

# **JCRHC**

## **Hospital Replacement Project**

### **Internal Financial Projections**

#### **October 2018**



# Denman & Company, LLP

- **Steve Schweizer, CPA, Partner**
- **West Des Moines, Iowa**
- **Audit / Cost / Consulting with 30+ Hospitals**
- **Iowa, Missouri, South Dakota, Kansas, Nebraska, North Carolina**
- **\$800+ Million Healthcare Construction Projects**



## Construction Related Costs

Land & land preparation costs	\$ 1,300,000
Construction (including alternates)	25,180,000
Construction & design contingencies	Included above
Site development	693,600
Equipment & furnishings	4,741,500
Architect, engineering and other fees	3,194,900
Owner contingencies	<u>900,000</u>
<b>Total Construction Related Costs</b>	<b>\$ <u><u>36,010,000</u></u></b>



## Total Project Costs

Construction & related costs	\$ 36,010,000
Construction period interest	580,000
Debt issue costs	291,000
Debt service reserve fund	<u>---</u>
<b>Total Project Requirements</b>	<b><u>\$36,881,000</u></b>

Note: Excludes building demolition,  
includes alternate construction items.



# Funding Assumptions

Use of Existing Reserves	\$ 19,011,000
Issuance of Debt	<u>17,870,000</u>
Total Project Costs	\$ <u>36,881,000</u>

Term of Debt	25 Years
Interest Rate	4.50%
Annual Debt Service	\$ 1,233,400

\* No other debt is considered during the forecast period



# Balance Sheet Assumptions

Current Cash Days on Hand	115 Days
Accounts Receivable	60 Days
Accounts Payable	25 Days
Accrued Compensation	35 Days
Other Receivables	
Inventories	Consistent with
Prepaid Expenses	historical results
Other Current Liabilities	



## Other Assumptions

- Begin construction Spring, 2019
- Completed by December, 2020 (20 months)
- 25-year term with 4.50% interest
- County taxes increased 1.5% per year
- Average depreciable life of 18 years



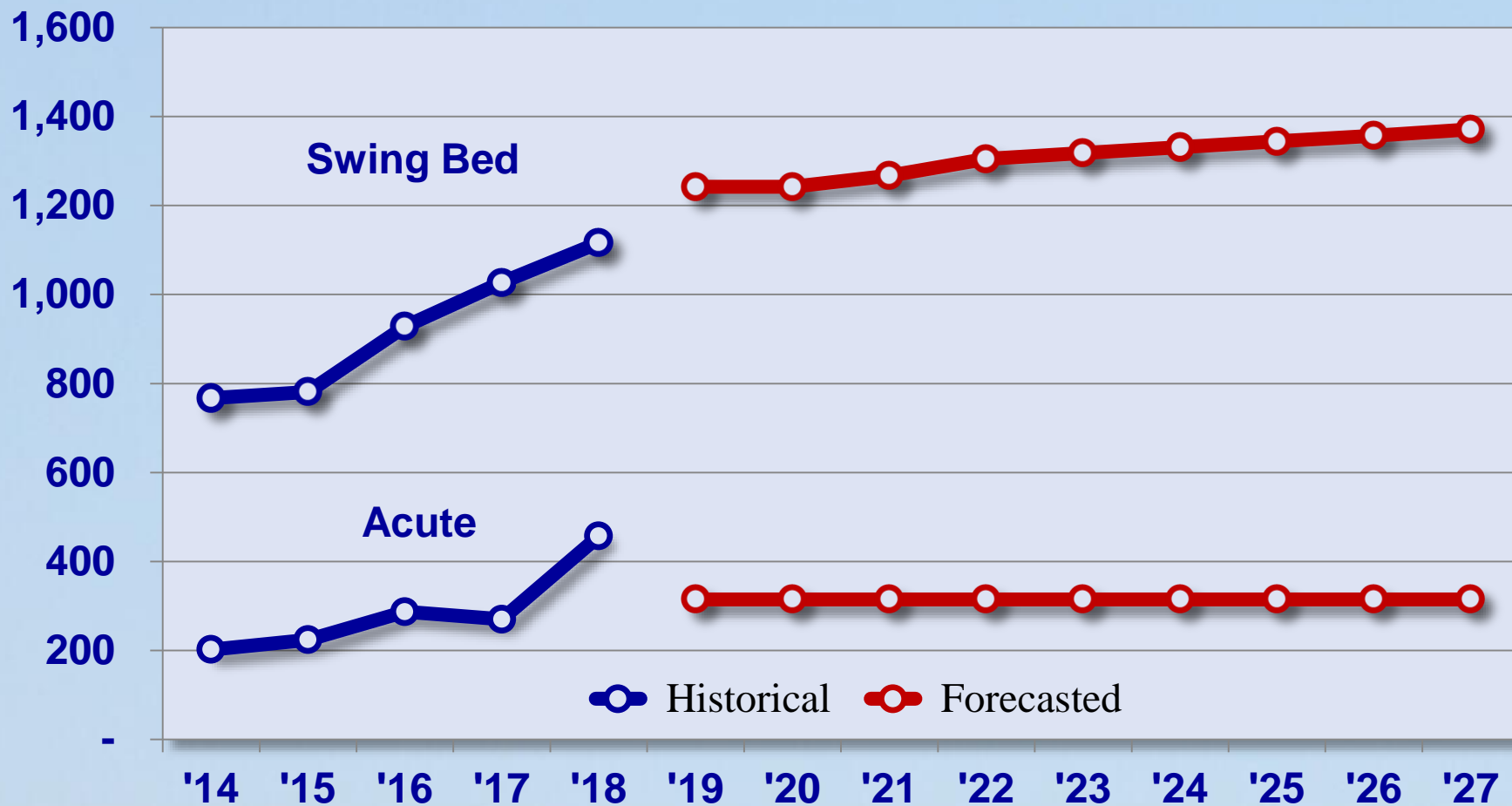
# Other Assumptions

- Continued Medicare cost-based reimbursement
- No significant change in services provided
- No significant contributions or fundraising
- Payor mix remains similar to current mix
- Stability of active medical staff is maintained

