## THE UNIVERSITY OF MICHIGAN REGENTS COMMUNICATION

Approved by the Regents June 19, 2008

#### REQUEST FOR ACTION

SUBJECT:

Michigan Health Corporation (MHC) Annual Business Plan

**ACTION REQUESTED:** 

Approve the MHC FY2009 Annual Business Plan and Budget

#### **BUSINESS PLAN:**

The Bylaws of MHC provide that MHC will annually submit a business plan to the Board of Regents for approval. MHC submitted its last business plan to the Board of Regents in July 2007. Since that time, MHC has focused on the operations of its existing subsidiaries.

In September 1996, the Regents approved the initial business plan and capitalization for MHC in the amount of \$30 million. As of June 30, 2008, MHC will have committed \$20 million to existing projects. MHC will begin its thirteenth year of operations in fiscal year 2009 and is budgeting net patient revenues of \$9 million.

At the April Board meetings, the Board of MHC and the Sole Member Representative unanimously approved the FY2009 Business Plan for submission to the Board of Regents.

#### APPROVAL REQUESTED:

The Board of MHC recommends that the Board of Regents approve the MHC FY2009 Annual Business Plan and Budget.

Robert P. Kelch, M.D.

Executive Vice President for Medical Affairs

Chair, Chief Executive Officer & Sole Member Representative, MHC

June 2008

### MICHIGAN HEALTH CORPORATION FISCAL YEAR 2009 ANNUAL BUSINESS PLAN



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#### A. Introduction

The Fiscal Year 2009 (FY2009) Business Plan for Michigan Health Corporation (MHC) provides an overview of the direction for MHC and its subsidiary organizations, as MHC begins its thirteenth year of operation.

The subsidiary organizations are grouped as to whether they are consolidated or unconsolidated on MHC's financial statements. Consolidated subsidiaries are organizations in which MHC maintains greater than fifty percent ownership. Unconsolidated subsidiaries are organizations in which MHC maintains ownership of fifty percent or less.

An overview of MHC, an operational and financial assessment, and the MHC Fiscal Year 2009 Budget are included in this business plan. In the Operational and Financial Assessment section, information is provided regarding capital allocation, management of MHC, future subsidiaries and capitalization, and subsidiary financial performance reviews. The MHC Fiscal Year 2009 Budget section highlights elements of the FY2009 budget and is followed by the MHC FY2009 budget statements.

#### B. Structure and Governance

MHC is a non-profit, non-stock membership corporation solely owned and operated by the University. MHC, the University of Michigan Medical School (UMMS), and the University of Michigan Hospitals and Health Centers (HHC) comprise the University of Michigan Health System (UMHS). M-CARE was part of the Health System through December 31, 2006. The Executive Vice President for Medical Affairs is the Member Representative of MHC.

The MHC Board meets on a regular basis or as necessary to conduct business. The Board of Directors are: Robert Kelch, M.D., Executive Vice President for Medical Affairs (Chair and Chief Executive Officer); Douglas Strong, Executive Director of the Hospitals and Health Centers (Vice Chair and Chief Operating Officer); Timothy Slottow, Chief Financial Officer of the University (Treasurer); James Woolliscroft, M.D., Dean of the Medical School (Secretary); and Glenna Schweitzer, Assistant Provost and Director of the Office of Budget and Planning of the University.

All proposed activities that are presented to the MHC Board for approval are first reviewed and endorsed by the MHC Management Committee. The Committee is chaired by Douglas Strong, the Chief Operating Officer of MHC. Members of the Committee include the Associate Vice President for Strategic Planning and Business Development, an Associate Professor of Internal Medicine from the Medical School, the Senior Finance Director and Revenue Cycle Officer of the HHC, the Administrative Director for MHC and representatives from the University Tax Office and the Office of General Counsel. The performance of each MHC subsidiary organization is reviewed annually by the MHC Management Committee. In this process, the goals of each subsidiary and its overall performance are reviewed, and goals for the coming year are assessed.

MHC staff monitor the activities of the ventures on an ongoing basis. Financial statements from the ventures are reviewed monthly and various activities are tracked, including trend analyses. The MHC

Administrative Director also attends board meetings for most of the subsidiary companies; actively participates in the MDS Finance and Operations Committee; and interfaces regularly with venture representatives to assist with problem solving and assuring that venture and MHC needs are being met.

