FY25 Academic Enterprise & VMG Budget

Please mute your phones as this presentation will be recorded. We will take questions at the end of the presentation.

VANDERBILT VUNIVERSITY MEDICAL CENTER

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FY25 Budget Kick-off Agenda

- 1. Tom's Introduction
- 2. Budget Calendar, Assumptions, Parameters
- 3. VU Grants and Gifts
- 4. Workday Adaptive Planning
- 5. Professional Revenue
- 6. Personnel
- 7. Gifts and Grants
- 8. Non-Labor Expenses and Other Revenue
- 9. Allocations
- 10.Submissions
- 11.Resources

Academic Enterprise/VMG Finance – Our Team

Tom Netolicky Valenica Frierson Scott (Lead Admin Asst) Tracie Grandy Jeannine Ramsey Melissa Ahler Amy Ivey Jake Sawatzky Rachel Babcock Jack Bouaphachanh Norah Morrison **Charlie Gayle** Anna Jane Ledbetter Ann Donoghue



Budget Support Email: budgetprofinance@vumc.org

AE/VMG Finance Resource Page: https://www.vumc.org/finance/academic-enterprise-and-vmg



Teamwork... It's not about the pieces but how they work together!

Rating agencies have become increasing pessimistic during 2022

Moody's

Outlook: Negative

December 2021 Mid-Year Update June 2022



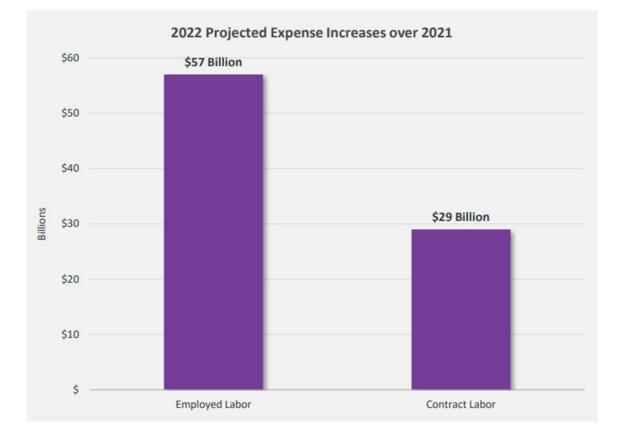
Revised Neutral→ Deteriorating December 2021; August 2022

S&P Global Ratings

Stable, Pressure Mounting→ Negative

January 2022 Mid-year Update June 2022

Labor Expense Increases in 2022 Are Driven Primarily by Employed Staff, but Contract Labor Will Continue to Pressure Hospitals



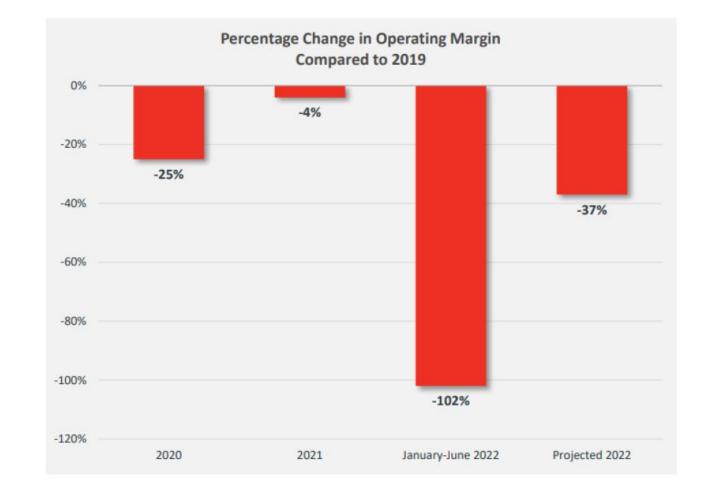
KEY TAKEAWAYS

- Employed labor expenses are projected to exceed 2021 levels by \$57 billion in 2022, with labor costs generally accounting for approximately half of a hospital's total expenses.
- Contract labor expenses—or expenses for temporary, non-staff workers—will continue to pressure hospitals, although the growth rate over 2021 levels is expected to slow through the remainder of 2022.
- Contract labor expenses remain nearly 500% higher than pre-pandemic levels.

KaufmanHall THE CURRENT STATE OF HOSPITAL FINANCES: FALL 2022 UPDATE

Slide from last year kick-off

Projected Margins Are on Track to Make 2022 the Worst Year for Hospitals Since the Beginning of the Pandemic



KEY TAKEAWAYS

- The first six months of 2022 have been extremely difficult, with the median margin remaining negative.
- Initial results from the beginning of the second half of 2022 indicate continued challenges, with margins remaining firmly negative.
- Optimistic projections for the entirety of 2022 indicate margins will be down 37% relative to pre-pandemic levels.
- Pessimistic projections for 2022 show a possible 133% decline in margins.

HEALTHCARE FINANCE

FOR PAYERS | RES

REIMBURSEMENT | REVENUE CYCLE MANAGEMENT | STRATEGIC PLANNING | CAPITAL FINANCE | SUPPLY CHAIN |

NOV 09 MORE ON REVENUE CYCLE MANAGEMENT

Moody's upgrades healthcare outlook from negative to stable for 2024

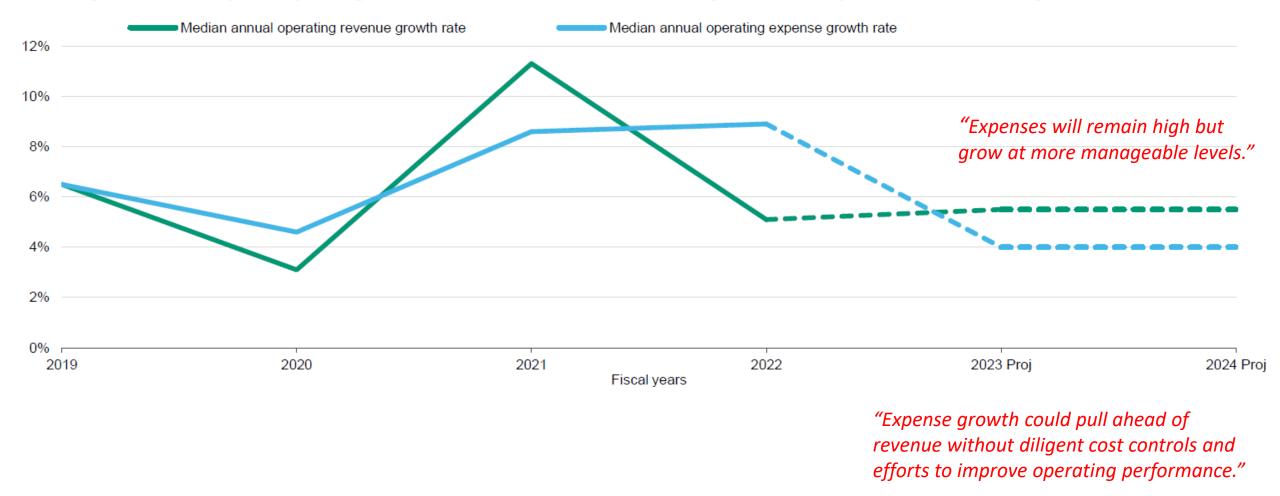
The bottom line is hospitals' operating cash flows and margins will improve and revenue growth will slightly top expenses.

Moody's Investors Service has revised its 2024 outlook for the not-for-profit and public healthcare sector to stable from negative, driven in large part by a decrease in labor costs.

While hospitals will continue to grapple with high expenses because of a shortage of skilled labor, particularly nurses, Moody's predicts that the growth in expenses will slow as hospitals make greater efforts to recruit and retain full-time staff, partly through providing expanded benefit packages. This will reduce reliance on expensive contract labor.

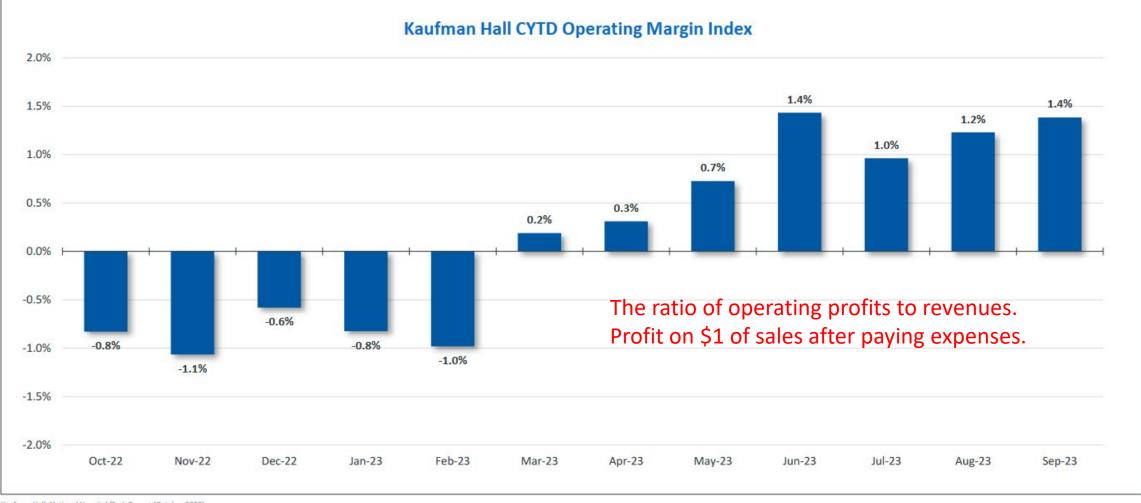
Moody's Calendar Year 2024 Outlook

Revenue growth will surpass expense growth as labor costs decelerate, though baseline expenses will remain high



Source: Moody's Outlook: Not-For-Profit and Public Healthcare-US (Nov. 7, 2023)

Operating Margin



Kaufman Hall, National Hospital Flash Report (October 2023)

* Note: The Kaufman Hall Hospital Operating Margin and Operating EBITDA Margin Indices are comprised of the national median of our dataset adjusted for allocations to hospitals from corporate, physician, and other entities.

