CLACKAMAS COUNTY BOARD OF COUNTY COMMISSIONERS

Sitting/Acting as (if applicable)

Study Session Worksheet

2:00

Presentation Date: 2/4/14

Approx Start Time: 2:00 PM

Approx Length: 1 hour

Presentation Title: Clackamas Health Centers Financial Deficit

Department: Health, Housing and Human Services (H3S)

Presenters: Cindy Becker and Richard Swift

Other Invitees: Mark Gonzales

WHAT ACTION ARE YOU REQUESTING FROM THE BOARD?

The purpose of this Study Session is to discuss the budget gap in the Health Centers budget and request direction from the Board on proposed options to close the gap.

EXECUTIVE SUMMARY:

The department has identified a significant gap in Health Center revenue and expenses for FY14, specifically in primary care. This is the result of multiple factors:

- The 2013-14 budget was built on revenue assumptions that turned out to be unrealistic due to the following:
 - It included more fund balance than was available:
 - Staff productivity which drives reimbursement was set at levels that were not operationalized and therefore, not sustainable over the fiscal year.
 - Projections for the number of insured vs. uninsured patients was not realistic
- · On the expense side, staff were hired at Sunnyside and in other areas in anticipation of increased patients volume before increases occurred;
- The above issues are exacerbated by an accounting structure that does not allow the division to accrue revenues and delayed posted of revenues due to year end closing.

Health Centers management have engaged in a range of action to close the budget gap

- Shorten the billing cycle to increase realized revenue in this fiscal year
- Work with other H3S divisions to transfer funds and hold vacant positions
- Eliminating all positions that have been vacant since July, 2013
- Eliminating and/or re-vamping the schedules of most temporary positions
- Reducing the number of regular positions by about 10%
- Material and service reductions

These actions have reduced our gap to \$2.48 million. Please see attached document detailing the actions described above.

FINANCIAL IMPLICATIONS (current year and ongoing):

Health Center management is also focused on future clinic operations and performance. A financial pro forma is attached that describes our expected financial performance for FY15 through FY17. Conservative increases in productivity, patient enrollment and payer mix form the basis for the document. The attachment contains the detail analysis.

The federally qualified health center includes primary care, dental care, and behavioral health with primary care the core service umbrella. If we are unable to close the gap and cannot provide primary care services, we would lose the additional federal/state payments ("wrap") for behavioral health and dental and they would not be able to be sustained.

LEGAL/POLICY REQUIREMENTS:

Follow County and EA contract layoff processes

PUBLIC/GOVERNMENTAL PARTICIPATION:

OPTIONS:

- 1. Use County General Funds to close Health Centers gap for FY14
- 2. Loan funds to the Health Centers to close gap and direct County Finance to develop repayment schedule
- 3. Direct staff to continue expense reductions to close FY14 gap

RECOMMENDATION:

To completely close the gap would require the reduction of approximately 52 FTE, resulting in clinic closures. The clinics are a critical component of the safety net for low-income adults and there are no other providers who could handle the volume of patients in the immediate future. In calendar year 2013, the primary care clinics served 10,474 patients.

As such, we recommend that the Board Direct staff to work with County Finance regarding loan detail and repayment schedule to pursue option two (2) to address budget gap.

ATTACHMENTS:

- Revenue and expense activities
- Pro forma for FY15, FY16 and FY17

SUBMITTED BY:	
Division Director/Head Approval	
Department Director/Head Approval	1 X TU
County Administrator Approval	

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For information on this issue or copies of attachments, please contact _	
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2.14 Study Session Attachment Health Centers Actions to Close FY 14 Gap