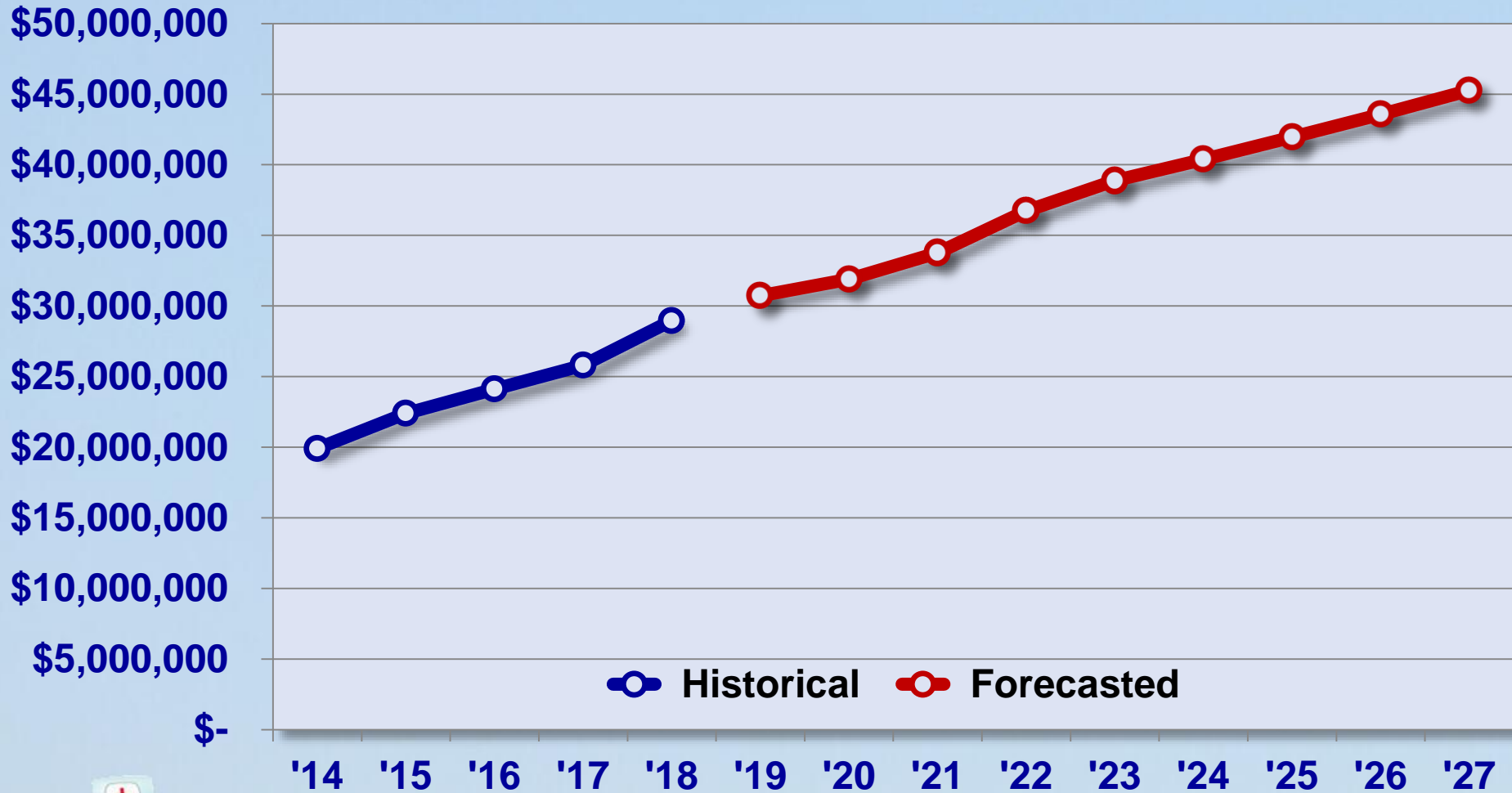




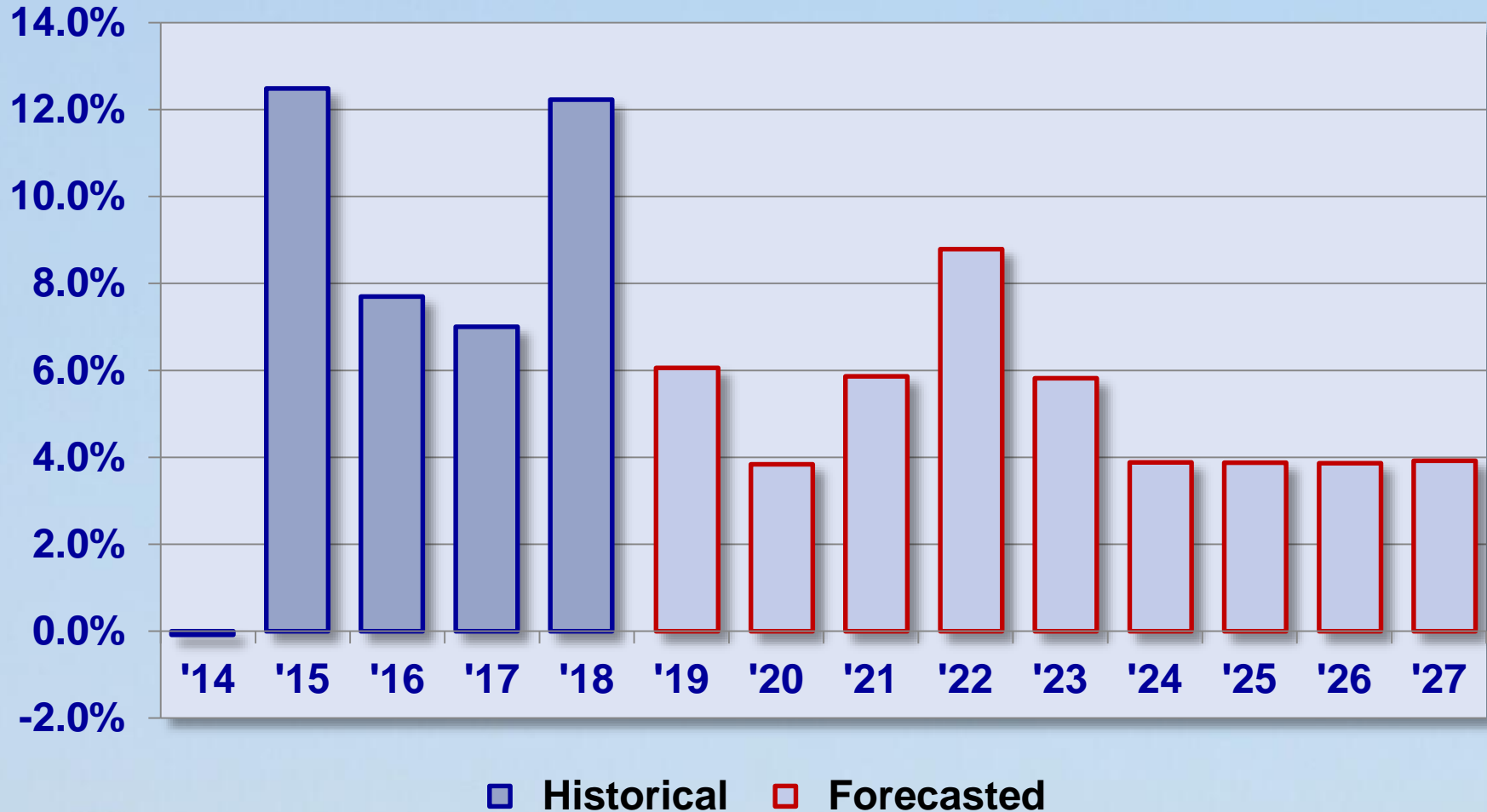
# Volume – Inpatient Days