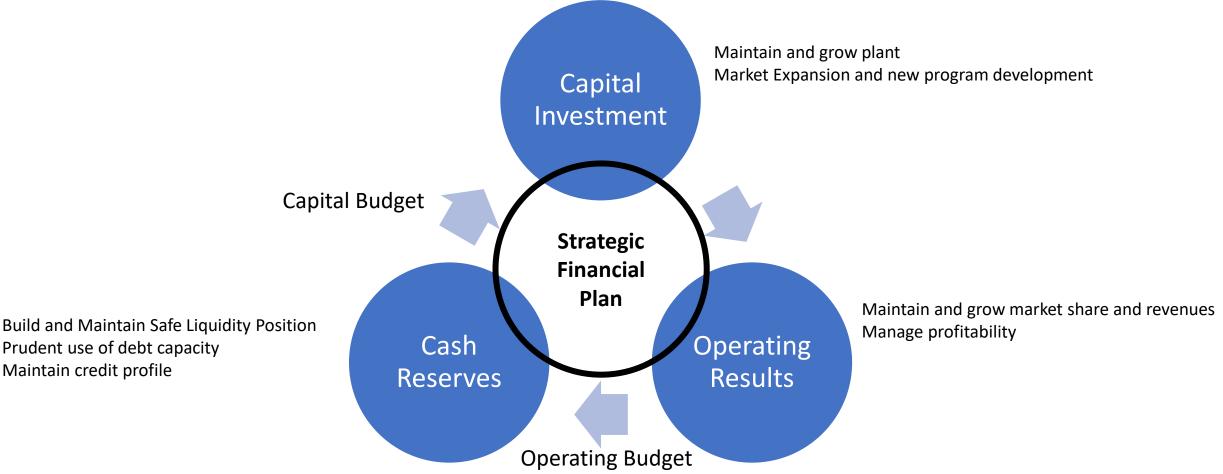
KaufmanHall NATIONAL HOSPITAL FLASH REPORT OCTOBER 2023

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High Level Process

Financial Strength through a Balanced Strategic Financial Plan

Key Stakeholders throughout the Medical Center Contribute Capital, Operating, and Cash <u>Assumptions</u> that are Iterated to a Balanced Plan



FY25 Budget Calendar & Guidelines



Planning Calendar

F	Fiscal Year 2023	3			Fiscal Ye	ear 2024		
Q1 Forecast Recruitment Plan	 				al Depts, C&Is: <u>2/:</u> ots: 2/1 thru 3/7			
	Q1 Dept	t Reviews	Q2 Forecast		2/1 thru 2/16			
I F	Volv	ume Planning (Targ	gets)	Depts Prepare 8	k Submit Budgets	/'		
		· · · · · · · · · · · · · · · · · · ·	Recruitm	nent Plan	Consolidate Budge	et & Dept Reviews	l '	
	,	'		1	AE/VMG E	xec Review	'	
	,	'		1	1	Prepare BO	D Materials	
/	,	'	·	''	[/]	1 '	[]	BOD - Budget
	, 	'	✓ Budget Train	ining: 1/29 – 2/5				Approval
October	November	December	January	February	March	April	Мау	June



FY25 Budget

 Presentations
 https://www.vumc.org/finance/academic-enterprise-and-vmg/financialplanning-analysis-dept-support/budget-forecast-resources

FY25 Budget and Q2 Forecast Calendar Presentation

FY25 Budget and Q2 Forecast Calendar in Excel

Budget Assumptions

Budget Parameters FY 25	Rate	Budget Parameters FY 25	Rate
Preliminary Federal Indirect Cost Recovery for Newly Issued Awards (expected to decrease)	74%	Billing Office Tax (No change)	8.5%
Federal Salary Cap \$ (Executive Level II salaries = \$221,900) [1] (TBD)	\$221,900	Infrastructure Tax (No change)	1.75%
VU Grants – received from VU (10% increase)	\$6.85 per unit	VUMC Overhead Tax (No change)	5%
VUMC Directorships, Program Funds, and Research Endowments (2% increase) [2]	\$5.79 per unit	Unrestricted Overhead (No change)	10%
Indirect Cost Recovery – Gifts, Foundations & Non-Profit Associations [3]	15%	Malpractice (No change)	Varies by Dept.
Salary Pool "as of date" including any base increase and faculty incentive	<mark>3.5%</mark>		

[1] 2024 New ELII Salary Cap: \$221,900 (represents a 4.7% increase); OSP to provide further guidance.

[2] Investment Policy - Donor Endowment Distributions: The method used to calculate distributions from endowments is approved by the Board and periodically reviewed (at least every three years). Under the current methodology, VUMC will, under normal operating and market conditions, distribute <u>4%</u> of the moving average of up to three prior calendar year-end unit market values. In other words, an amount equal to <u>4%</u> of the calculated average price per unit will be used and applied at a per-unit level to each fund for determining an annual budgeted distribution amount.

[3] See policy regarding Non-Federal Indirect Cost Recovery https://vanderbilt.policytech.com/dotNet/documents/?docid=21816

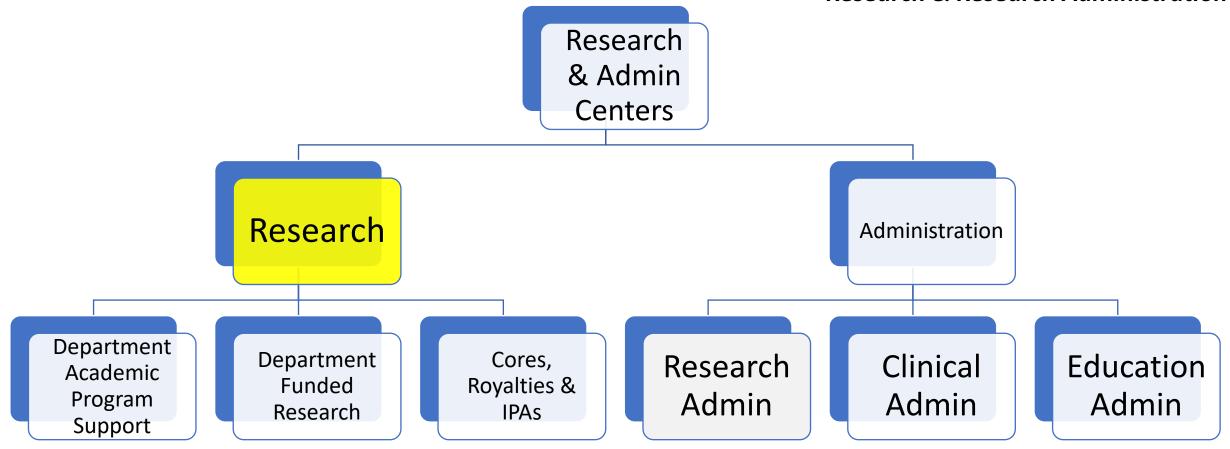
VUMC Research Investment Growth Model

Total Research Expense X Annual % Change in Clinical Operating Margin



Clinical Departments

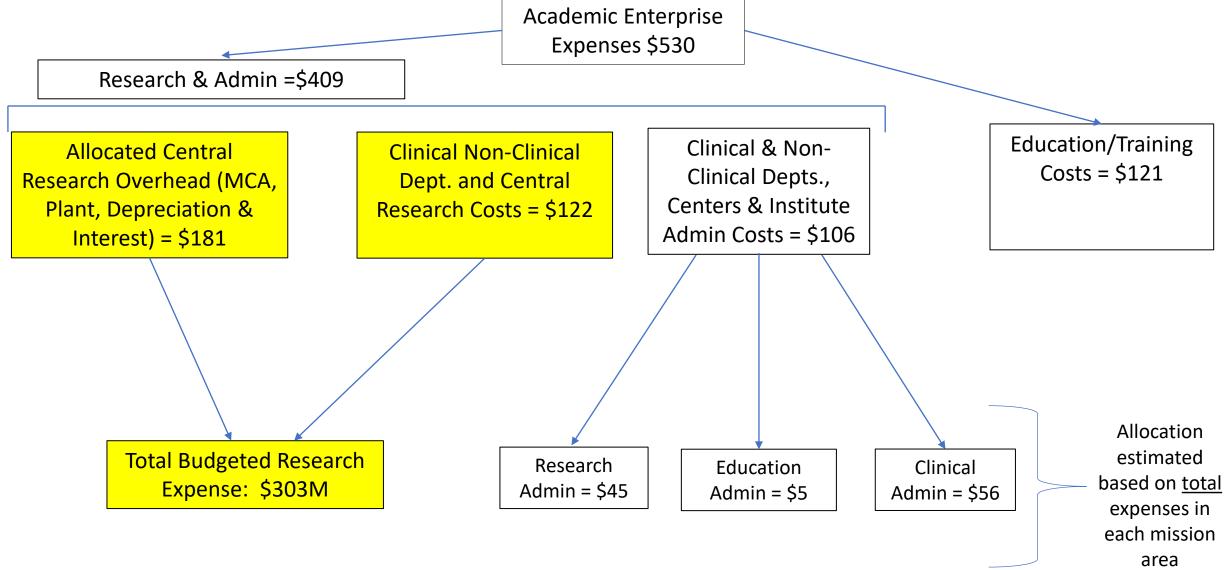
Research & Research Administration



> Categorized Research & Administration center activity by main purpose via CARTS type, Research or Administration