#### C. Fiscal Year 2008 and 2009 Activities

During this past year, the MHC administrative staff focused on operational and financial reviews of the subsidiaries' performance; examined financial and cash flow relationships between MHC and UMHS and between MHC and its subsidiaries; and completed an MHC return on investment analysis. As a result of this focus and the needs of the subsidiaries, MHC accomplished the following during fiscal year 2008 (FY2008):

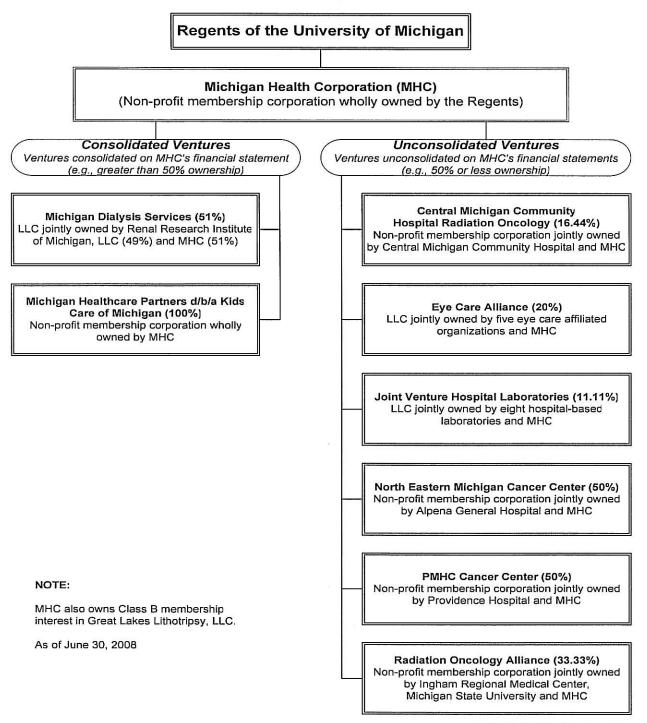
- Earned an estimated \$394,000 from Great Lakes Lithotripsy, LLC;
- Received cash distributions of \$190,000 from North Eastern Michigan Cancer Center (NEMCC), \$53,000 from Radiation Oncology Alliance (ROA), and \$50,000 from Michigan Health Management Corporation (MHMC);
- Determined there was a positive return on the FY2007 investment in MHC for the Health System with increased contributions in research funding, net income on professional revenue, and increased throughput and downstream net income for the HHC totaling approximately \$5.5 million;
- Effectively completed the Ford Partnership Health financial reporting and accounting responsibilities of Michigan Health Management Corporation (MHMC) during its run out period, following the sale of M-CARE and the transition of M-CARE staff to other University positions;
- Worked closely with Renal Research Institute, LLC (RRI) and Michigan Dialysis Services, LLC (MDS) leadership to monitor and improve MDS financial and operational performance to a point of consistent, profitable performance;
- Facilitated the transition of MVNC from MHC to becoming an HHC department;
- Initiated the dissolution of MHMC; and
- Evaluated the establishment of a radiation oncology joint venture with Metro Health Hospital.

For FY2009, MHC administrative staff will focus on the following activities:

- Work with project representatives to develop specific financial goals for each venture;
- Work with the project representatives in aggregate to reach overall target margins for MHC in support of MHC's financial viability;
- Evaluate the potential for new projects relating to the advances in technology and new projects resulting from changes in the UMHS and health care environment in general, particularly in the area of radiation oncology;
- Continue to work closely with MDS and RRI leadership to improve the financial reporting, operations and viability of MDS and evaluate MDS program expansion;
- Monitor changes in Eye Care Alliance (ECA) to assure Delta continues to fund all costs previously covered by the partners;
- Establish a joint venture with Metro Health Hospital if the due diligence supports proceeding with this radiation oncology joint venture;
- Evaluate establishing a joint venture related to proton beam therapy;
- Complete the dissolution of the corporate structure of MHMC; and
- Educate venture and MHC leadership on the new IRS reporting requirements.

#### D. MHC Subsidiary Organizations

As MHC completes its twelfth year of operation, the MHC Board has approved a total of seventeen (17) subsidiary organizations since its activation in 1996. Nine subsidiaries, or proposed subsidiaries, have been terminated and eight subsidiaries are operational. One potential additional radiation oncology venture is being evaluated. The following chart shows each of the current subsidiary organizations under MHC. The subsidiaries are grouped as to whether they are consolidated or unconsolidated on MHC's financial statements. Consolidated subsidiaries are organizations where MHC maintains greater than a fifty percent ownership.