Revenue		
Revenue Actions		
		Estimated Revenue
Accelerate billing to bring in more revenue this fiscal year		\$1,000,000.00
Identify funds from all H3S divisions to reduce gap		\$900,000.00
Total Revenues		\$1,900,000.00
Evenue		
Expenditures Reductions		<u> </u>
anpointed the design of	FTE	Estimated Savings
Eliminate all vacant positions	25.3	\$1,128,200.00
Reduce workforce hours from 40 to 37.5 work week	23.0	\$350,000.00
Terminate a majority of the temporary labor pool	 	\$381,300.00
Reduce admin. staffing in medical records, billing, data analysis, and metrics	9.43	\$195,000.00
Reduce support staff in clinical locations (we are above the national standard)	14	\$254,200.00
Eliminate 3 management positions	3	\$108,000.00
Reduce Materials & Services expenditures	N/A	\$2,304,000.00
Recognize the expense of closing out Gladstone in FY 2015	N/A	\$900,000.00
Transfer staff from FQHCto Public Health & Behavioral Health	<6.13>	
Net filled positions reduction	19.3	
Total Reductions/Savings		\$5,620,700.00
Summary		
Current Gap		Ć10 ··· :II: - ·
Additonal Revenue	 	\$10 million \$1.9 million
Additional Expense Reduction		\$5.62 million
		
Net Gap		\$2.48 million

Note: The budget figures include \$6 million in contingency as an expense. It is not included in these figures as it essentially is a balancer between revenues and expenses.

3-Year Pro Forma Statement

	FY15	FY16	FY17
Revenue			
Medical Clinics:			
Oregon City Primary Care Clinic	3,877,000	4,686,000	5,463,000
Sunnyside Medical Center	2,372,000	2,867,000	3,342,000
Gladstone Community Clinic	1,086,000	1,313,000	1,530,000
School Based Health Centers	78,000	94,000	110,000
Sandy Health & Wellness	219,000	265,000	309,000
Total Medical Revenue	7,632,000	9,224,000	10,754,000
Dental Clinics:			
Oregon City Dental Clinic	1,302,000	1,497,000	1,871,000
Sunnyside Dental Clinic	894,000	1,028,000	1,285,000
Total Dental Revenue	2,196,000	2,525,000	3,156,000
Behavioral Health Services:			
Mental Health Services	8,215,000	8,421,000	8,632,000
Addictions Services	1,848,000	1,894,000	1,941,000
Court Programs	1,013,000	1,038,000	1,064,000
Total Behavioral Health Revenue	11,076,000	11,353,000	11,637,000
Grants & Other	3,463,000	3,532,000	3,603,000
Total Revenue	24,367,000	26,634,000	29,150,000
Expenses:			
Personnel Services	15,433,000	17,015,000	17,780,000
Material & Services	4,894,000	5,002,000	5,300,000
Indirect Expense	2,415,000	2,462,000	2,585,000
Total Expenses	22,742,000	24,479,000	25,765,000
Net Surplus (Deficit)	1,625,000	2,155,000	3,385,000

2.14 Study Session Attachment Health Centers Actions to Close FY 14 Gap

Pro Forma Analysis

Revenues

1 Growth in Medical Revenues is calculated using the following assumptions:

- All of the medical clinics have modified their appointment schedules and hours of operations to allow an increase in utilization by patients. In addition, the clinics are now beginning to see patients who are newly insured through the Affordable Care Act and with the efforts of Cover Oregon. We currently average 16 encounters per provider per day. By the end of FY2015 we anticipate seeing 20 patients per provider and as this trend continues, we forecast 25 patients per provider by FY2017. This is in line with the FQHC guides and with our counterparts in medical practices.
- To accommodate the assignment of 6,000 new Care Oregon patients and 1,200 new uninsured patients, we will add 4 providers
 in total over the 3 year period. These are assumed in the Pro Forma to be added as mid-year hires.
- Finally, there is a shift in payer mix to show the inclusion of new patients due to Medicaid expansion and to show shift of
 uninsured patients to insured.
- In Primary Care, the number of patients using our clinics will grow as follows:
 - 14,000 to 15,252 in FY2015
 - 16,805 in FY2016
 - 19,457 in FY2017
- The number of Medicaid patients will increase as follows:
 - from 7,420 to 10,676 in FY2015
 - 11,764 in FY2016
 - 13,620 in FY2017

2 Growth in Behavioral Health Revenues is calculated using the following assumptions:

- The Pro Forma assumes a modest growth of 2.5% each fiscal year. This would include scheduling to reach maximum current
 capacity of existing services.
- The Pro Forma also anticipates the influx of new patients into the clinic based Behavioral Health services through the Primary Care referral process, which is a relatively new and expanding offering at the clinic level.