- Allocated Administration to Research, Clinical, & Education; determined by <u>% of total expenses</u> in Research & Administration + Gifts and Grants, VMG Clinical, and Education recalculated for each period, i.e., FY24 Budget.
- > Applied Research & Administration + Gifts and Grants allocation to "Administration" to determine "Research Administration"

FY 2024 Budgeted Academic Enterprise Institutionally Supported Research, Teaching and Administrative Expenses (\$M)



Clinical Departments - FY25 Budget Parameters

Support	FY24	FY25	Notes
Earnings on Unrestricted Reserves	2%	4.2% (FY 23 investment portfolio net total return rate)	Unrestricted funds (excludes Grants & Gift Cost Centers)
Clinical (Hospital) Support	Support per Financial Partnership model or previously approved support	Support per Financial Partnership model or previously approved support	Financial partnership model calculated support or other support approved via Funds Flow Cte.
Hospital Support - Recruitment	FY24 previously approved amounts, includes remaining commitments	FY25 previously approved amounts, includes remaining commitments	Paid quarterly (Oct, Jan, April and June) based on calculated shortfall.
VMG Clinical Margin	Operating Margin (% of Revenue) (Same as FY23 Budgeted Margin)	(Same as FY24 Q2 Forecasted Margin	
Research & Administration	FY23 Budget less FY23 & FY24 Expense Initiatives i.e., ISE, disretionary, restricted gifts	FY24 Budgeted Investment (Loss) less salaries for FTEs transferred to Office of Sponsored Programs & VUMC IT increased by <u>8.3%</u>	As calculated via research growth model
Education	FY23 Budget less FY23 & FY24 Expense Initiatives i.e., ISE, disretionary, restricted gifts	FY24 Budget Investment (Loss) increased by <u>3.6%</u>	Growth based on 2024 estimated BPRDI + .5%
Clinical and Research Incentives	Financial Partnership Model, Research Incentive Model or other stat based model	Financial Partnership Model, Research Incentive Model or other stat based model	

Non-Clinical Departments & Centers/Institutes - FY25 Budget Parameters

Support	FY24	FY25	Notes
Non-Clinical Departments			
Earnings on Unrestricted Reserves	2%	<u>4.2%</u> (FY 23 investment portfolio net total return rate)	Unrestricted funds (excludes Grants & Gift Cost Centers)
Base & Academic Program Support	FY23 Budget less FY23 & FY24 Expense Initiatives i.e., ISE, disretionary, restricted gifts	FY24 Approved Allocations increased by <u>8.3%</u>	As calculated via research growth model
Special Allocations	Per Commitment	Per Commitment	
Research Incentives	Research Incentive Model	Research Incentive Model	
Support	FY24	FY25	Notes
Centers & Institutes			
Base & Academic Program Support	FY23 Budget less FY23 & FY24 Expense Initiatives i.e., ISE, disretionary, restricted gifts	FY24 Approved Allocations increased by <u>8.3%</u>	As calculated via research growth model
Special Allocations	Per Commitment	Per Commitment	

Funds Flow Support to Clinical Departments

Financial Partnership Model 2.0 – Clinical

Departments Transitioning FY25:

- Dermatology
- Emergency Medicine
- Medicine
- Neurology
- ObGyn
- Ophthalmology
- Orthopaedics

- Otolaryngology
- Pediatrics
- PMR
- Psychiatry
- Radiology
- Surgical Sciences
- Urology

Departments remaining on traditional funds flow FY25:

- Anesthesiology
- Pathology
- Radiation Oncology

Research FPM Calculation

Incentive Pool

• 10% of Prior Fiscal Year's Grant/Contract Direct & Indirect Expenditures



Clinical Department Budget Parameter Rollforward

Include with FY25 Budget Submission

		Fi	nance				Finan	ce			Dept	Input	
Research & Administration + Education	Growth		FY24		OSP	νι	ЈМС ІТ	FY	'24 Budget	Res	& Adm	-	Edu
Research & Auministration + Education	%	В	udget	Tr	ansfer	Tr	ansfer	afte	er Transfers	FY25	Budget	FY25	Budget
Research & Admin @ 8.3% Growth										Fre	om Finacia	l State	ment
Revenue		\$	2.50					\$	2.50	\$	3.00		
Expense			5.00		(0.20)		(0.10)		4.70		5.50		
Margin \$	8.3%	\$	(2.50)	\$	(0.20)	\$	(0.10)	\$	(2.20)	\$	(2.50)		
ducation @ 3.6% Growth									[1]		[2]		
Revenue		\$	1.00					\$	1.00			\$	1.10
Expense			3.00						3.00				3.17
								_					0.2/
Margin \$	3.6%	\$	(2.00)	\$	-	\$	-	\$	(2.00) [3]		-	\$	(2.07)
Research & Administration			(2.00)	[1]		\$	-	\$	(2.00)		-	\$	(2.07)
Research & Administration FY24 Budget less Transfers Growth Target @ 8.3%			(2.00) (2.20) (0.18)			\$	-	\$	(2.00)		-	<mark>\$</mark>	(2.07)
Research & Administration FY24 Budget less Transfers Growth Target @ 8.3% FY25 Target	1	\$	(2.00) (2.20) (0.18) (2.38)	[1]	-	\$	-	\$	(2.00)		-	\$	(2.07)
Research & Administration FY24 Budget less Transfers Growth Target @ 8.3% FY25 Target FY25 Prelim Dept Research & Administration Budget	1	\$	(2.00) (2.20) (0.18) (2.38) (2.50)	[1]	-			\$	(2.00)		-	\$	(2.07)
Research & Administration FY24 Budget less Transfers Growth Target @ 8.3% FY25 Target FY25 Prelim Dept Research & Administration Budget Dept Planned Growth	1	\$ \$ \$	(2.00) (2.20) (0.18) (2.38) (2.50) (0.30)	[1]	-	Exa	ample:		(2.00) [3]		- sted to m		(2.07) [4]
Research & Administration FY24 Budget less Transfers Growth Target @ 8.3% FY25 Target FY25 Prelim Dept Research & Administration Budget	1	\$	(2.00) (2.20) (0.18) (2.38) (2.50)	[1]	-	Exa	ample:		(2.00)		- sted to m		(2.07) [4]
Research & Administration FY24 Budget less Transfers Growth Target @ 8.3% FY25 Target FY25 Prelim Dept Research & Administration Budget Dept Planned Growth	1	\$ \$ \$	(2.00) (2.20) (0.18) (2.38) (2.50) (0.30)	[1]	-	Exa	ample:		(2.00) [3]		- sted to m		(2.07) [4]
Research & Administration FY24 Budget less Transfers Growth Target @ 8.3% FY25 Target FY25 Target FY25 Prelim Dept Research & Administration Budget Dept Planned Growth @ or below Target / (exceeds Target)	1	\$ \$ \$	(2.00) (2.20) (0.18) (2.38) (2.50) (0.30)	[1]	- [2]	Exa	ample:		(2.00) [3]		- sted to m		(2.07) [4]
Research & Administration FY24 Budget less Transfers Growth Target @ 8.3% FY25 Target FY25 Prelim Dept Research & Administration Budget Dept Planned Growth @ or below Target / (exceeds Target) Education	1	\$ \$ \$	(2.00) (2.20) (0.18) (2.38) (2.50) (0.30) (0.12)	[1] ✦ [2] [1]	- [2]	Exa	ample:		(2.00) [3]		- sted to m		(2.07) [4]

\$ (2.07) [4]

(0.07)

0.00

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Example:

Dept achieved Target

FY25 Prelim Dept Education Budget

@ or below Target / (exceeds Target)

Dept Planned Growth

22

Clinical Department Budget Parameter Rollforward

Include with FY25 Budget Submission

			Finance			D	ept Input		Calc	D	ept Input	Calc
		FY24	VUMC IT	FY24 Q	2 Forecast		Same		FY25		Tower	FY25
Margin	Q2 F	orecast	Transfers	After	Transfers		Store	Pre	- Recruits		Recruits	Budget
VMG												
Revenue	\$	50.00		\$	50.00	\$	5.00	\$	55.00	\$	1.00	\$ 56.00
Expense		45.00	(0.30)		44.70		4.35		49.15		1.20	50.35
Margin \$	\$	5.00		\$	5.30	\$	0.65	\$	5.85	\$	(0.20)	\$ 5.65
Margin %		10.0%			10.6%				10.6%			10.1%
					[1]				[1]			

