

Miami-Dade County Hospital Governance Task Force

March 28, 2011

Key Operating Indicators

- Seven Hospitals
- Two Nursing Homes
- Corrections Health
- Primary and Specialty Clinics – 150k visits
- 100k member + Health Plan
- Patient Days - 600,000
- ED Visits – 220,000
- Worked FTEs – 9,200
- Academic Mission – 1,100 residents

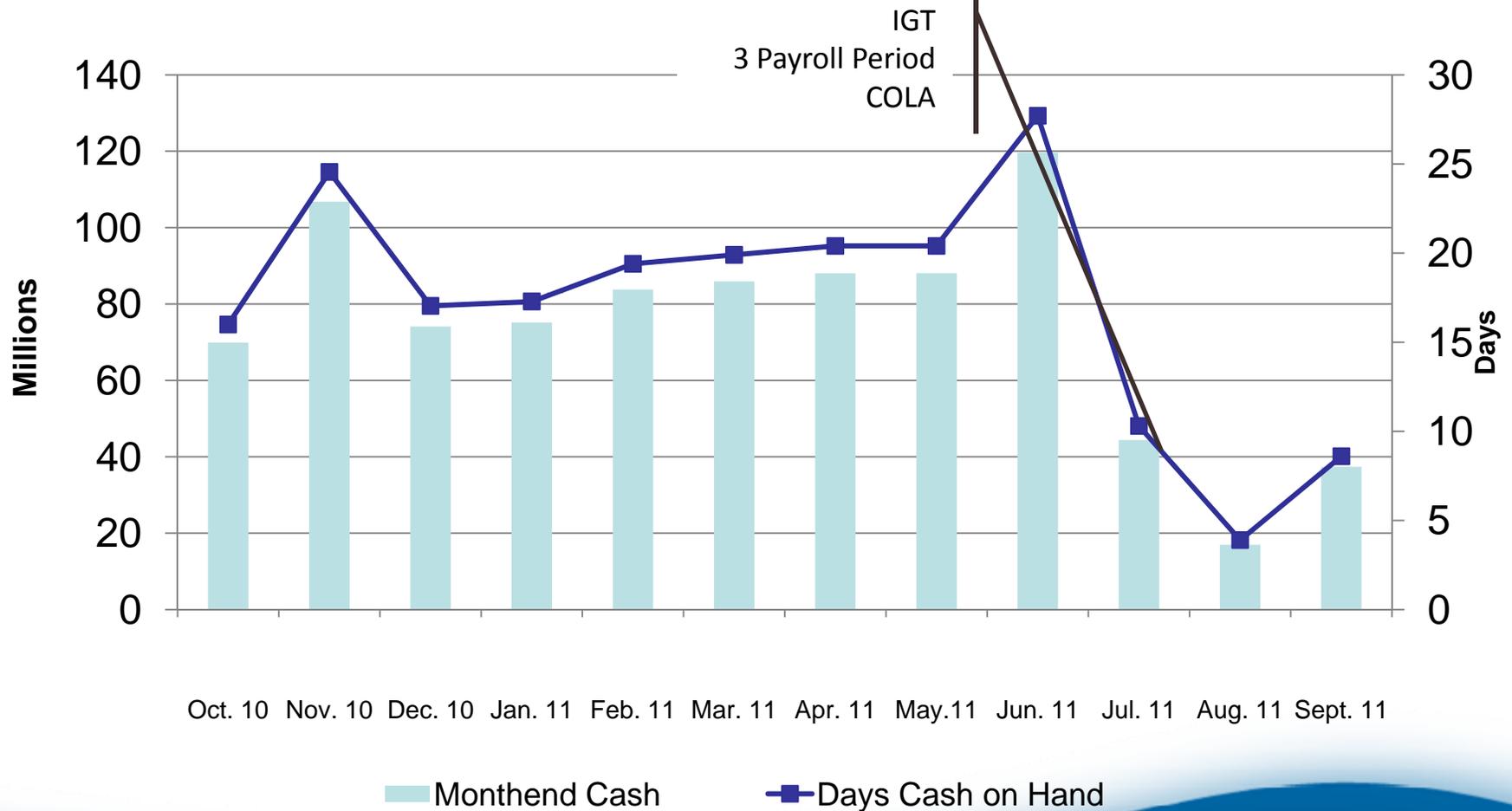
This discussion of JHS' fiscal crisis began in 2003