#### II. OPERATIONAL & FINANCIAL ASSESSMENT

#### A. Capital Allocation

Capitalization for MHC is provided predominantly by a loan under the Loan Agreement with HHC or equity transfers from HHC and clinical departments of the Medical School. Decisions to provide capitalization to MHC subsidiary organizations through a loan or through an equity transfer from MHC are made based on an evaluation of the needs of the system as a whole. This evaluation includes the prospects for a return on investment to MHC as well as to the Hospitals and Health Centers and/or the Faculty Group Practice of the Medical School.

As of June 30, 2008, \$20.2 million of the initial capitalization has been committed to MHC and its subsidiaries, of which \$16.3 million has been invested (See Table 1 below).

**Table 1. MHC Capital Allocation for Board Approved Subsidiaries** 

	MHC Approved Commitment	Net Changes	MHC Approved Commitment	MHC Investment	Net Changes	MHC Investment
	6/30/07		6/30/08	6/30/07		6/30/08
MHC Current Subsidiaries			,			
Central Michigan Community Hospital Radiation Oncology	\$1,000,000	(\$82,200)	\$917,800	\$917,800		\$917,800
Eye Care Alliance	\$333,800		\$333,800	\$321,800		\$321,800
Joint Venture Hospital Laboratories	\$15,000		\$15,000	\$15,000		\$15,000
Michigan Dialysis Services	\$4,389,743		\$4,389,743	\$3,046,381		\$3,046,381
North Eastern Michigan Cancer Center	\$2,070,127	(\$190,000)	\$1,880,127	\$2,070,127	(\$190,000)	\$1,880,127
PMHC Cancer Center	\$4,735,685	(\$550,000)	\$4,185,685	\$4,185,685		\$4,185,685
Radiation Oncology Alliance	\$50,000	(\$50,000)	\$-0-	\$50,000	(\$53,000)	(\$3,000)
Subtotal	\$ 12,594,355	(\$872,200)	\$11,722,155	\$10,606,793	(\$243,000)	\$10,363,793
Closed and Non-Active Ventures	\$997,358	(\$269,569)	\$727,789	\$929,793	(\$2,687,645)	(\$1,757,852)
MHC Administrative Operations*	\$7,137,825	\$650,000	\$7,787,825	\$7,037,825	\$700,000	\$7,737,825
Totals	\$20,729,538	(\$491,769)	\$20,237,769	\$18,574,411	(\$2,230,645)	\$16,343,766

<sup>\*</sup> Includes a \$210,000 investment in mobile Lithotripsy.

#### B. Management

The operation and management of MHC is provided through a Management Agreement with the University. As a result, the business, administrative and management services are provided by employees of UMHS. MHC has 2.90 full time equivalents dedicated to the operations, management and financial reporting of MHC.

PricewaterhouseCoopers, LLP, MHC's auditors, performed procedures testing of MHC's activities for the fiscal year ending June 30, 2007.

#### C. Future Capitalization and Development

The sole member representative of MHC, together with the Board of MHC, will allocate any additional capitalization for MHC for development of new MHC projects and subsidiary organizations up to the initially approved capitalization of \$30,000,000. The initial approval in September 1996 made financing available through a combination of equity transfers and loan agreements between MHC and the Regents. The HHC was identified as the primary source of financing. Future capitalization for MHC is considered as part of the UMHS capital planning and allocation process.

The Board of MHC will continue to meet as necessary to review the status of its current subsidiaries and develop and approve new projects, based on the needs of UMHS and the changing health care environment. MHC will also continue to perform the necessary legal and financial due diligence for every new project it considers. All projects approved by MHC will remain consistent with and supportive of the University's missions and the purpose and intent of MHC. Future projects that MHC participates in during the term of this business plan will be reported to the Board of Regents as necessary.

#### D. Financial Performance of Subsidiaries

MHC subsidiaries are past their development and start-up stages and are now ongoing operations. MHC will continue to focus on operational and financial performance reviews and address what management and funding actions to take if subsidiaries do not meet their activity and financial goals. The most significant changes that occurred in FY2008 were completing the transfer of MVNC programs to HHC; closing out MHMC operations; and terminating MVNC's and MHMC's corporate status. This occurred following a determination that there no longer was a need for a corporation providing home health or third party administrator services in the Health System.