3 Growth in Dental Revenues is calculated using the following assumptions:

- The dental program currently has 2 full time dentists. There is capacity at the Sunnyside Clinic to add dental hygiene hours and a third dentist. This would be a gradual shift with locums used until the dental clinics reach the encounter level that supports the hiring of a full time dentist in FY2017.
- It is also anticipated that with the gradual increase in encounters there will be a need to add dental hygiene services full time at both clinics. It is currently provided half time to each. The revenue projections forecast billable encounters for the added hygiene work.

4 Grant Revenues

- The largest grant, HRSA-Federally Qualified Health Centers, is \$1.3 Million (or 38% of the total grant funding).
- The CSAP, OHA SBHC MH, Chez Ami-Supported Housing, and BJA-Trauma Informed Drug Court grants are another \$770,000 in funding, combined.
- There are additional grants of under \$100,000 each which constitute another \$600,000, combined.
- Other funding sources include County funds & Purchase of Care dollars, totaling about \$800,000.

Expenses

1 Personnel Services

- Personnel Services account for the reduction in workforce of 2014 and hold those cuts through FY2015.
- There are wage and benefit increases in FY2015-FY2017 to account for the new medical and dental providers and their direct care support staff.

2 Materials & Services

- The projected increase in supplies correspond to the direct cost of medical and dental supplies as encounters increase.
- There is a minor increase in office supply costs as staffing increases.

Capital Improvement

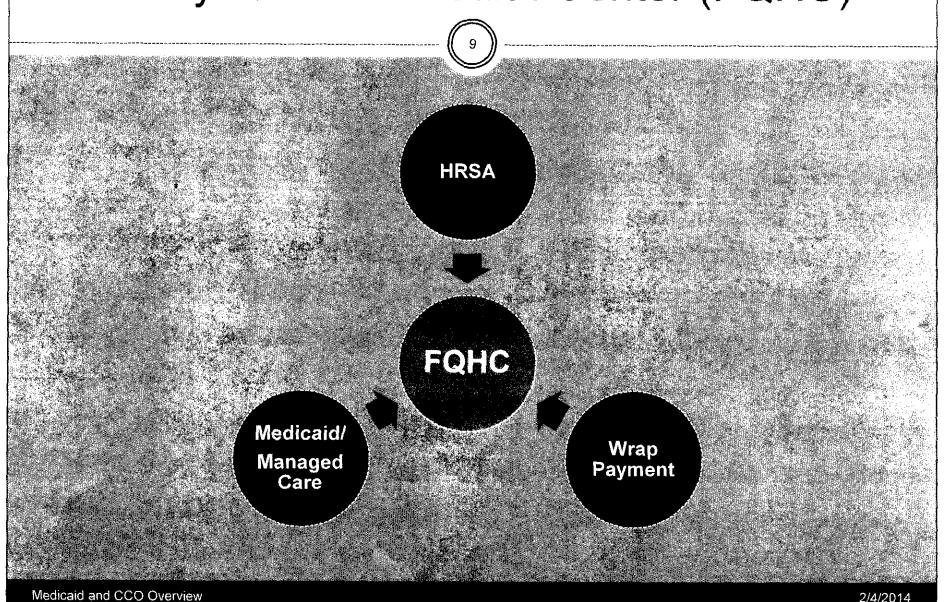
• Capital Remodel in FY2017 at Hilltop Clinic as originally specified in FY2014.

4 Indirect Costs

- There are indirect costs from shared services provided by the County. This includes contracting, HR, IT, as well as utilities, building utilization, and financial services.
- There are some expenses from joint procurements and shared resources within Health, Housing and Human Services (H3S). The
 expense allocation for these is also included in indirect costs.