- New challenges
 - Unanticipated 6% decline in volume (\$110M)
 - Reduction in state funding (\$200+M)
 - Decrease in funding of the mission (\$100M)
- YTD accomplishments
 - Increase in cash collections \$42.0M
 - Reduction in labor costs \$34.0M
 - Reduction in non-labor costs 14.0 M

We do have choices—but none are easy

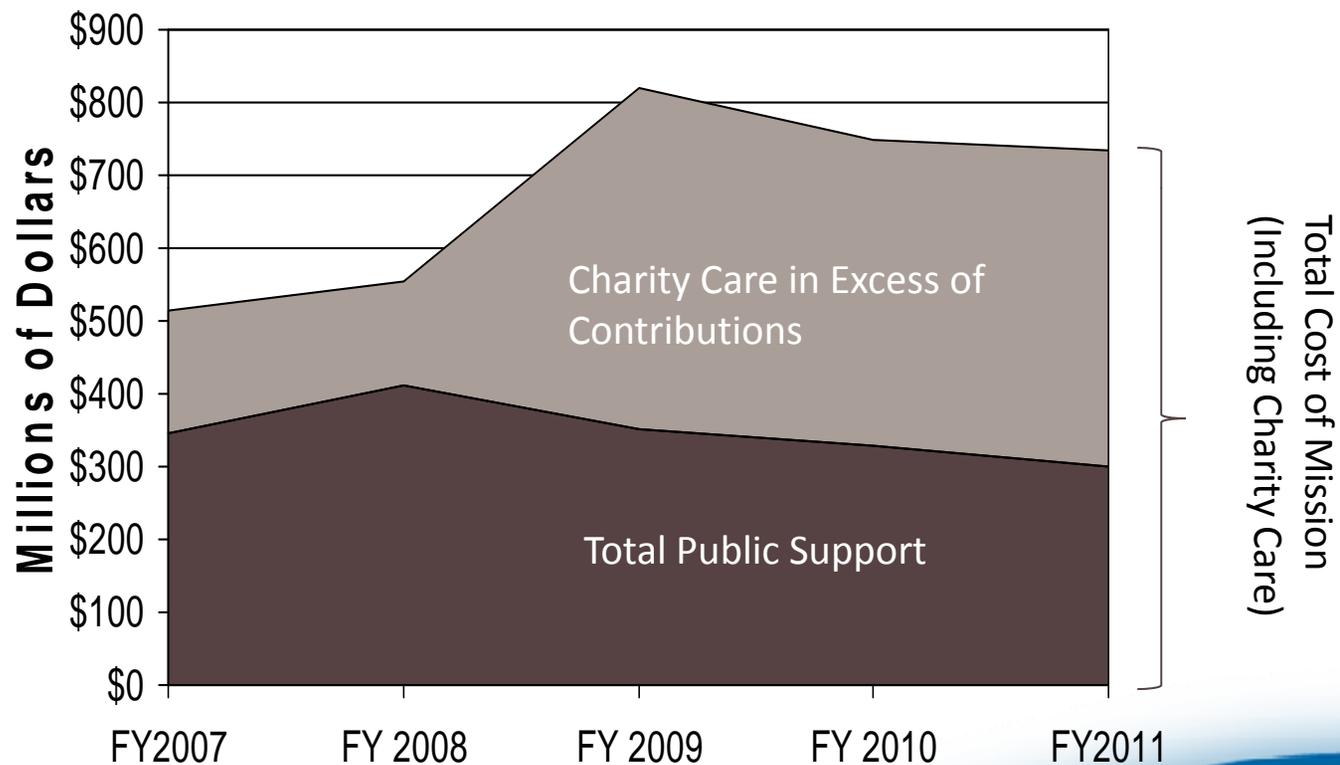
- JHS has made 100s necessary operational improvements
 - 2010 \$150m improvements
 - 2011 \$250m improvements
 - 2010 \$300m+ challenge
- After improvements—the crisis remains

