outpatient counseling.	23,522	24,549	26,836	27,438
Direct Care Staff	RNs, MHWs, Social Workers, Psychologists, Activity Therapists, Teachers-Staff.	281	233	169	202
Non-MD Employees	Number of full-time employees who are not doctors.	125	157	336	374
Physician Employees	Number of full-time hospital-employed doctors.	10	9	8	11

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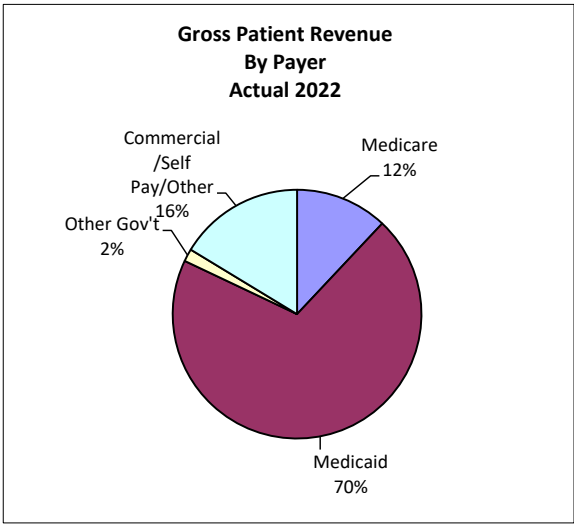
Budget and Financial Information



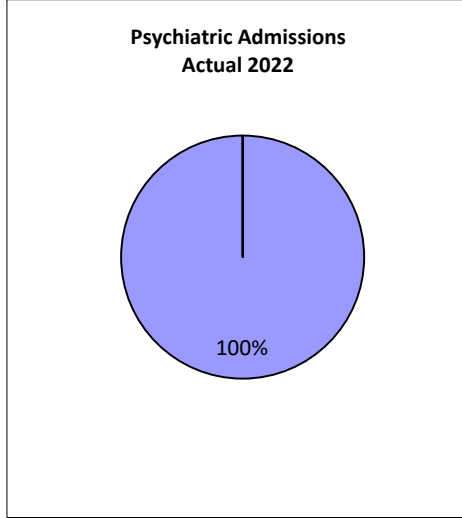
This graph shows the actual total amount the hospital earned as a surplus compared to what it planned to earn. 2023 does not have actual results yet.



This graph shows Brattleboro Retreat's share of the total amount of revenues collected by Vermont hospitals in 2022.



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



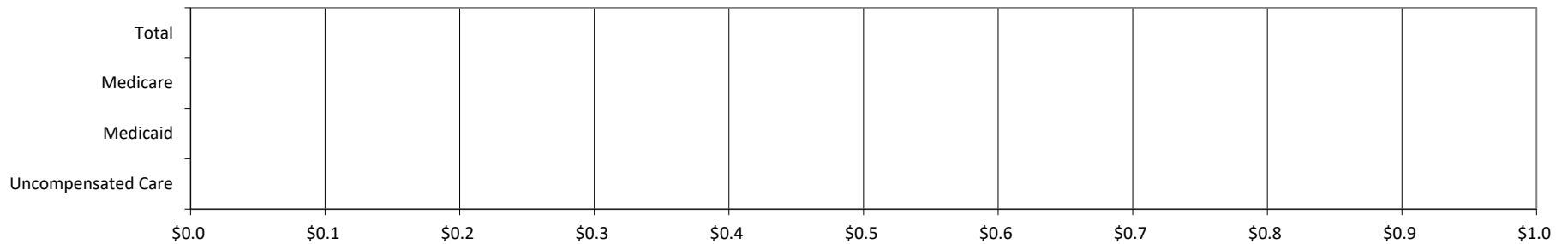
This graph shows Brattleboro Retreat's share of psychiatric acute admissions in Vermont in 2022.