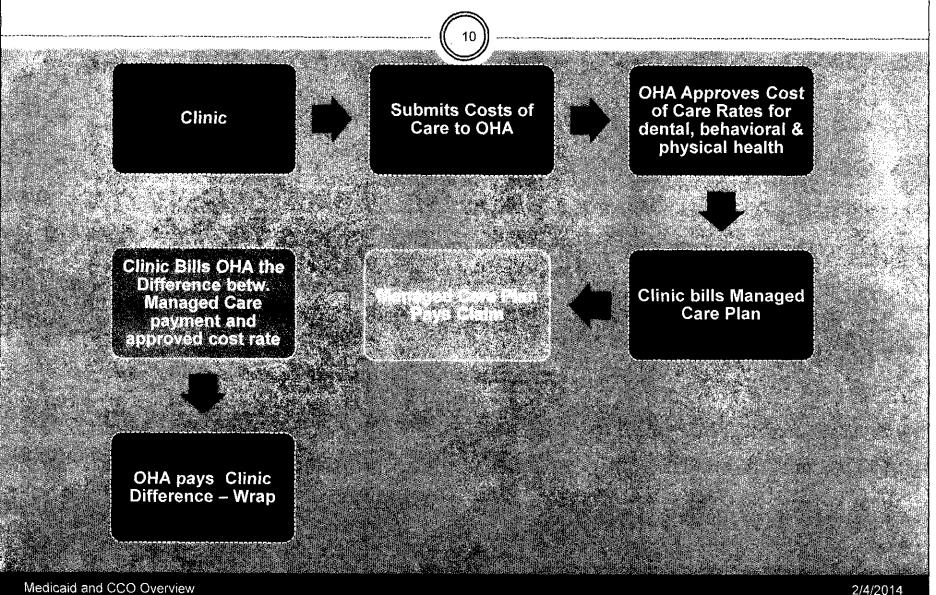
Federally Qualified Health Center (FQHC)



2/4/2014



FQHC "Wrap" Process



Contingency Expense Reduction Eliminate all vacant positions Reduce workforce hours from 40 to 37.5 work week Terminate a majority of the temporary labor pool Reduce admin. staffing in medical records, billing, data analysis, and metrics Reduce support staff in clinical locations (we are above the national standard) Eliminate 3 management positions \$ (6,000,000) \$ \$ 1,128, \$ 350, \$ 381, Reduce admin. staffing in medical records, billing, data analysis, and metrics \$ 195, Reduce support staff in clinical locations (we are above the national standard) \$ 254, Eliminate 3 management positions	
Accelerate billing to bring in more revenue this fiscal year All H3S divisions to identify savings and/or vacancies to absorb staffing layoffs Total Revenues Expense Actions Contingency Expense Reduction Eliminate all vacant positions Reduce workforce hours from 40 to 37.5 work week Terminate a majority of the temporary labor pool Reduce admin. staffing in medical records, billing, data analysis, and metrics Reduce support staff in clinical locations (we are above the national standard) Eliminate 3 management positions \$ 1,000, \$ \$ 1,900, \$ (6,000,000) \$ \$ 1,128, \$ 350, \$ 381, \$ 381, \$ 254, Eliminate 3 management positions	New Projected Vear
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Reduce Materials & Services expenditures	000
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Recognize the expense of closing out Gladstone in FY 2015	000
Total Expenses \$ 41,200,000 \$ (6,000,000) \$ (5,620,	700) \$ 29,579,300
Current Gap	£46 195 m
Additional Revenue	\$16 million \$1.9 million
Additonal Expense Reduction	\$1.9 million
Net Gap	\$2.48 million
FTE 220.35 45.6	174.75
Changes to FY 14 Budget Assumptions	
Projected Fund Balance \$ 5,543,000 Decreased by \$4.9 million	\$ 554,000
Payer Mix for Medicaid/Uninsured	
Medicaid 73% Decreased 13%	60%
Uninsured 16% Increased by 5%	21%
Medicare 5% Increased by 5%	10%
Other 6% Increased by 3%	9%

112,000

Decreased by 14%

96,000

Projected Revenue Producing Encounters



(3)

(1)

(2)