# Total Gross Revenues

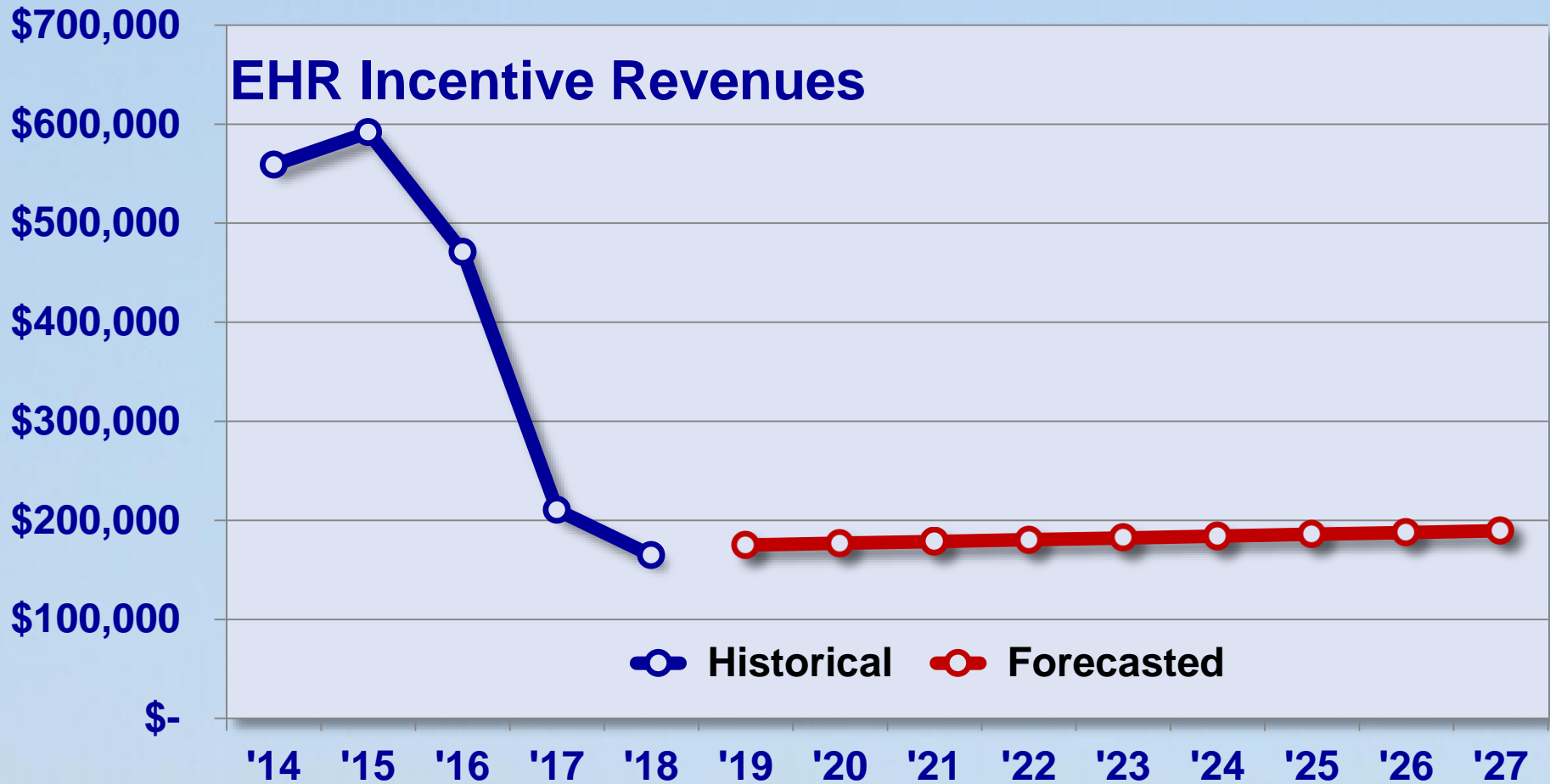


# Year over Year Gross Revenue Growth