A cash influx is needed to offset declines in volume and state funding for the indigent



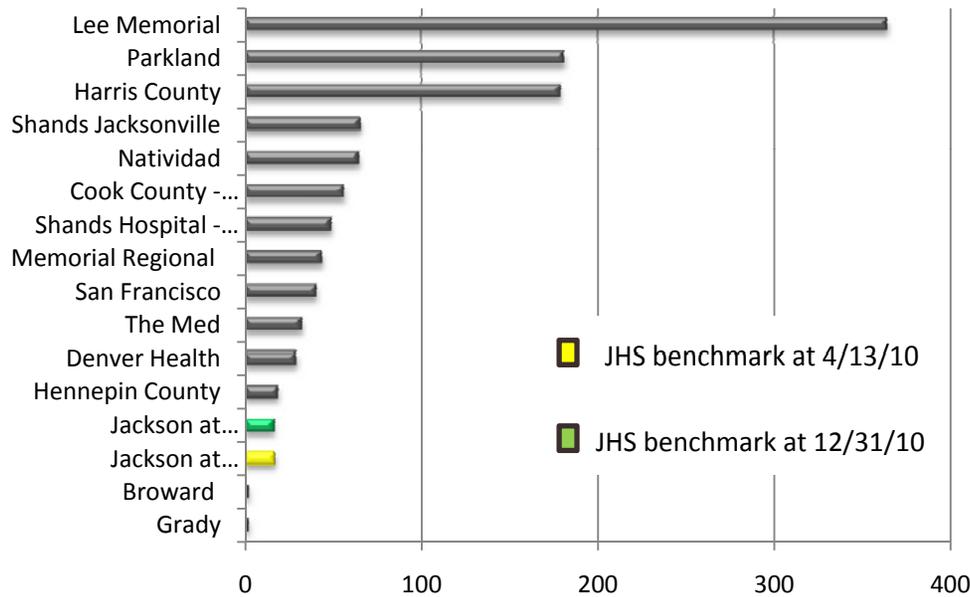
The cost of the JHS mission continues to outpace the public funds available and the gap is widening.