% Margin = Achieved @ 10.6%

Clinical Department Budget Parameters

FY25 Budget Department Financial Statement after FPM 2.0									
				Clinical	Ma	Irgin			
Margin		esearch & ninistration		VMG		Education	Clinical Margin	Gij	fts & Grants
VMG									
Revenue	\$	10.00	\$	55.00	\$	5.00	\$ 70.00	\$	75.00
Expense		15.00		45.00		5.50	65.50		75.00
Margin \$	\$	(5.00)	\$	10.00	\$	(0.50)	\$ 4.50	\$	-
Margin %				18.2%			6.4%		
FPM 2.0 Support	\$	(0.50)	\$	0.60	\$	(0.10)	\$ -		
FY25 Budget		(4.50)		9.40		(0.40)	4.50		
				17.1%			 6.4%		

Unrestricted Reserve Earnings

Reserve Balance (as of 6/30)

Research & Administration

Education

Clinical

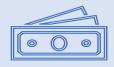
FY23 Investment Portfolio Net Total Return Rate = <u>4.2%</u>

Note:



For Directorships set up during the fiscal year, Reserve Payout will be adjusted for the decrease in Academic Department reserve balance **Reserve Payout**

Monthly expense credit to Academic Department



Internally Funded Directorships & Programs

Fiscal Year 2024 :

 \checkmark Cap at 1 Day Cash on Hand (DCOH)



- \checkmark Donor matching prioritized
- ✓ Plan for requests and submit during FY24 Budget process

✓ Finance to provide in-take form

Fiscal Year 2025 :

✓ Cap at 1 Day Cash on Hand (DCOH)

\$19.1N

✓ Donor matching prioritized

- ✓ Plan for requests and submit during FY25 Budget process
- ✓ Finance to provide in-take form

Internally Funded Directorships & Programs Submission Process

✓ Complete form

(Dr. Pietenpol's and Cecelia Moore's signatures not required with initial submission)

- ✓ Submit to <u>budgetprofinance@vumc.org</u> email by budget submission due date
- ✓ <u>Approved</u> Directorships or Funds require the letter to Dr. Balser and signed forms

		Directorship of institution	nal Investment Fund Estal	
1.		posed name of the new Dire or Quasi fund, go to #5.	ctorship(s) or new Institutiona	I Fund(s)? If re-designating funds from a
			Α	mount
			A	mount
_	If not fully funded	d, what is the proposed time	line for this Directorship to be	fully funded?
2.	in more raily railable			
	-	epartmental funding sources	(centers) to be used for mee	ting the minimum funding level for this
2. 3.	What are your de			ting the minimum funding level for this Amount \$



Directorship & Program Questions, Contact: Jody Johnson & Donna Cox To access: <u>https://www.vumc.org/finance/academic-enterprise/other-resources</u>

> Directorship or Internal Fund Establishment Process Directorship or Internal Fund Establishment Instructions and Form

Fringe Benefit Rates (No Change from FY24)



FEDERAL						
Fringe Rate Group	FY24 Federal Rate	FY25 Federal Rate	Variance (No Change)			
Medical Center Faculty 1/Sr Staff	21.80%	21.80%	0.00%			
Medical Center Faculty 2	13.20%	13.20%	0.00%			
VUMC Staff	27.80%	27.80%	0.00%			
VUMC Part-Time/Temp	10.70%	10.70%	0.00%			

CEDEDVI

NON-FEDERAL

Fringe Rate Group	FY24 Federal Rate	FY25 Federal Rate	Variance (No Change)
Medical Center Faculty 1/Sr Staff	24.10%	24.10%	0.00%
Medical Center Faculty 2	13.50%	13.50%	0.00%
VUMC Staff	28.80%	28.80%	0.00%
VUMC Part-Time/Temp	10.70%	10.70%	0.00%

• Medical Center Faculty 1/Sr Staff = Includes Clinical Faculty with annual compensation <\$170,000 and all Medical Center Non-Clinical Staff

• Medical Center Faculty 2 = Includes Clinical Faculty with annual compensation>=\$170,000





VU GRANTS USAGE

VU Grant = VU Endowment Distribution to VUMC

VU Grants <u>MUST</u> be spent in compliance with donor/VU guidelines. Refer to WD for details. VU Grants, Endowments, Gifts and Departmental funds should be used in place of unrestricted funds. For VU Grants, budget expected spending; VU only reimburses \$'s spent, up to the awarded amount.

29

NOTE: VU Grants are expected to be spent 100% in accordance with guidelines by the end of the year. SPEND EARLY and avoid the year-end task of utilizing these funds. For questions about VU Grants, please reach out to Lynn Capps (lynn.capps@vumc.org).

VU GRANTS USAGE

UTILIZATION GUIDELINES can now be found in Workday

AWD00	(version 0) ····	
Sponsor Award Reference Number Sponsor	Sponsor Direct Cost / Sponsor Facilities And Administration	Award Contract Dates
Overview Award Lines	Budget Award Tasks Billing & Receivables Additional Data Additional Re	ports Set Up & History
Summary Sponsor	Funding Details NSF Code Allocation Notes	
Award Notes 1 item		

<u>Follow All General Guidelines</u>, then refer to permissible expenditures by the Fund Types and Utilization Categories detailed within the guidelines which can be accessed using the following link:

https://www.vumc.org/finance/sites/default/files/public_files/VU% 20Utilization%20Guidelines.pdf



Gift Expenditure Process and Budgeting



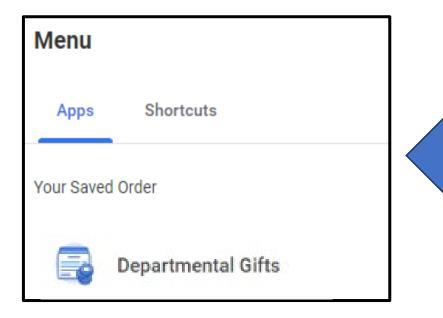
- Gift funds have specific stewardship and auditing requirements
- Gift income for <u>Gifts without Donor Restrictions</u> is recognized when received and may not necessarily match expenses.
- Gifts with Temporary Donor Restrictions are initially placed in net assets. They are then released into gift income when expenses are incurred so that gift income and expenses match.
- Assigned roles for gifts are Gift Financial Analyst and Gift Manager. Users can utilize the Departmental Gifts Dashboard app to view summarized gift activity and gift balances.
- For questions about this process, please reach out to Jody Johnson (jody.johnson@vumc.org)

Gift Spending Plans

- For gift funds received but not spent in the current fiscal year spending plan:
 - Target: expend over 2 3 years (donor stewardship)
 - Maximum timeframe: 5 years (audit compliance)
 - ➤Year 1 spending should match budget



VU Grant and Gift & Endowment Reports



The Departmental Gift dashboard can be found in the app listing within Workday.

Gift and Endowment Reporting	Description
CR Fin Endowment Gifts	Used to track remaining balance vs annually budgeted endowment distributions for both donor and internal endowments.
CR Fin Spendable Gifts	Used to track remaining balance vs total contributions of spendable gifts, including those with donor restrictions
VU Grant Reporting	Description
CR RG VU Grant Remaining Balance - Grant Org Level	Used to monitor remaining balances on VU Grants
CR Fin - Budget vs Actual for VU Grant	

Workday – Adaptive Planning

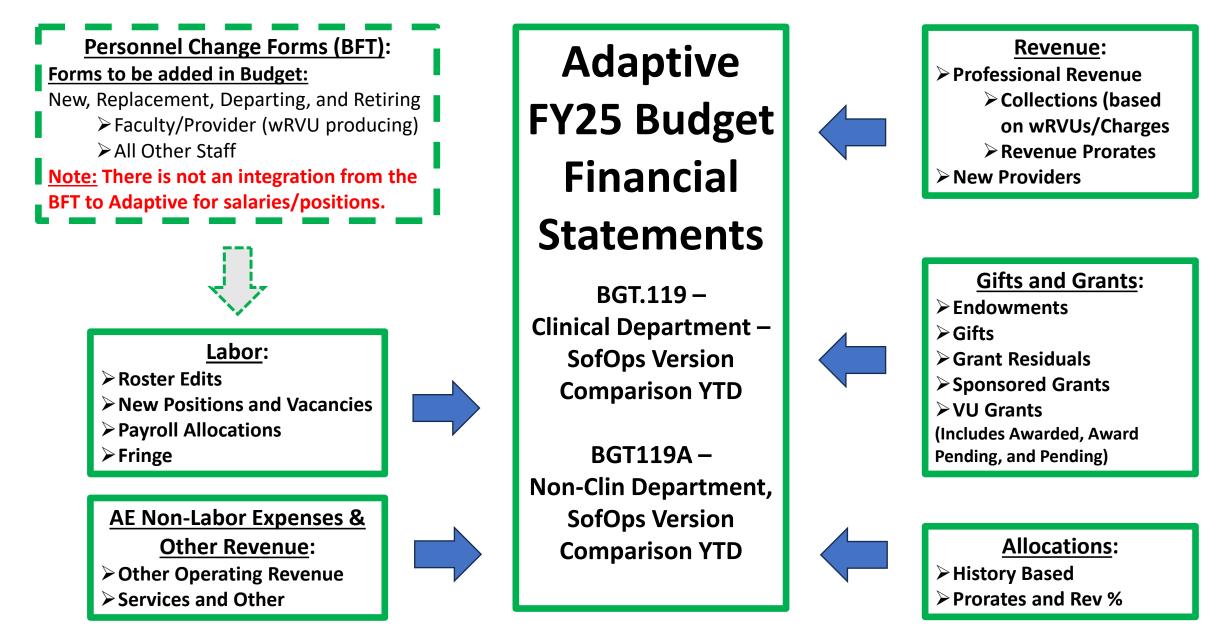
Your Top Apps



Adaptive Planning

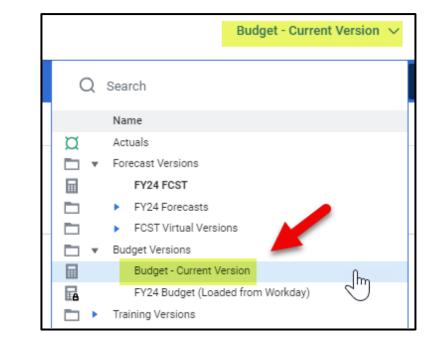


What Feeds the Financial Statement?