Although MHC operates with a July 1 to June 30 fiscal year, many of MHC's subsidiaries operate with a different fiscal year. This creates timing difficulties in developing and reporting budgets and projections to MHC and particularly in developing the MHC Annual Business Plan. Currently, the subsidiaries are held accountable for the annual budgets approved during the year by MHC, not necessarily the revenue and expense reflected in the July to June period of the MHC Annual Business Plan.

The Consolidated Statement of Operations on page ten summarizes the projected net gain or loss for MHC as a whole and by venture. In FY2008, MHC is projected to have a favorable margin of

\$2,838,381 that compares favorably to the budgeted margin of \$1,220,448 for FY2008. This difference is primarily the result of PMHC Cancer Center having a projected \$1,502,170 favorable variance due to increased intensity-modulated radiation therapy procedures.

#### III. MHC FISCAL YEAR 2009 BUDGET

The MHC Fiscal Year 2009 Budget was developed from each subsidiary's financial plan, MHC's financial statements, projected results of the subsidiary's operations, and known/planned changes for the coming fiscal year.

MHC's consolidated financial statements are displayed beginning on page nine. Highlights of those financial statements are identified below.

#### A. Schedule of Investments Summary

The Schedule of Investments displayed on page nine outlines the expected changes in approved capitalization for each subsidiary and MHC Administration from FY2008 to FY2009.

Currently, the MHC Board has approved commitments in the amount of \$20.2 million, including \$12.4 million to projects and \$7.8 million to MHC Administration. Of this approved commitment, \$8.6 million is approved to be transferred to the subsidiaries and \$7.7 million to MHC Administration as of June 30, 2008. MHC will have secured \$16.3 million for investment with \$12.0 million as equity transfers and \$4.3 million as loans. The \$7.7 million for MHC Administration includes \$5.5 million for interest costs.

Assuming the MHC Board approves all of the anticipated capital requests from its subsidiaries in FY2009, the total commitment level that the MHC Board will have approved for its subsidiaries and Administration will be \$20.7 million. Of this approved amount, MHC is projecting to have transferred funds totaling \$16.8 million as of June 30, 2009. With \$20.7 million of the original \$30 million capitalization designated for investment in current subsidiaries and MHC Administration, \$9.3 million will be available for other projects or venture needs as of June 30, 2009.

#### **B.** Consolidated Statement of Operations Summary

The statement on page ten summarizes the FY2008 projected net margin and the FY2009 budget for MHC as a whole and by venture. This summary identifies the direct results of operations of the subsidiaries, but does not reflect ancillary benefits to the Health System such as increased research funding and professional net income or expanded patient care service opportunities for the Hospitals and Health Centers and the Medical School Faculty Group Practice. It is estimated that the activities of MHC and its subsidiaries contribute approximately \$5.1 million net margin annually to other segments of the Health System.

MHC is budgeting an overall favorable net margin of \$2,924,586 for FY2009 compared to a projected margin of \$2,838,381 for FY2008. In FY2009, all ventures are expected to have a positive net margin except CMCHRO, ECA, and ROA. CMCHRO is still struggling to build volume and will continue to meet with referring physicians as well as introduce a new UM marketing campaign to

support CMCHRO. ECA financial needs will be funded by Delta and not the partners such as MHC. ROA will have increased expenses due to increased depreciation expense for the new accelerator.

#### C. MHC Consolidated Financial Statements

MHC consolidated financial statements follow on pages nine and ten.