The Mission Gap

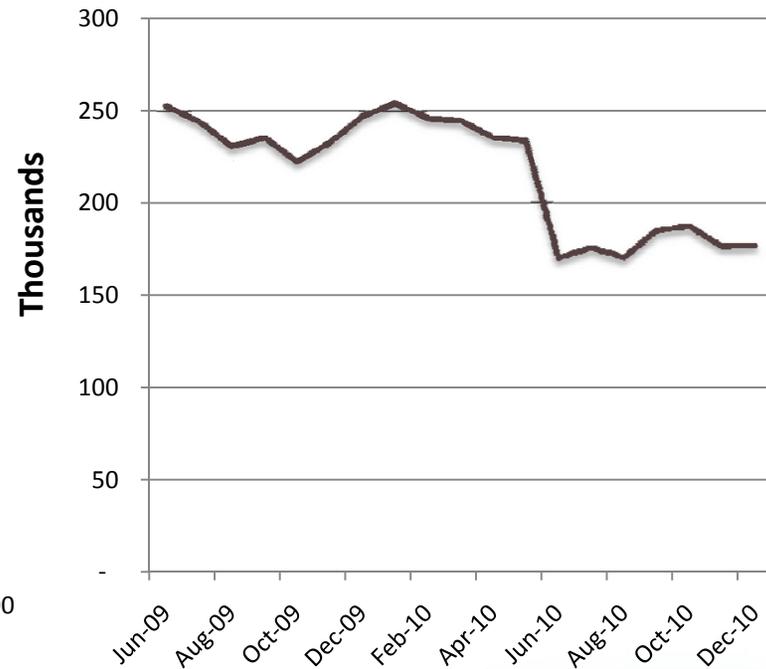


Revenue cycle improvements have provided cash to reduce AP by \$76M

Days Cash on Hand

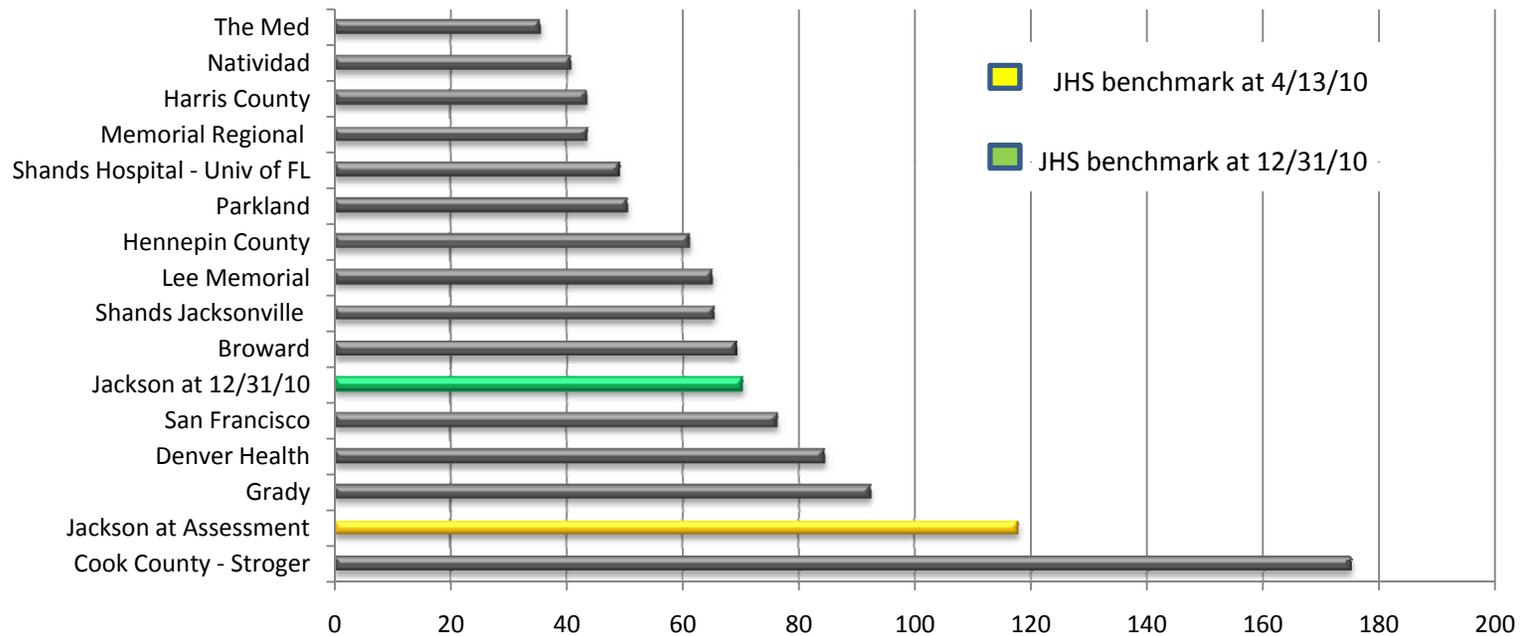


A/P Trend



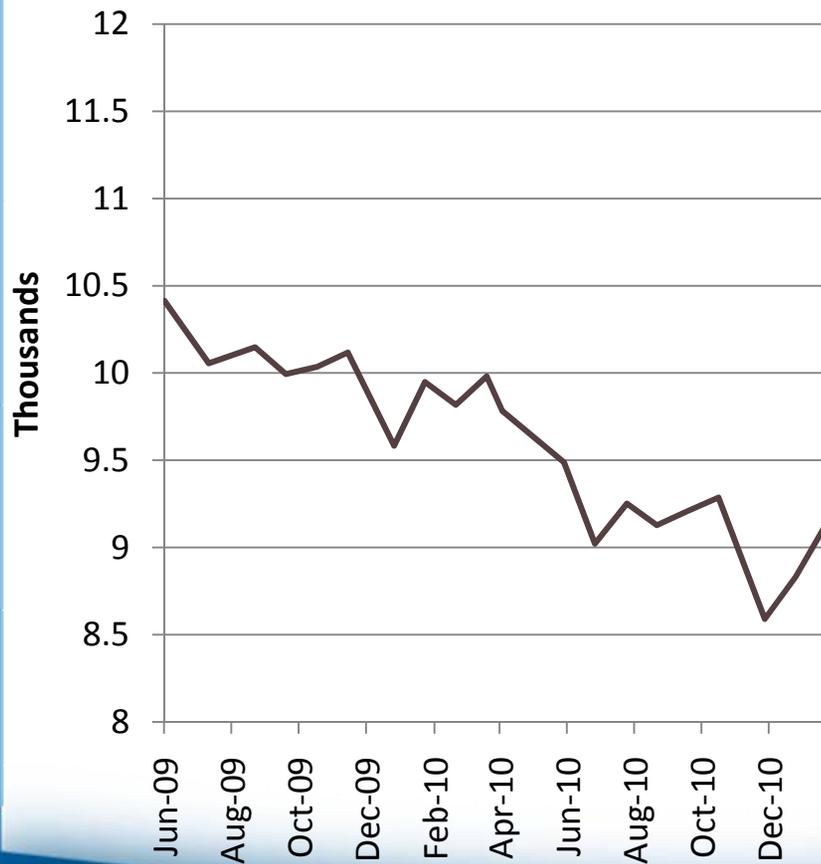
Dramatic improvement in collections of old receivables has a one-time impact.