Adaptive: Helpful Things to Remember

- 1. Before you get started in Adaptive, make sure you are in the correct version.
- 2. Filters can be tricky, so be sure to double check them if you aren't seeing input fields or if you're getting a warning message. Refer to the filter guide for assistance.
- 3. "Top Level Only" is for Forecast and "Top Level" is for Budget.
- 4. SAVE! Amounts will turn from **blue** to **black** once your changes have been saved.
- 5. Be sure to expand and review instructions as you go into each tab within a Dashboard.





Instructions (Expand to View)



Adaptive Annual Budget Checklist

Adaptive Planning is the new tool with Workday used for Forecasting, Budgeting, and Long-Range Planning. This checklist con-

tains high-level, step-by-step instructions for completing your forecast in Adaptive.

Getting Started

Start by Using the FY25 Budget Checklist:

- 1. Departmental Statistics Dashboard OR Cases and Visits
- 2. Professional Revenue Dashboard
 - wRVUs
 - Charges
 - Collections
- 3. Professional Revenue New Provider Dashboard
- 4. Labor Dashboard
 - Roster / Payroll Allocations
 - New Positions and Vacancies
- 5. Gifts and Grants Dashboards
 - Endowments
 - Gifts
 - Grant Residuals
 - Sponsored Grants
 - VU Grants
- 6. AE Non-Labor Expenses and Other Revenue Dashboard
- 7. Allocations Dashboards
 - History Method
 - Prorates and Rev %
- 8. Submissions

□ Log in to Adaptive: https://login.adaptiveinsights.com/app?&msgKey=xsrf

VUMC

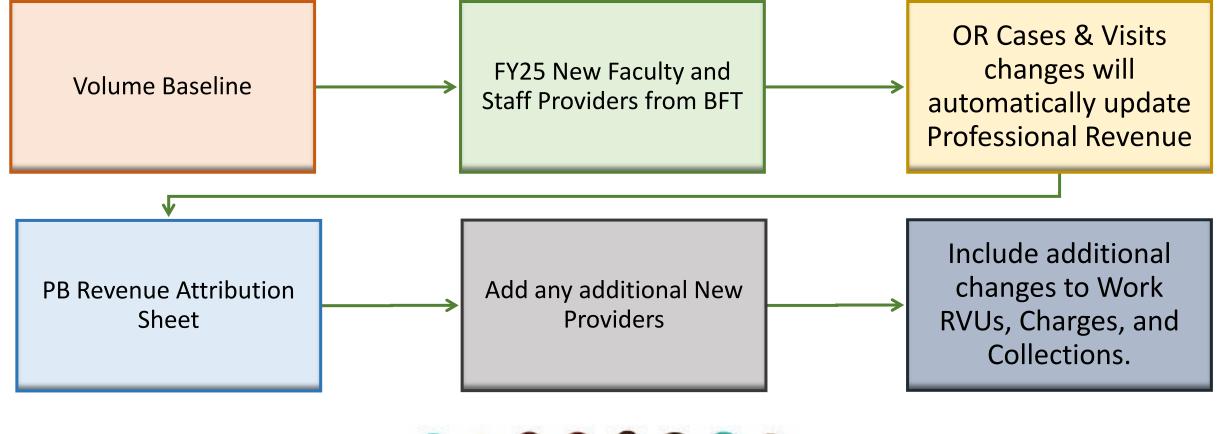
BUSINESS EDUCATION

workday.

Volumes and Professional Revenue



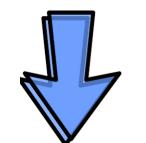






Volumes – OR Cases, Visits & Other Stats

\equiv $\widehat{\mathbf{W}}$ Production - Vanderbilt Univ	Production - Vanderbilt University Medical Center Dashboards						
Dashboards							
Add New ←	Q Search						
Search All Perspectives	Name ↑ 01) Budget - Department Statistics						



01) Budget - Dep	Time	Jan-2024	~	Level	1	
Patient Days	OR Cases & Visits 🚦	Othe	Stats			
Instructions -	OR Cases & Vis	its (E	xpand	to	View)

- ✓ Revenue is generated in the Professional Revenue module when OR and Visits are added
- ✓ Manually add Professional Revenue for Key Procedures & ED Visits in "Other" Volume type
- \checkmark Volumes will be preloaded for <u>New</u> Personnel entered in BFT
- ✓ Update OR Cases and Visit Spread
- ✓ FY25 Budget volumes (visits, patient days, discharges, surgeries, key procedures) reviewed, edited, and finalized in Adaptive from <u>February 1 – 16th</u>
- \checkmark Please coordinate with your PCC manager



Professional Revenue Dashboard

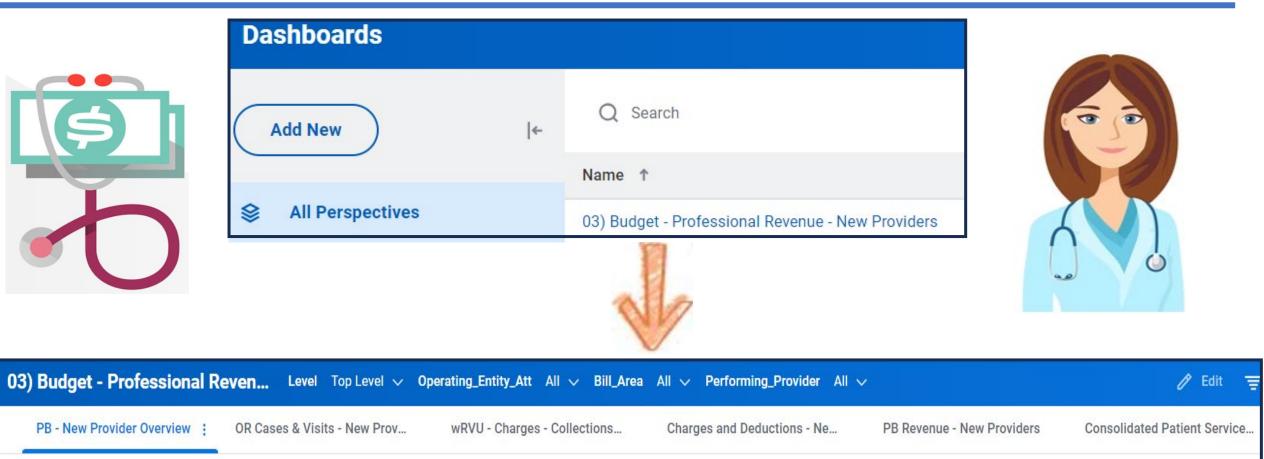
Dashboards			
Add New ←	Q Search		
	Name 🕇		
Section All Perspectives	03) Budget - Professional Revenue		
03) Budget - Professional Reven	Level Top Level V Operating_Entity_A	tt All \vee Bill_Area All \vee Perf	forming_Provider All \checkmark
PB Overview : Attribution	wRVU - Charges - Collections Charges and	d Deductions PB Revenue	Summary Patient Service Re

- Attribution Sheet translates Work RVUs, Charges, and Collections from the Department Statistic Dashboard
- OR Case & Visit changes prompt calculation adjustments to Work RVUs, Charges, and Collections.



The Medicare Conversion Factor change (\$33.89 CY23 to \$32.74 CY24 of 3.3%) effective 1/1/24 is incorporated into the pre-loaded budgeted revenue.

Professional Revenue – New Providers



Add any additional new Faculty or Staff Providers

Include additional changes to Work RVUs, Charges, & Collections.

Professional Revenue Reports

	Legacy	BFT F	Reports	VS.	Adaptive Reports
V Budget-	Forecast Tools	(Leg			Shared / 05. Budget Reports
🚡 Forms -	Annual Budget -	Mon			Name
	Volumes	۲			
	Restricted	•			BGT.XX PB Revenue - Summary Comparison - Department FCST
	Personnel				BGT.XX PB Revenue - Summary Comparison - Departments
	Main Budget				
	Reports	•	Volumes Professional Revenue Data Dun	np	BGT.XX PB Revenue - Summary Comparison - Departments (No Stats)
	Admin Reports			-11	BGT.XX PB Revenue - Summary Comparison - Departments by month
					III BGT.XX Volumes Professional Revenue Data Dump
	MBULANCE	() () ()	 Ability to review by Divis Volume Type Provides a crosswalk of b final Work RVUs, Charges Reports combine data fro Dashboards Can download data from dashboard 	oaseline, s & Colleo om both	adjustments and ctions PB Revenue

Personnel



When to Add Positions to BFT?