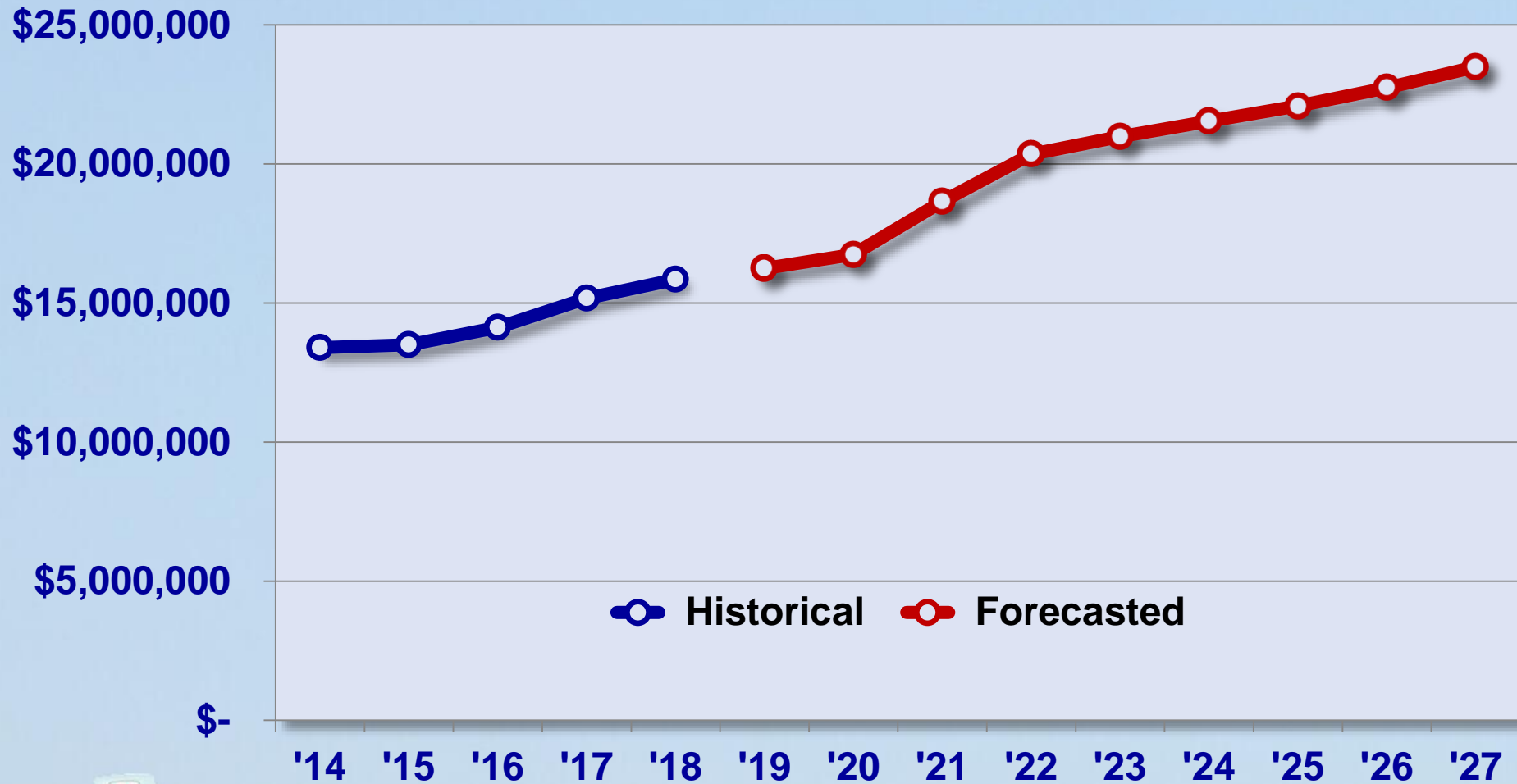
# Other Revenues

## EHR Incentive Revenues

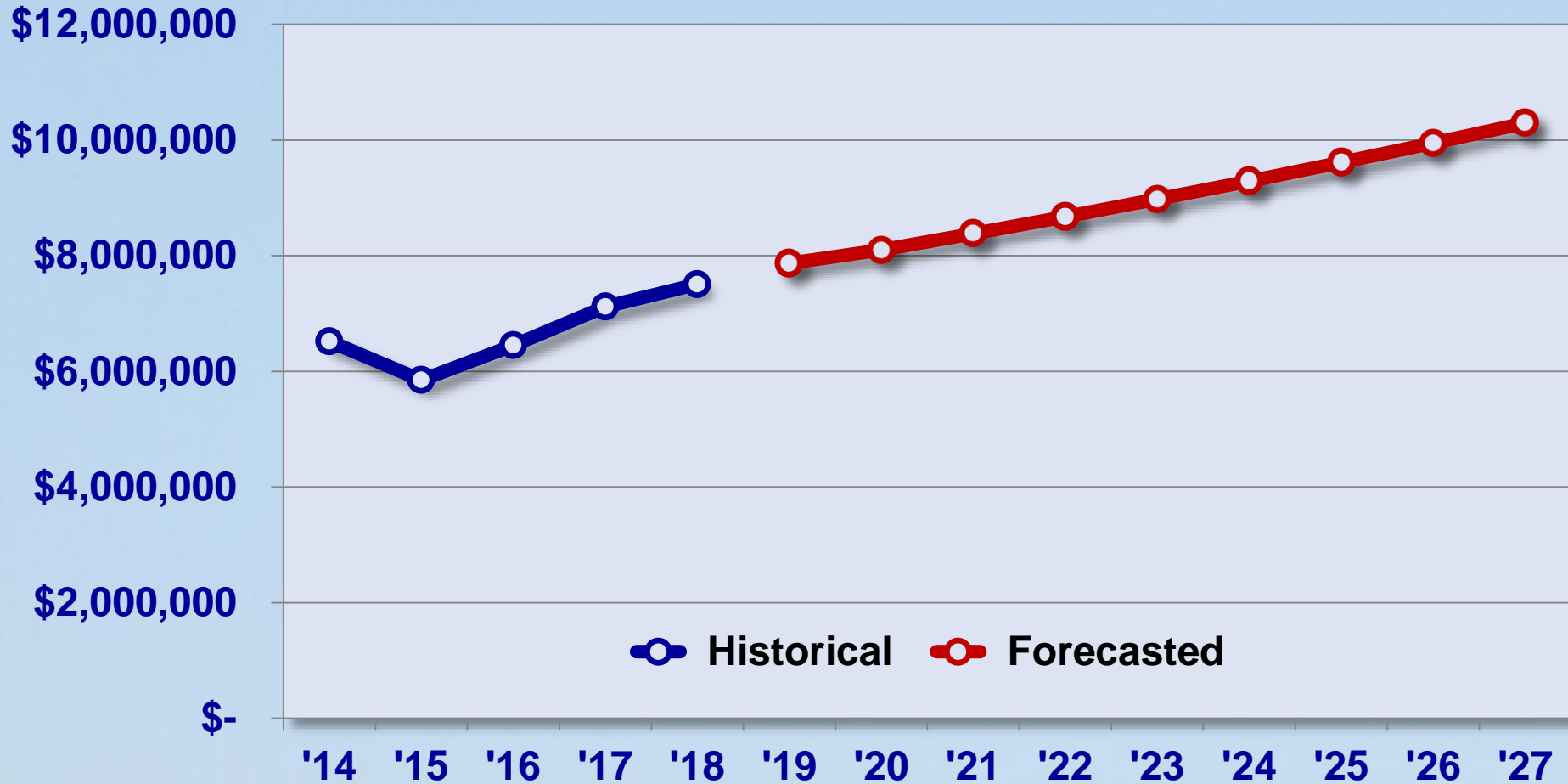