					Total						
				Total	Provider &	Total					
	# of	Encs	# of	Provider	Support	Rev Gen					Total Medical
Period	Providers	per Day	Days	Encs	Staff Encs	Encs	Medicaid	Medicare	All Other	Uninsured	Revenue
Jul-14	10	16	15	2,400	3,529	3,098	377,108.51	17,429.35	10,316.77	43,473.24	448,327.87
Aug-14	10	17	15	2,550	3,750	3,293	400,845.17	18,526.42	10,966.15	46,209.62	476,547.36
Sep-14	10	18	15	2,700	3,971	3,487	424,460.10	19,617.86	11,612.20	48,931.96	504,622.12
Oct-14	10	19	15	2,850	4,191	3,680	447,953.30	20,703.68	12,254.92	51,640.26	532,552.16
Nov-14	10	20	15	3,000	4,412	3,874	471,568.23	21,795.12	12,900.96	54,362.60	560,626.91
Dec-14	10	20	15	3,000	4,412	3,874	471,568.23	21,795.12	12,900.96	54,362.60	560,626.91
Jan-15	11	20	15	3,300	4,853	4,261	689,212.49	23,972.39	14,189.73	30,672.04	758,046.65
Feb-15	11	20	15	3,300	4,853	4,261	689,212.49	23,972.39	14,189.73	30,672.04	758,046.65
Mar-15	11	20	15	3,300	4,853	4,261	689,212.49	23,972.39	14,189.73	30,672.04	758,046.65
Apr-15	11	20	15	3,300	4,853	4,261	689,212.49	23,972.39	14,189.73	30,672.04	758,046.65
May-15	11	20	15	3,300	4,853	4,261	689,212.49	23,972.39	14,189.73	30,672.04	758,046.65
Jun-15	11	20	15	3,300	4,853	4,261	689,212.49	23,972.39	14,189.73	30,672.04	758,046.65
FY15 Total	10.5	19.2	180	36,300	53,383	46,872	6,728,778.48	263,701.89	156,090.34	483,012.52	7,631,583.23
Jul-15	12	20	15	3,600	4,586	4,027	651,363.22	22,655.90	13,410.47	28,987.63	716,417.22
Aug-15	12	20	15	3,600	4,586	4,027	651,363.22	22,655.90	13,410.47	28,987.63	716,417.22
Sep-15	12	20	15	3,600	4,586	4,027	651,363.22	22,655.90	13,410.47	28,987.63	716,417.22
Oct-15	12	20	15	3,600	4,586	4,027	651,363.22	22,655.90	13,410.47	28,987.63	716,417,22
Nov-15	12	20	15	3,600	4,586	4,027	651,363.22	22,655.90	13,410.47	28,987.63	716,417.22
Dec-15	12	20	15	3,600	4,586	4,027	651,363.22	22,655.90	13,410.47	28,987.63	716,417.22
Jan-16	13	21	15	4,095	5,217	4,581	746,904.56	25,772.71	15,255.37	32,975.50	820,908.14
Feb-16	13	21	15	4,095	5,217	4,581	746,904.56	25,772.71	15,255.37	32,975.50	820,908.14
Mar-16	13	21	15	4,095	5,217	4,581	746,904.56	25,772.71	15,255.37	32,975.50	820,908.14
Apr-16	13	21	15	4,095	5,217	4,581	746,904.56	25,772.71	15,255.37	32,975.50	820,908.14
May-16	13	21	15	4,095	5,217	4,581	746,904.56	25,772.71	15,255.37	32,975.50	820,908.14
Jun-16	13	21	15	_4,095	5,217	4,581	746,904.56	25,772.71	15,255.37	32,975.50	820,908.14
FY16 Total	12.5	20.5	180	46,170	58,818	51,648	8,389,606.68	290,571.66	171,995.04	371,778.78	9,223,952.16
Jul-16	13.5	22	15	4,455	5,675	4,983	812,448.25	28,034.36	16,594.09	35,869.23	892,945.93
Aug-16	13.5	22	15	4,455	5,675	4,983	812,448.25	28,034.36	16,594.09	35,869.23	892,945.93
Sep-16	13.5	22	15	4,455	5,675	4,983	812,448.25	28,034.36	16,594.09	35,869.23	892,945.93
Oct-16	13.5	22	15	4,455	5,675	4,983	812,448.25	28,034.36	16,594.09	35,869.23	892,945.93
Nov-16	13.5	22	15	4,455	5,675	4,983	812,448.25	28,034.36	16,594.09	35,869.23	892,945.93
Dec-16	13.5	22	15	4,455	5,675	4,983	812,448.25	28,034.36	16,594.09	35,869.23	892,945.93
Jan-17	13.5	22	15	4,455	5,675	4,983	818,936.12	28,034.36	16,594.09	35,869.23	899,433.80
Feb-17	13.5	22	15	4,455	5, 6 75	4,983	818,936.12	28,034.36	16,594.09	35,869.23	899,433.80
Mar-17	13.5	22	15	4,455	5,675	4,983	818, 9 36.12	28,034.36	16,594.09	35,869.23	899,433.80
Apr-17	13.5	22	15	4,455	5,675	4,983	818,936.12	28,034.36	16,594.09	35,869.23	899,433.80
May-17	13.5	22	15	4,455	5,675	4,983	818,936.12	28,034.36	16,594.09	35,869.23	899,433.80
Jun-17	13.5	22	15	4,455	5,675	4,983	818,936.12	28,034.36	16,594.09	35,869.23	899,433.80
FY17 Total	13.5	22.0	180	53,460	68,100	59,796	9,788,306.22	336,412.32	199,129.08	430,430.76	10,754,278.38