Guidelines to ensure all forms are included in the BFT & Hiring Plan (36 -60 months):

- Add all planned future hires to the BFT once Department Chair approves recruitment
- Add volumes for all planned future hires to capture visits, OR cases and key procedures

<u>Coordinate Volumes with PCC Finance Directors &</u> <u>Managers</u>

- Professional revenue derived from these volumes will be included in future planning periods
- Volumes and Professional Revenue is summarized on the "Personnel Change Form Monthly Details" report along with the Personnel form information



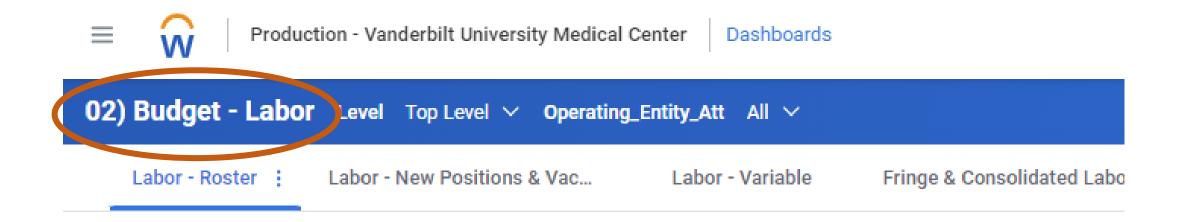
Personnel Change Forms

BFT: Personr	V BFT: Personnel Change Form								
ᢙ Forms - Reports	Forms + Reports + Legacy +								
Personnel Chang	e						FY2	5 Budget / FY2	4Q2 Forecast
	: O New O Replacement O ulty/Provider (wRVU producing		aff						
Create New Form									
Load a Saved For	Load a Saved Form								
Version:	FY25 Budget / FY24Q2 Fo	✓ Status:	Show All	Default Center: (Previously Home Dept.)		Form ID:			Apply Filters
Change Reason:	Show All	✓ Fac/Staff:	Show All 🗸	Employee:		Planned/Actual Position Date:	Show All	~	Clear Filters

Reason for Change	When to Use this Reason	Load a New Blank Form or Start with Existing Position
New	Used when your area is adding a new faculty member, and this is a new FTE.	Load a New Blank Form or Start with Existing Position (of a similar position)
Replacement	Used when you are planning on hiring a faculty member to replace a departing or retiring member of your team	Either
Retiring	Used when a faculty member is retiring	Start with Existing Position
Departing	Used when a faculty member is departing your area	Start with Existing Position

Volumes for <u>New</u> hires will be <u>pre-loaded</u> to Adaptive.

<u>Users</u> will need to add Compensation for new hires to Adaptive into the Labor – New Hires and Vacancy Dashboard.



Labor - Roster

- Labor data will be imported from Workday HCM as of 1/31/2024.
- Additional pay, market adjustments, overtime, relocation, sign-on bonus, etc.
- Payroll allocations should be reviewed and edited as needed.
- The Worker Allocation report can be generated by Supervisory Org to produce a roster of employees showing their entire allocation.
- Review Total Employee FTE to ensure no FTEs exceed 1.0.

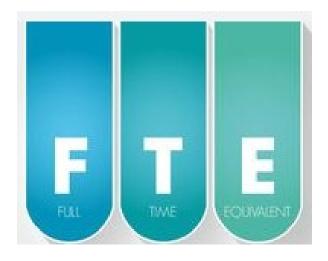
Labor – New Positions and Vacancies

- There is no integration from the BFT with Adaptive for salaries/positions.
- The Personnel Change Forms Effort Data Dump report in the BFT can be used to assist in adding lines on this tab.

Fringe & Consolidated Labor

- Fringe rates should be reviewed for accuracy and updated where appropriate
- The consolidated labor sheet should be reviewed for accuracy.

FTE's, Salaries, Wages and Central Labor Committee (CLC) & PAR



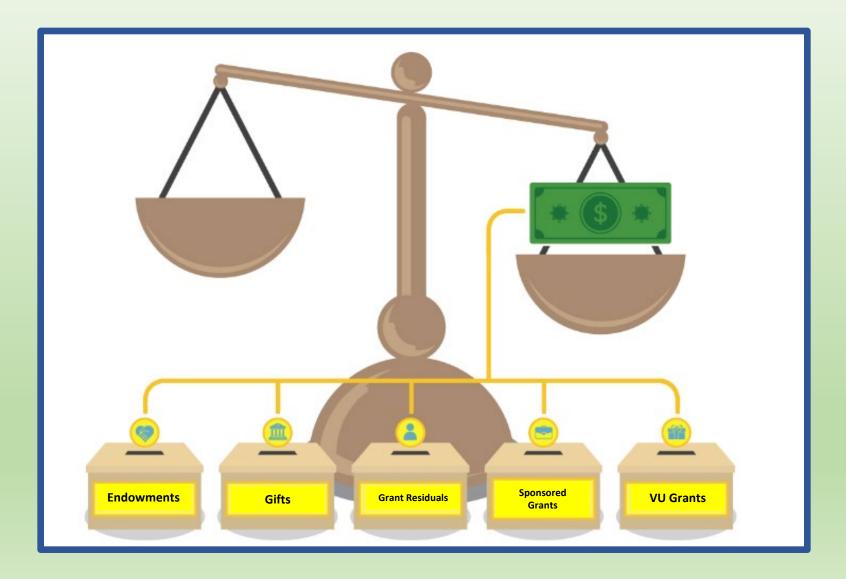


Review all Personnel reports to ensure that your final budgeted FTEs and Salaries represent the appropriate distribution for the FY25 Budget.

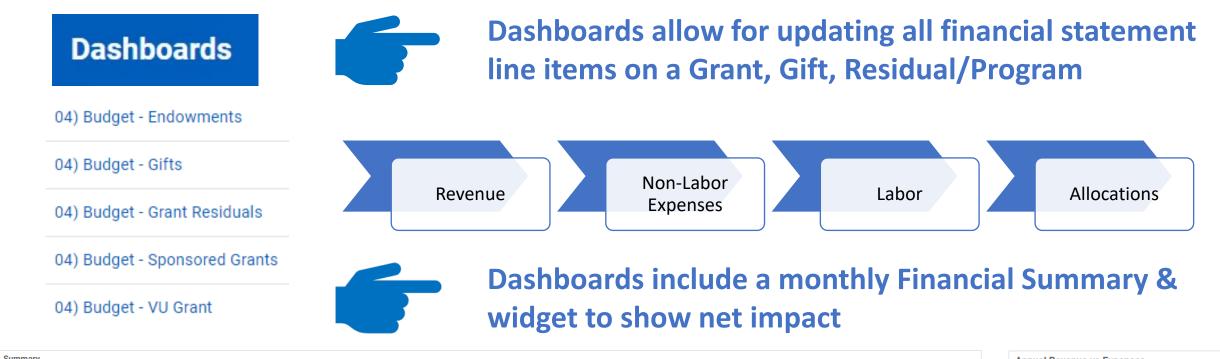
When adding new positions to the budget, be mindful of funding sources, Faculty recruitment plans, and any new initiatives. (Ensure that these are planned within the budget guidelines).

Both the budgeted FTEs and Salaries are utilized throughout the year as a comparative measure for the PAR & CLC approval processes.





Grants and Gifts

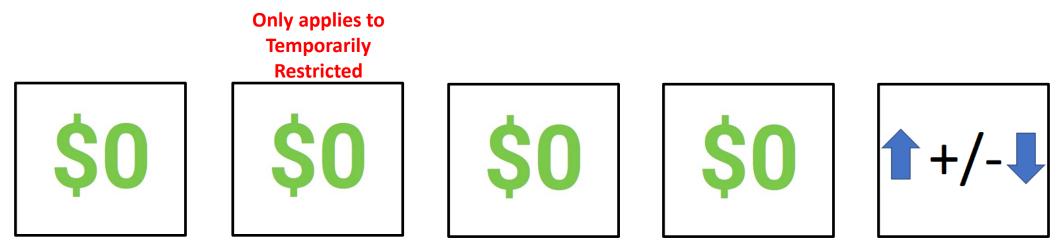


Summary													Annual Revenue ve
ACCOUNTS	TIME												
ACCOUNTS	JUL-2024	AUG-2024	SEP-2024	OCT-2024	NOV-2024	DEC-2024	JAN-2025	FEB-2025	MAR-2025	APR-2025	MAY-2025	JUN-2025	
Revenue	\$8.2 k	\$8.3 k	\$8.1 k	\$8.3 k	\$8.2 k	\$8.3 k	\$8.2 k						
Indirect Cost Recovery	-\$1.1 k												
Net Revenue	\$7.2 k	\$7.2 k	\$7.1 k	\$7.2 k	\$7.1 k	\$7.2 k	\$7.2 k	\$7.1 k	\$7.2 k	\$7.2 k	\$7.2 k	\$7.2 k	
Labor (Includes Fringe)	\$2.2 k	\$2.2 k	\$2.1 k	\$2.2 k	\$2.1 k	\$2.2 k	\$2.2 k	\$2.1 k	\$2.2 k	\$2.2 k	\$2.2 k	\$2.2 k	
Non Labor Expenses	\$5.0 k												
Allocations													
Total Expenses	\$7.2 k	\$7.2 k	\$7.1 k	\$7.2 k	\$7.1 k	\$7.2 k	\$7.2 k	\$7.1 k	\$7.2 k	\$7.2 k	\$7.2 k	\$7.2 k	
Net Impact	\$0	\$0	\$0	-\$0	\$0	-\$0	\$0	\$0	\$0	-\$0	\$0	-\$0	

Grants and Gifts

Endowments	Gifts	Sponsored	VU Grants	Grant Residuals
 Spendable Amount = 3.9% of 12/31/23 Market Value 	 Temporarily Restricted Gifts Unrestricted Gifts 	 Awarded Award Pending Pending 	• Per VU	 Programs Pending Gifts Pending Endowments

For which of the above should revenues and expenses net to zero?