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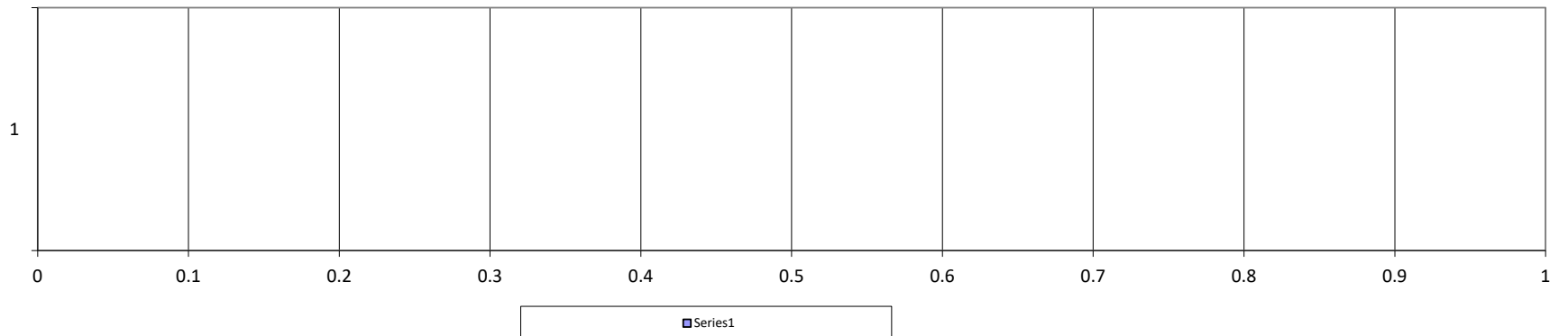
Cost Shift

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.

**Costs Shifted by Payer Type
Actual 2022**



**Amount Collected for Each \$1 of Expense and Surplus
Actual 2022**



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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.

		Hospital Data				Vermont
		Actual 2020	Actual 2021	Actual 2022	Budget 2023	Budget 2023 Median
<u>Cash & Revenue Indicators</u>						
	<u>Definition</u>					
Days Cash on Hand	The number of days of cash available to run the hospital.	51.0	94.0	133.0	140.8	
Current Ratio	Ability to pay short-term bills.	0.7	0.8	1.4	1.2	
Outpatient Gross Revenue %	Percentage of billings for those receiving care in less than 24 hours.	6.4%	10.4%	9.9%	9.5%	
Total Margin as % of Net Revenues	Percent of money left over after expenses are paid.	-2.7%	2.4%	-1.7%	0.1%	
<u>Productivity & Cost Indicators</u>						
Return on Assets	One measure of how a hospital is doing financially.	-3.0%	-1.5%	-1.8%	0.4%	
FTEs per 100 Adjusted Inpatient and Residential Discharges	A measure of employee efficiency.	26.3	38.5	40.5	23.2	
Overhead Expense w/ Fringe, as % of Total Operating Expense	Another measure of efficiency.	20.1%	21.0%	27.0%	23.4%	
Salary & Benefits per FTE, Non-MD	Total average cost for a full time employee who is not a doctor.	\$82,867	\$78,954	\$71,634	\$79,717	
Cost per Adjusted Admission (Inpatient and Residential)	The average hospital cost for a patient.	\$30,548	\$45,848	\$46,804	\$36,041	

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.

Brattleboro 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

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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.

		Hospital Data				Vermont
		Actual <u>2020</u>	Actual <u>2021</u>	Actual <u>2022</u>	Budget <u>2023</u>	Budget 2023 <u>Median</u>
<u>Capital Indicators</u>						
	<u>Definition</u>					
Age of Plant	The average age (in years) of buildings and equipment.	23.5	24.5	23.6	23.1	
Age of Plant - Building	The average age (in years) of buildings.	25.8	262.2	22.9	23.8	
Age of Plant - Equipment	The average age (in years) of equipment.	17.5	19.8	26.8	20.9	
Net Property, Plant & Equipment per Staffed Bed	On average, the amount of buildings, property, and equipment for each hospital bed.	\$152,604	\$148,053	\$137,553	\$137,553	
Long Term Debt to Total Assets	The hospital's borrowing compared to what it owns.	23.6%	17.3%	0.3%	0.3%	
Capital Acquisitions as % of Net Patient Revenue	A measure of spending on buildings, property, and equipment.	10.3%	3.1%	0.8%	2.6%	
<u>Capital Plans</u>						
Building & Property Capital Expenditures	Money spent to buy hospital buildings and property.					
Equipment Capital Expenditures	Money spent to buy hospital equipment.					
<u>Possible Certificate of Need (CON) Projects</u>	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.

Brattleboro Retreat's capital planning has a much shorter time horizon and is based on cash availability for a given year after the current year