Days in Net A/R

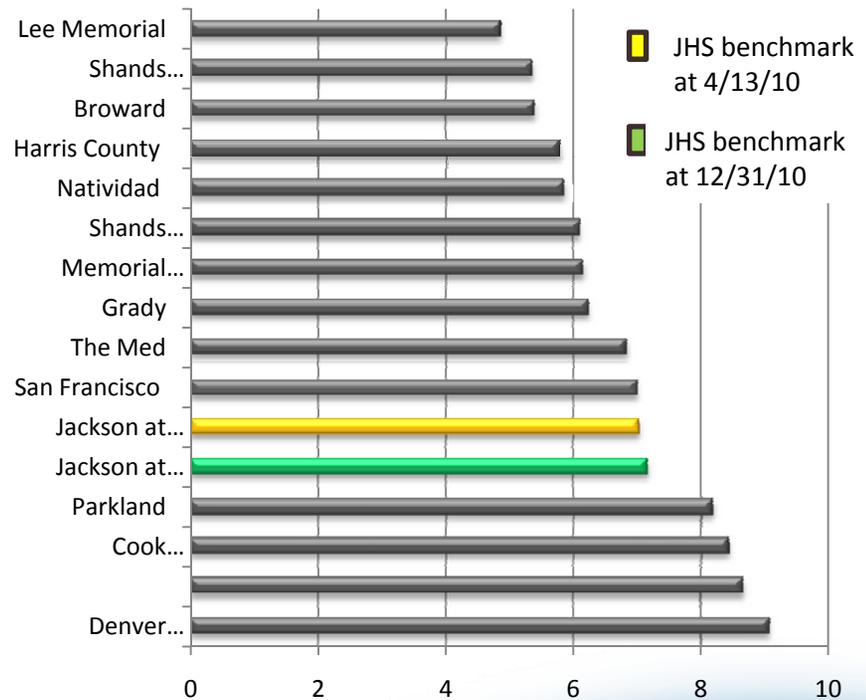


Labor efficiency struggles to offset unexpected volume declines

Worked FTEs



FTEs per Adjusted Daily Census



Supply costs continue to decline with dramatic improvements planned over the next 24 months

Supply Cost as a Percentage of Operating Expense