Note: Grants and Gifts must be spent in compliance with sponsor and donor guidelines.

Sponsored Award Types

Awarded

- Awarded grants and contracts
- Uploaded at 100% of amount received

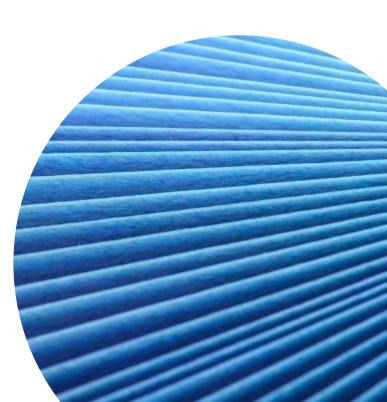
Award Pending

- Represents awards with a NOGA
- Uploaded at a discounted rate of 85%

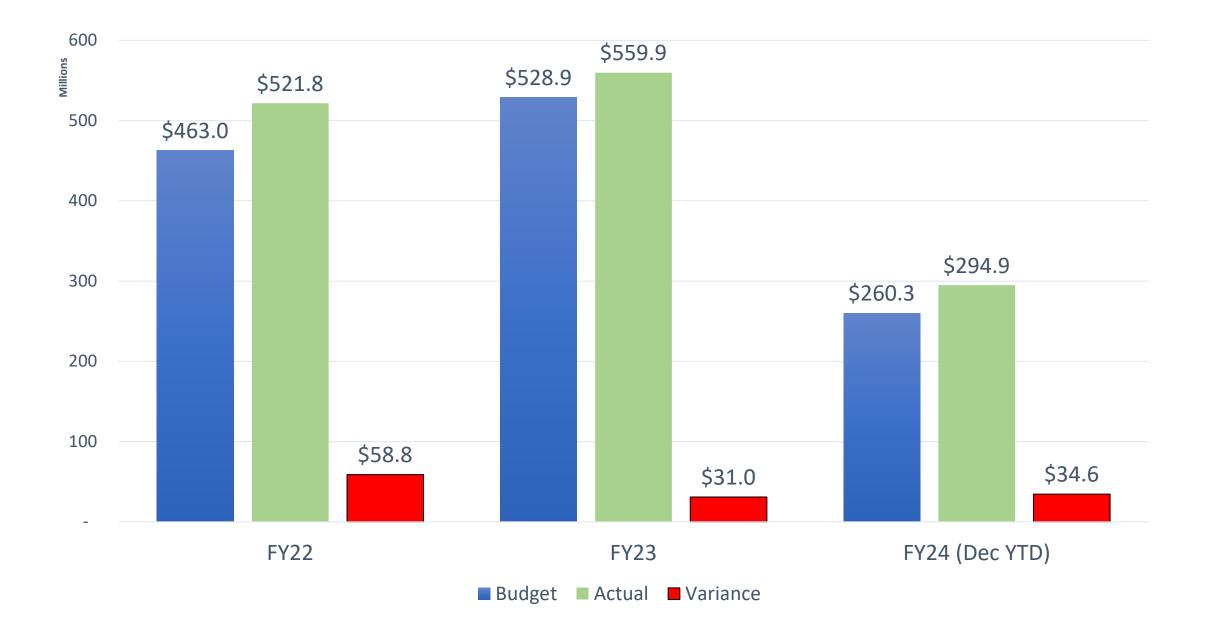
Pending

- Represents submitted awards with no decision from agency
- Uploaded at Department's historical success rate for Federal and Non-Federal awards to "budget" programs

Note: All award activity is uploaded from COEUS.



Grant and Gift Expenditures – Actual vs Budget



Other Revenue and Expense Dashboards

AE/VMG Non-Labor Expenses and Other Revenue

- Budget for Services and Other Expenses (i.e., office supplies, nonmedical supplies, drug costs, etc.).
- Budget for Other Operating Revenue (i.e., clinical contracts, VA IPA, VU ESAs/NSBAs, etc.).

Allocations: History Based, Prorates, and % of Revenue

- History Based Budget for intracompany revenue and expense, hospital support, academic enterprise support, etc.
- Prorates and % of Revenue Budget for professional revenue and expense prorates (VMG only from the MAC tool) as of January 2024. Adjust for other related amounts for these accounts.

Reporting

≡ 🙀 Production - Vanderbilt Univ	versity Medical Center Reports / Overview
Reports	
Add New +	Q Search Shared / 05. Budget Reports
	Name 1
8 Personal	Academic Enterprise & VMG (Central Finance)
8 Shared	Academic Enterprise & VMG (Clinical and Non-Clinical Depts)

BGT119 and BGT119a – Financial Statement Reports

 \bigcirc

The BGT.119 and BGT.119a reports represent financial summaries by Operating Entity and financial statement classification of the department/division's budget.



Users should run these reports before and after making adjustments to confirm budget dollars are within targeted clinical margin and results.





This report should be used when obtaining/issuing final approval of FY25 budget.



The report gives the user the ability to review by Department, Division, Program, Provider, Grant/Gift, and Assignee.



This report gives the user the ability to select versions for comparison.

FY25 Budget





Budget Submissions

- Non-Clinical Department budgets should be submitted to Finance before end of business on February 29, 2024.
- Clinical Department budgets should be submitted to Finance before end of business on March 7, 2024.
- ➤Email Budgets to <u>budgetprofinance@vumc.org</u>.
- Budgets should be approved by Department Chairs, Center & Institute Directors and Chief Business Officers <u>before</u> submission.
- ✓ <u>Please include the signed approval form (on AE/VMG</u> <u>Finance website) with your submission email along with</u> <u>the below reports.</u>
- ✓ Department's financial statement (119 or 119A) from Adaptive.
- ✓ FY24 Q2 Forecast to FY25 Budget Roll Forward along with explanations for material variances.
- ✓ Clinical Department Budget Parameter summaries.

Financial Summary Notes and Explanations

Why does Finance need financial summary notes?!

- Gives finance an overview and presents the department's budget story
- Assists with explaining budget to actual variances each month.
- Prevents Finance from pestering departments for variance explanations.

Explanations should include the following:

- Significant year-over-year fluctuations
- FTE count/position increases
- Material salary distribution changes between funds
- VMG Clinical Margin variance explanations
- Research and Administration variance explanations
- Education variance explanations
- Cores and Contracts variance explanations
- Gifts and Grants variance explanations (sponsored and non-sponsored)
- Specific explanations regarding wRVUs/ASAs, collection rates, and revenue drivers

Please Note: Budgets should reflect parameter guidance.





My Budget is complete....Next up: Budget Review Meetings

Purpose: Review FY25 Budget submission, understand upcoming operational and financial changes and ensure budgeted results are within scope of approved parameters

 Meetings will be scheduled with the Clinical and Non-Clinical Departments (3/18/24 – 4/5/24).
 Review submitted budget with achieved parameters and comprehensive financial summary notes.

Centers & Institutes will be scheduled for meetings if there are material changes in finances for FY25.

Attendees: Finance, Chairs, CBOs, and Budget Administrative Officers, Drs. Pietenpol & Brady, and Cecelia Moore.







Sessions Offered

Clinical:

Monday, January 29th from 1:00-3:30 p.m. Tuesday, January 30th from 9:30-12:00 p.m. Wednesday, January 31st from 9:30-12:00 p.m. Wednesday, January 31st from 1:00-3:30 p.m. Thursday, February 1st from 9:00-11:30 a.m. Non-Clinical/Ctrs & Inst/G&A:Tuesday, January 30th from 1:00-3:30 p.m.Thursday, February 1st from 12:30-2:00 p.m.Friday, February 2nd from 12:30-2:00 p.m.Monday, February 5th from 10:00-12:30 p.m.



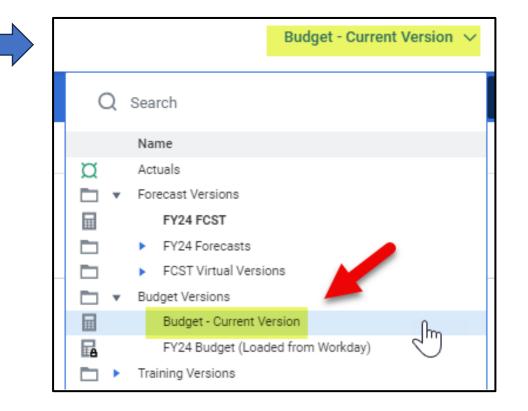
Drop-In Q&A Sessions (45 min)

Monday, February 5th from 8:15 – 9:00 a.m. Tuesday, February 6th from 8:15 – 9:00 a.m. Wednesday, February 7th from 8:00 – 8:30 a.m. Thursday, February 8th from 1:15 – 2:00 p.m. Friday, February 9th from 1:15 – 2:00 p.m.