Revenue Calculation:

Revenue is projected for each Insurance Payer Type based on the number of Revenue Generating Encounters times the projected percentage of total encounters for that Insurance Payer Type times the expected revenue per encounter.

Formula used: # of Revenue Generated Encounters x Rate Based on Insurance Payer Type.

Example: In July 2015 the projected Revenue Generating Encounters are 4,027 and the projected percentage of Medicaid encounters is 70%. The expected rate of reimbursement including Medicaid & Medicaid Wrap is \$231.07, so 4,027 x 70% x \$231.07 = \$651,363.22.

Definitions:

- (1) Provider Encounters includes doctor/mid-level provider encounters only.
- (2) Provider & Support Staff Encounters includes both the providers (doctors/mid-levels) and ancillary service providers (lab techs, nurses, etc).
- (3) Total Revenue Generating Encounters includes those types of encounters that insurance companies accept for reimbursement.

FY14 Budget

	Rev Gen Enc	FFS Revenue	Wrap Revenue	Total Revenue**	Medicaid	Medicare	All Other	Uninsured
Medical	48,273			7,709,792	65.0%	10.0%	6.0%	19.0%
Dental	11,493			2,173,476	81.0%	0.0%	6.0%	13.0%
Behavioral Health	51,999			13,323,899	75.0%	10.0%	9.0%	6.0%
	111,765	-	-	23,207,168				

^{**} FY14 Budget total Revenue included FFS Revenue and Wrap Revenue

FY14 New Projection

	Rev Gen Encs	FFS Revenue	Wrap Revenue	Total Revenue	Medicaid	Medicare	All Other	Uninsured
Medical	36,976	2,960,992	2,627,006	5,587,998	59.1%	9.0%	2.9%	29.0%
Dental	9,881	898,783	1,097,413	1,996,197	66.1%	0.0%	0.2%	33.7%
Behavioral Health	49,106	3,939,416	6,866,878	10,806,294	62.4%	9.3%	27.1%	1.2%
	95,963	7,799,191	10,591,298	18,390,489				

Budget was based on assumptions that ALL encounters were Revenue Generating Encounters with more Medicaid patients expected. Not all Encounters generate revenue, which was the most glaring oversight of the budgeted clinic revenue.

Projections are based on actual Revenue Generating Encounters through December 2013 and current payer mix, which has substantially less Medicaid patients than expected.

65

2.14 Study Session Attachment Health Centers Actions to Close FY 14 Gap

Pro Forma Analysis

Revenues

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- The CSAP, OHA SBHC MH, Chez Ami-Supported Housing, and BJA-Trauma Informed Drug Court grants are another \$770,000 in funding, combined.
- There are additional grants of under \$100,000 each which constitute another \$600,000, combined.
- Other funding sources include County funds & Purchase of Care dollars, totaling about \$800,000.

Expenses

1 Personnel Services

- Personnel Services account for the reduction in workforce of 2014 and hold those cuts through FY2015.
- There are wage and benefit increases in FY2015-FY2017 to account for the new medical and dental providers and their direct care support staff.

2 Materials & Services

- The projected increase in supplies correspond to the direct cost of medical and dental supplies as encounters increase.
- There is a minor increase in office supply costs as staffing increases.

3 Capital Improvement

Capital Remodel in FY2017 at Hilltop Clinic as originally specified in FY2014.

4 Indirect Costs

- There are indirect costs from shared services provided by the County. This includes contracting, HR, IT, as well as utilities, building utilization, and financial services.
- There are some expenses from joint procurements and shared resources within Health, Housing and Human Services (H3S). The expense allocation for these is also included in indirect costs.