# Total Expenses

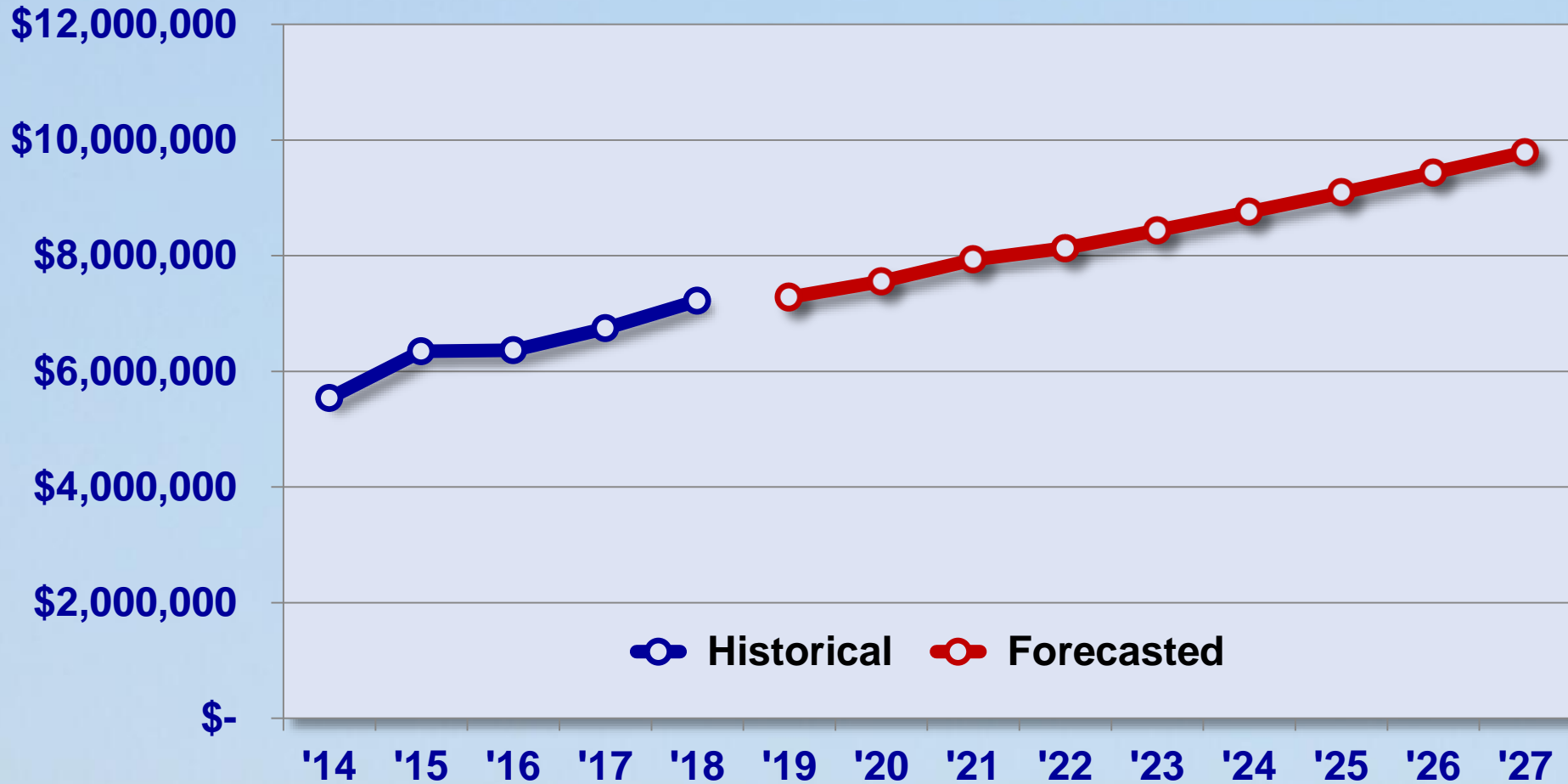
(including non-operating interest expense)