Note: Finance will schedule more of these sessions as needed.

Adaptive: Helpful Things to Remember

- 1. Before you get started in Adaptive, make sure you are in the correct version.
- 2. Filters can be tricky, so be sure to double check them if you aren't seeing input fields or if you're getting a warning message. Refer to the filter guide for assistance.
- "Top Level Only" is for Forecast and "Top Level" is for Budget.
- 4. SAVE! Amounts will turn from **blue** to **black** once your changes have been saved.
- 5. Be sure to expand and review instructions as you go into each tab within a Dashboard.







Academic Enterprise/VMG Website:

https://www.vumc.org/finance/academic-enterprise-and-vmg/financialplanning-analysis-dept-support/budget-forecast-resources

Finance Website: https://www.vumc.org/finance

Business Education Website: https://www.vumc.org/myworkday/budget

VUMC Office of Finance

Home Finance Departments • Delegation of Authority • Financial Systems Directory • Financial and Regulatory Disclosures





WORKDAY ADAPTIVE PLANNING ANNUAL BUDGET

The annual operating budget process begins with gathering volumes and other key drivers.

The FY25 Budget Kickoff Meetings are scheduled for January 29, 2024. (links below)

- AE/VMG: 10:00am 11:30am
- MCA and H&C: 1:00pm 2:30pm

Quick Links:

<u>VMG & Academic Enterprise</u> - <u>Clinical Enterprise (Hospitals & Clinics)</u> -Medical Center Administration (MCA) - Additional Resources -

Send us a screenshot...



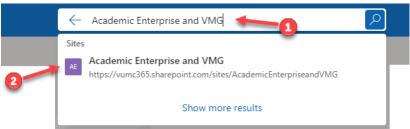
Please e-mail your budget questions to the <u>budgetprofinance@vumc.org</u> inbox.



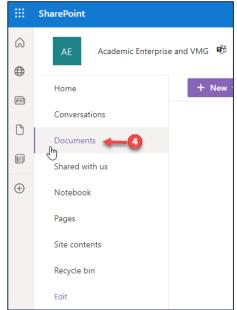
SharePoint/OneDrive

The VUMC IT Team migrated Box content to Microsoft SharePoint / OneDrive.

- Access through SharePoint
 - Type "Academic Enterprise and VMG" in the search box



- Filter on "Sites" to narrow the results
 - All Files Sites People News Images Videos Power Bl
- On the left-hand menu, click on Documents. The department folder should be available.
- Please contact Charlie Gayle and Jake Sawatzky for access, or security issues.



What will be in my Department Shared folder?

✓ Clinical and Research Incentives

- ✓ Clinical (Hospital) Support
- ✓ Hospital Support Recruitment
- ✓ Medical Directorships
- ✓ VUMC IT & Office of Sponsored Program FTE/Salary Transfers
- ✓ Academic Enterprise Support (APS, Base, and Special Allocations)
- ✓ VU OHSE Teaching
- ✓ Parental Leave
- ✓ Earning on Unrestricted Reserves

✓ List of placeholder Pending Grant and New Gift/Residual Programs

Legacy vs WorkDay Translator

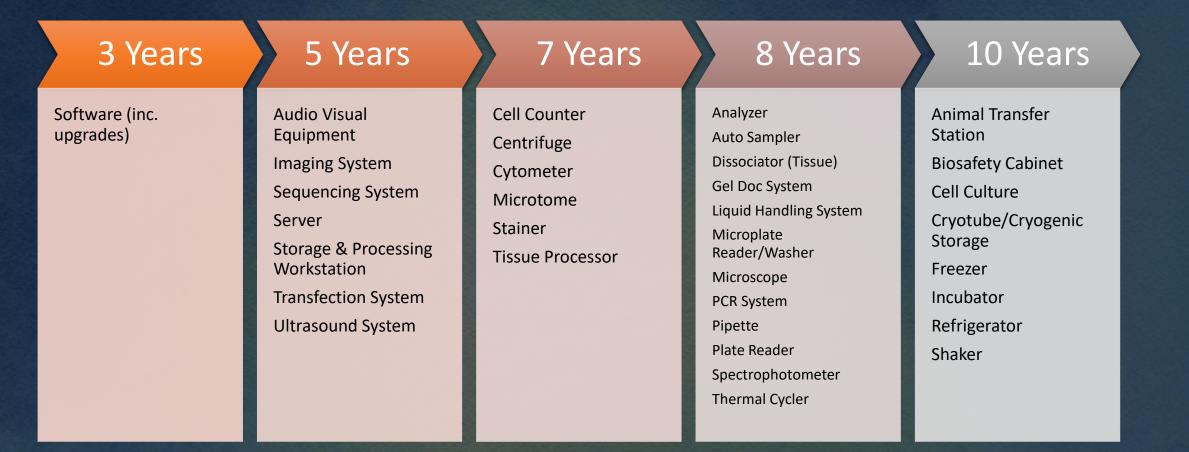
TRANSLATION

The Cost Center Translator is a tool that allows users to translate Legacy Cost Center to WorkDay Programs, or Cost Centers.

<u>The Ledger Account Translator</u> is a tool that allows users to translate Legacy Ledger Accounts to WorkDay Revenue/Spend Categories, or Accounts.

- Use the Legacy cost center search to identify the appropriate WorkDay Program, or Cost Center number for
- Use the Legacy account number search to identify the appropriate WorkDay Revenue/spend category, or ledger account number account number.
- The Translator can be found using the following link: <u>https://finweb.app.vumc.org/apps/dofappworkdayconversiontools/</u>

Academic Research Depreciation Guideline for Budgeting



Note: This slide is designed as a guideline. Some make and models may fall to a different life depending on their functionality than what is presented in this slide. If you need assistance with equipment not presented above or have additional questions, please reach out to <u>fixedassets@vumc.org</u>



Stipends and Tuition



Graduate Student Stipends

The stipend rates for graduate students in the School of Medicine for FY25 is not approved yet.

Estimated to be \$38,000.

Tuition and Fees

All tuition/scholarship transactions require a sub-agreement with VU.

A copy of the current tuition rates for all programs can be found at:

https://www.vanderbilt.edu/stuaccts/fees/



House Staff Salaries by Level of Training

Stipends

PGY level	7/1/23 — 12/31/23	Effective as of 1/1/24
1	\$64,025	\$70,000
2	\$65,994	\$72,450
3	\$68,912	\$74,986
4	\$72,014	\$77,610
5	\$75,254	\$80,327
6	\$77,873	\$83,138
7	\$81,377	\$86,048
8	\$85,037	\$89,060
9	\$88,863	\$92,177
10	\$91,529	\$95,403

These are the current stipend levels, effective as of 1/1/24. Please use these rates in your planning.

You can check the following web page for updates using the following link:

https://www.vumc.org/gme/stipends

FY23 Stipend Rates

Years of Experience	Stipend for FY 2021	Stipend for FY 2022	Stipend for FY 2023	Monthly Stipend for FY 2023
0	\$53,760	\$54,840	\$56,484	\$4,707
1	\$54,144	\$55,224	\$56,880	\$47,40
2	\$54,540	\$55,632	\$57,300	\$4,775
3	\$56,712	\$57,852	\$59,592	\$4,966
4	\$58,608	\$59,784	\$61,572	\$5,131
5	\$60,780	\$61,992	\$63,852	\$5,321
6	\$63,036	\$64,296	\$66,228	\$5,519
7	\$65,292	\$66,600	\$68,604	\$5,717

https://www.vanderbilt.edu/postdoc/stipends-salaries/

NIH Informational Link: https://grants.nih.gov/policy/notices.htm

Animal Pricing



- The following is the current per diem rates for the School of Medicine. You will be notified if these prices change
- A list of rates can be found at <u>https://www.vumc.org/vumc-acup/rates-billing</u>



Species	Unit	per diem Rate (as of 7/1/2023)
Dog	Each	\$35.35
Ferret	Each	\$13.27
Frog (Large Tank; Maximum Housing Density: 38/tank)	Tank	\$ 7.68
Frog (Medium Tank; Maximum Housing Density: 25/tank)	Tank	\$5.50
Frog (Small Tank; Maximum Housing Density: 12/tank)	Tank	<mark>\$2.41</mark>
Gerbil (Maximum Housing Density: 5 gerbils /cage)	Cage	<mark>\$3.85</mark>
Guinea Pig (Maximum Housing Density: (< 350gms 10/cage, >350 6/cage)	Cage	\$6.03
Standard Mouse [Max Housing Density: 5 adults (all <40 gms)/cage]	Cage	\$ 1.24
"MyColony" Mouse Breeding	Cage	\$ 1.28
NHP – Galago	Each	\$8.46
NHP – Squirrel Monkey	Each	\$13.27
NHP – Owl Monkey	Each	\$8.46
NHP – Macaque	Each	\$15.78
Rabbit	Each	\$6.58
Rat [Max Housing Density: 3 adults (all <u><</u> 400gms)/cage]	Cage	<mark>\$</mark> 3.85
Sheep	Each	\$49.97
Swine	Each	\$53.88
Tree Shrew	Each	\$6.58

Questions? Raise your hand...