3-Year Pro Forma Statement

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FY14	(Projected
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	FY14 (Projected			
	Actual)	FY15 (Projected)	FY16 (Projected)	FY17 (Projected)
<u>Revenue</u>				
Medical Clinics:				
Oregon City Primary Care Clinic	2,838,662	3,877,000	4,686,000	5,463,000
Sunnyside Medical Center	1,736,731	2,372,000	2,867,000	3,342,000
Gladstone Community Clinic	795,148	1,086,000	1,313,000	1,530,000
School Based Health Centers	57,110	78,000	94,000	110,000
Sandy Health & Wellness	160,347	219,000	265,000	309,000
Total Medical Revenue	5,587,998	7,632,000	9,224,000	10,754,000
Dental Clinics:				
Oregon City Dental Clinic	1,183,538	1,302,000	1,497,000	1,871,000
Sunnyside Dental Clinic	812,659	894,000	1,028,000	1,285,000
Total Dental Revenue	1,996,197	2,196,000	2,525,000	3,156,000
	-,	_,	_,,	5,200,000
Behavioral Health Services:				
Mental Health Services	8,014,961	8,215,000	8,421, 00 0	8,632,000
Addictions Services	1,803,000	1,848,000	1,894,000	1,941,000
Court Programs	988,333	1,013,000	1,038,000	1,064,000
Total Behavioral Health Revenue	10,806,294	11,076,000	11,353,000	11,637,000
Grants & Other	3,468,310	3,463,000	3,532,000	3,603,000
Previous Year Fund Balance	554,000		, ,	,
9 9 feet	22 442 722			
Revenue Subtotal	22,412,799	24,367,000	26,634,000	29,150,000
Intradepartmental Clerical Support & Indirect	4,687,201	3,541,888	3,871,410	4,237,126
Total Revenue after Intradepartmental	27,100,000	27,908,888	30,505,410	33,387,126
Eurondituro	<u> </u>			
Expenditure Finance & Admin	3 676 030	2.001.202	2 200 000	2 277 540
rmance & Aumin	2,676,920	2,981,262	3,208,966	3,377,549
Medical Clinics:				
Oregon City Primary Care Clinic	4,425,501	4,870,189	5,242,166	5,517,563
Sunnyside Medical Center	2,455,259	2,979,646	3,207,227	3,375,718
Gladstone Community Clinic	1,421,716	1,364,206	1,468,402	1,545,544
School Based Health Centers	102,112	97,982	105,465	111,006
Sandy Health & Wellness	286,700	275,102	296,114	311,670
Total Medical Expenditure	8,691,288	9,587,124	10,319,374	10,861,501
Dental Clinics:				
Oregon City Dental Clinic	3 116 154	2 020 552	2 100 642	2 200 405
Sunnyside Dental Clinic	2,116,154	2,030,552	2,185,643	2,300,465
Total Dental Expenditure	1,453,027 3,569,182	1,394,250 3,424,802	1,500,741	1,579,582
Total Bellat Experience	3,303,162	3,424,002	3,686,384	3,880,047
Behavioral Health				
Mental Health Services	7,052,371	5,005,551	5,387,868	5,670,918
Addictions Services	1,878,902	1,126,021	1,212,024	1,275,698
Court Programs	1,029,939	617,240	664,383	699,287
Total Behavioral Health Expenditure	9,961,212	6,748,811	7,264,276	7,645,903
Expenditures Subtotal	24,898,602	22,742,000	24,479,000	25,765,000
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Intradepartmental Clerical Support & Indirect	4,687,201	3,541,888	3,871,410	4,237,126
Total Expenditure after Intradepartmental	29,585,803	26,283,888	28,350,410	30,002,126
Loan Repayment to the County		1,000,000	1,000,000	1,000,000
Net Surplus (Deficit)**	(2,485,803)	625,000	1,155,000	2,385,000
Projected Provider & Staff Encounters				
Medical	39,091	53,383	58,818	68,100
Dental	10,467	11,514	13,241	16,551
Behavoral Health	73,512	75,350	77,234	79,165
Total Projected Encounters	123,070	140,247	149,293	163,816
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Projected FTE	174.75	177.75	184.25	188.25