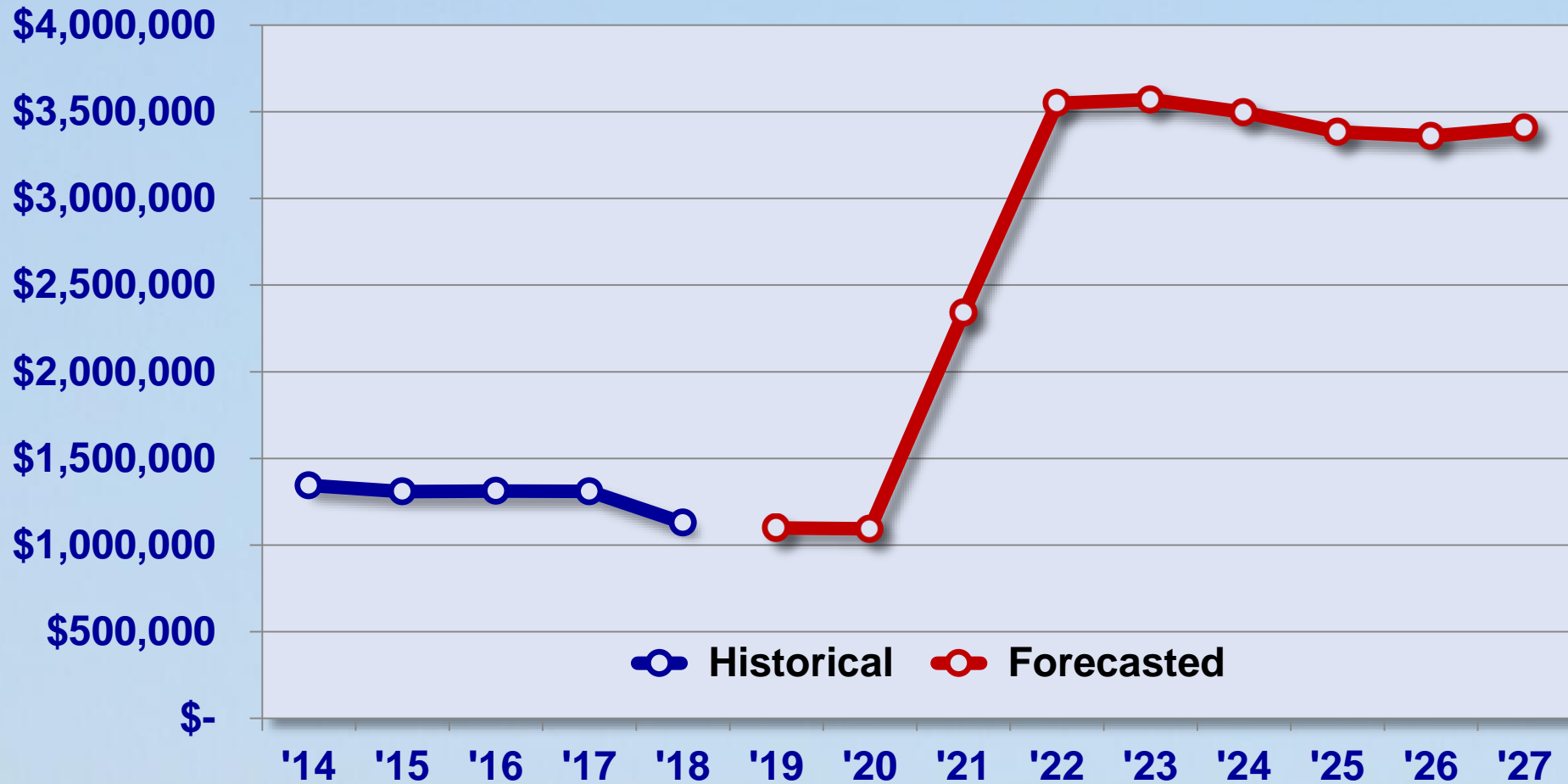
# Salaries & Benefits



# Supplies and Other Expenses



# Depreciation and Interest Expense

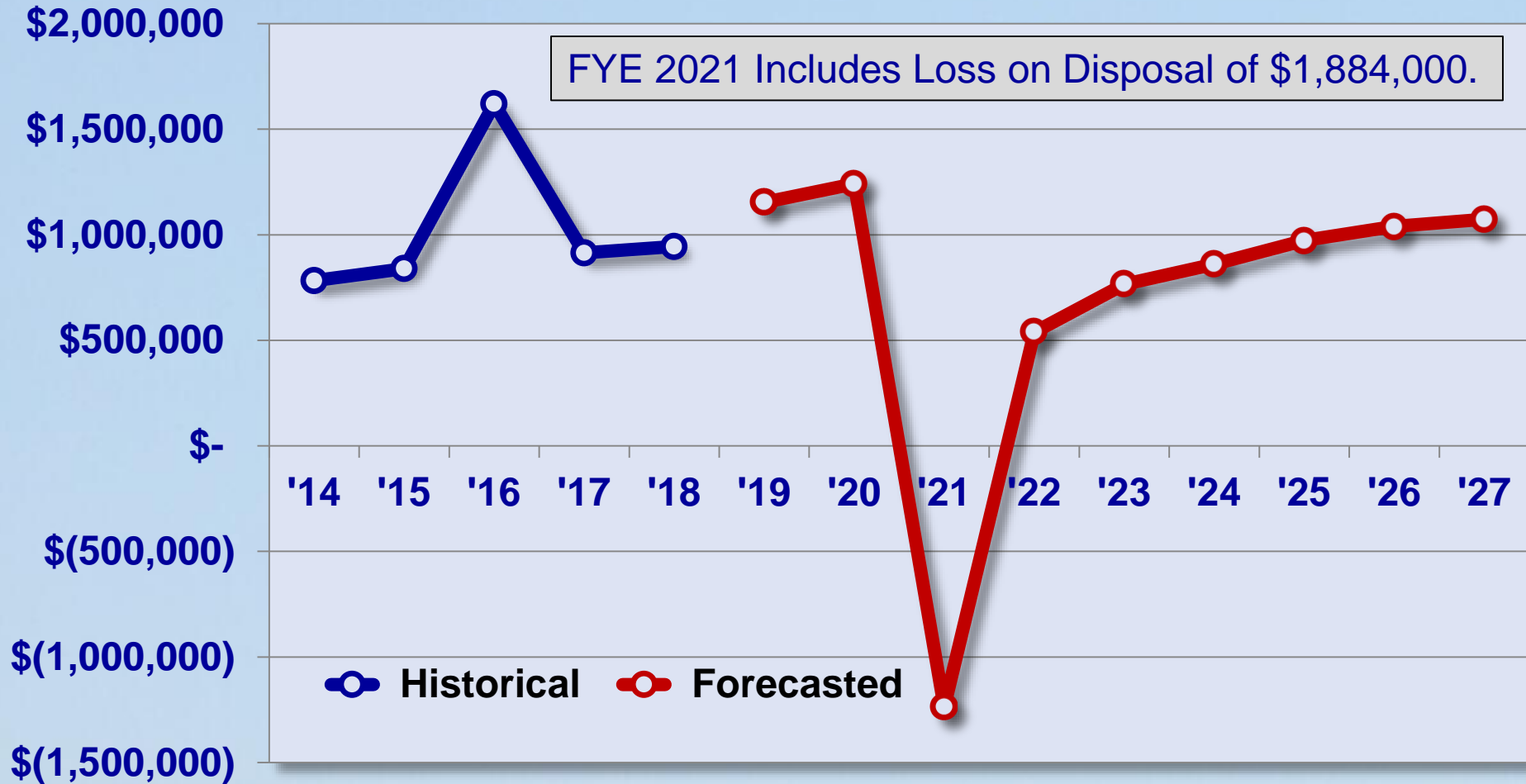




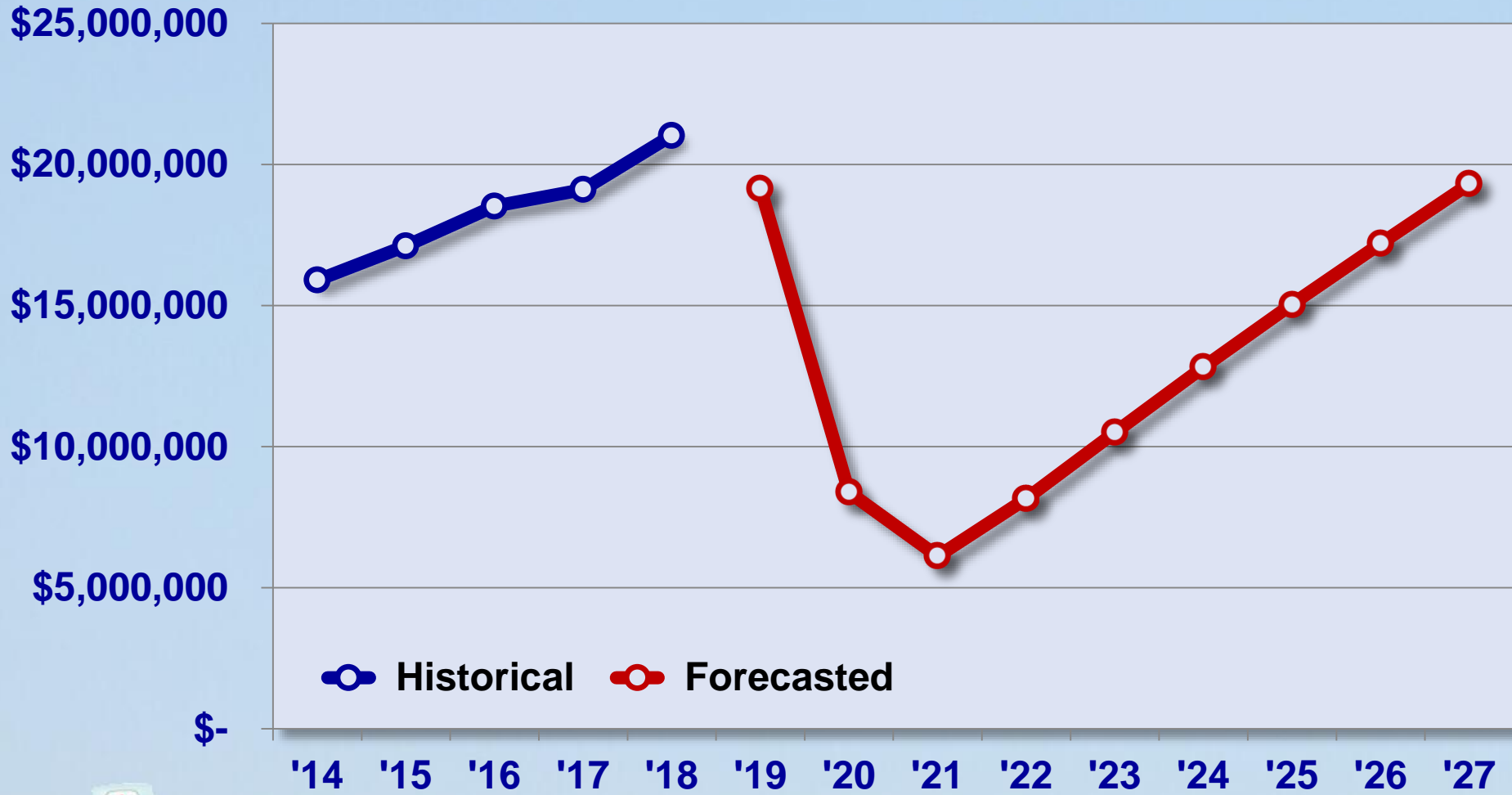
# Operating Income



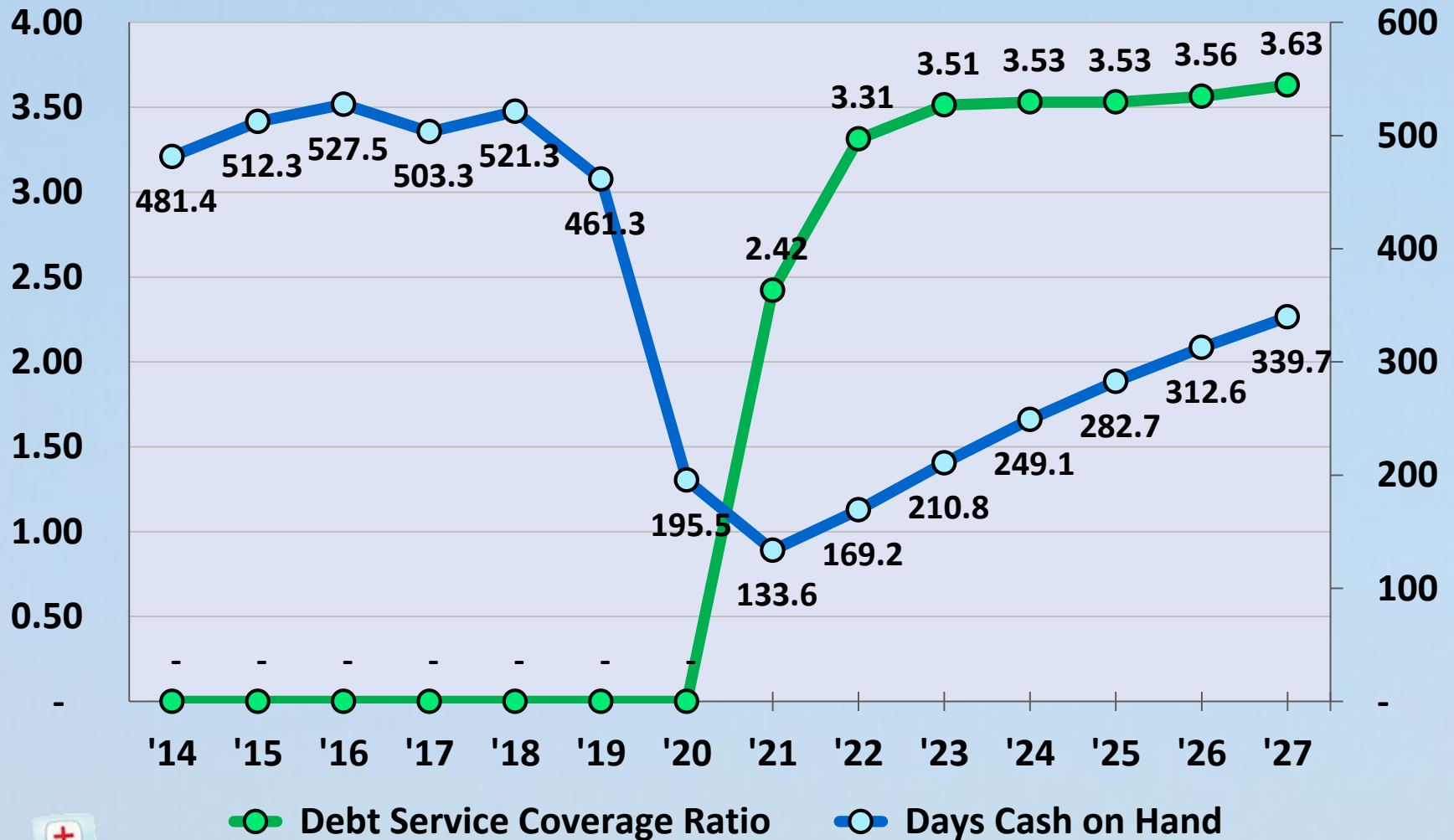
# Total Income



# Unrestricted Cash



## Liquidity Measures



● Debt Service Coverage Ratio

● Days Cash on Hand

# Historical Average Cash Generated

(Five years: 2014 to 2018)

Previous Five Years:

Average Total Income	\$ 1,020,000
Add back average depreciation	<u>1,281,000</u>
	2,301,000
Less average capital expenditures	<u>709,000</u>
Average cash generated per year	\$ <u>1,592,000</u>



# Future Average Cash Generated

(Five years: 2022 to 2026)

Previous average cash generated	\$ 1,592,000
Less:	
Principal payments	(491,000)
Interest payments	<u>(742,000)</u>
	359,000
Add:	
Reimbursement of additional depreciation and interest	<u>1,362,000</u>
Future average cash generated per year	<u><u>\$ 1,721,000</u></u>



# Summary

- Extremely strong balance sheet
- Able to fund in excess of 50% of project with reserves
- Past experience of consistently strong total income
- Not relying on fund raising
- Minimal increase in property taxes
- Continued cost based reimbursement is key element
- Retention of referring physicians is key element
- Contracts with commercial insurers and managed payors need to be positively negotiated



# Questions ???