Michigan Health Corporation Schedule of Investments Budgeted for June 30, 2009

	MHC	MHC Approved Commitment as of	Expected Changes in	cted les in	Сошп	MHC Expected Commitment as of	ME	MHC Total Investment as of EV2008	Expected Changes in Investment	hanges ment	MI Ey Invest	MHC Total Expected Investment as of
Consolidated Joint Ventures (A) Michigan Dialysis Services Total Consolidated Joint Ventures	- N	4,389,743	s s	00	လ လ	4,389,743	မ မ	3,046,381	s s	0	S S	3,046,381
Unconsolidated Joint Ventures (B) Central Michigan Community Hospital Radiation Oncology Eye Care Alliance Joint Venture Hospital Laboratories North Eastern Michigan Cancer Center	s	917,800 333,800 15,000 1,880,127	ω	0	σ	917,800 333,800 15,000 1,880,127	↔	917,800 321,800 15,000 1,880,127	<b>6</b>	0	<del>69</del>	917,800 321,800 15,000 1,880,127
Fivino Candel Center Radiation Oncology Alliance Total Unconsolidated Joint Ventures	€ <del>S</del>	7,332,412	s	0 0	6	7,332,412	ь	7,103,000) (3,000) 7,317,412	ь	0 0	မ	7,317,412
Closed and Terminated Ventures Kids Care of Michigan (Michigan Healthcare Partners) Michigan Health Management Corporation Michigan Provider Network	eρ	0 250,000	<b>↔</b>	0	εs	000'055	ь	(67,565) 550,000 0	€9	0	<b>6</b>	(67,565) 550,000 0
Michigan Visiting Nurses - Consolidated South Central Practice Association (Foote) (Jackson) Closed and Terminated Ventures	မာ	0 177,789 727,789	es.	0 0	မာ	0 177,789 727,789	မာ	(2,418,076) 177,789 (1,757,852)	69	0 0	တ	(2,418,076) 177,789 (1,757,852)
Subtotal for All Ventures	ь	12,449,944	<del>(A</del>	0	6 <del>9</del>	12,449,944	ω	8,605,941	<del>s</del>	0	cs.	8,605,941
Michigan Health Corporation - Administrative Activity Mobile Lithotripsy		7,577,825	4	450,000 (C)	6	8,027,825 210,000		7,527,825 210,000		500,000 (D)		8,027,825 210,000
Funds Available to be Committed by the MHC Board	<b>↔</b>	9,762,231	\$ (4	(450,000)	s)	9,312,231						
Regental Approved Limit on Capital Investment	v	30,000,000			v,	30,000,000						

13,156,234

(500,000)

es.

30,000,000

Consolidated joint ventures are entitles where MHC has an ownership percentage greater than 50%. Unconsolidated joint ventures are entitles where MHC has an ownership percentage up to 50%. MHC-Admin's additional \$450,000 is approved with approval of the business plan. MHC Admin's additional \$500,000 is approved with approval of the business plan. Notes:
(A) (B) (C) (C) (C) (M M M Ur

# Michigan Health Corporation Consolidated Statement of Operations ProForma Summary of Net Gain / (Loss) by Joint Venture as of June 30, 2009

	ĮT AI	FY2007 <u>Actual</u>	FY2008 Budget		FY2008 Projection		FY2009 Budget	
Consolidated Joint Ventures								
Kids Care of Michigan Michigan Dialysis Services (51.00%) Michigan Health Management Corporation Michigan Visiting Nurses - Consolidated	€9	0 \$ 311,631 (7,693) (82,463)		0 \$ 89,418 2,029 0	278,461 6,476 0	6 - 0 Ol	339,431 0	0 2 0 0
Net Gain / (Loss) in Consolidated Joint Ventures Unconsolidated Equity in Joint Ventures	<del>(s)</del>	221,475 \$	91,	91,447 \$	284,936	<b>↔</b> 9	339,431	72
Central Michigan Community Hospital Radiation Oncology (16.44%) Eye Care Alliance (20.00%) Joint Venture Hospital Laboratories (11.11%) NEMCC (50.00%) PMHC Cancer Center (50.00%) Radiation Oncology Alliance (33.33%)	€	(36,738) \$ (27,296) (2) 11,027 1,289,678	3,520 (9,000) 0 177,300 1,088,337 31,365	3,520 \$ (9,000) 0 77,300 88,337 31,365	(46,346) (2,713) 0 151,318 2,590,507 (1,045)	6) \$ 0 4 5) 4	(23,846) (139) 0 158,757 2,541,177 (3,488)	16) 39) 77 38)
Equity in Net Gain / (Loss) in Unconsolidated Joint Ventures Michigan Health Corporation - Administrative Activity	€9	1,389,688 \$	1,291,522	522 \$ 522) _	2,691,721	- C	2,672,462	22 190
Total Excess Revenue / (Expenses)	<del>⇔</del>	1,304,369	1,220,448	448	2,838,381	<b>~</b> I	2,924,586	اي

# Notes:

- MHC ownership interest shown in parenthesis after venture name, if less than 100%.
- Kids Care was terminated 9-30-04 and final transactions related to cost settlement were processed in FY2006.
- MHMC's Partnership Health Program ended May 31, 2006. Final expenses shown in FY2008. Cash balance transferred to MHC Administration in FY2008.
  - MVNC programs moved to HHC effective July 1, 2007.
- ECA is anticipating no cash call in FY2009; any financial needs to be covered by Delta.
  - PMHC is doing much better than anticipated due to increased IMRT procedures.
- MHC Administration changes are caused primarily by change in interest rate on loan from HHC.