#### Action Item 6



To: Board of Commissioners

Jeff Tomlin, MD, Chief Executive Officer

From: Jessika Groce, Chief Human Resources Officer

Tina Mycroft, Chief Financial Officer

Date: June 21, 2022

Re: 2021 Leader At-Risk Compensation (LARC) Program Close-Out

#### Recommendation/Key Points:

Please list 4-5 key points the Commissioners need to know.

- 1. Leadership has received all of the necessary data to close out the 2021 LARC program goals.
- 2. The 2021 external audit has been completed and the final financial results are available.
- 3. The System (EvergreenHealth and EvergreenHealth Monroe) did not meet the system financial trigger to generate a LARC pay-out for 2021.
- 4. <u>Exception Request</u>: If the Board will approve an exception of \$3M COVID CARES funding to cover 2021 COVID expenses, the System will meet the Threshold level.
- 5. The rationale for the exception is to allow the LARC NOI results to recognize the federal funding reported in non-operating revenue that supported 2021 pandemic-related costs that have already negatively impacted operating income. This funding supported a variety of pandemic-related expenses, including entrance screeners that have continued to be required under the emergency declaration beyond what was budgeted for in 2021. This also follows Mercer's recommendation that COVID expenses and revenue are both recognized for purposes of the LARC.

#### Community Benefit Statement:

Please list a brief (1-2 short sentences) statement indicating why this is important to the community and how it will benefit them. This statement will be placed in the minutes on the public website.

N/A

#### Requested Action:

The Administrative Council recommends that the Board of Commissioners adopt the following minute resolution at the June 21, 2022 Board Meeting:

I move to adopt the 2021 Leader At-Risk Compensation close-out as written and presented, including the exception request of \$3M of 2021 CARES funding to cover 2021 COVID expenses.

We will be available at the June 21, 2022 Board Meeting to answer any questions you may have.

| 2021 Organizational Goals | Baseline   |
|---------------------------|--|
| Financial Trigger Tina    | <ul> <li>Combine both Kirkland &amp; Monroe into one financial trigger that activates the plan. Kirkland &amp; Monroe retain financial stewardship organizational goals specific to each District but the plan is triggered together as one team. The logic here is to support collaboration and accountability to our vision as a System, but retain the local accountability through the financial stewardship metrics and goals.</li> <li>Phased financial trigger (Threshold = 80% of Budget; Target = Budget; Stretch = 110% of Budget) including reserve for applicable LARC payout (assumes 70% of eligible %)</li> <li>Budget: (\$14.5M)</li> <li>Through June 2021</li> <li>Threshold: (\$17.4M)</li> <li>Target: (\$14.5M)</li> <li>Actual (\$10.95M) vs Budget (\$7.64M) = Variance to Target (\$3.31M)</li> <li>Stretch: (\$13.0M)</li> <li>Through September 2021</li> <li>Variance to Threshold (\$14.54M) = \$0.96M</li> <li>Actual (\$13.59M) vs Budget (\$12.13M) = Variance to Target (\$1.46M)</li> <li>Variance to Stretch (\$6.88M) = (\$2.71M)</li> <li>FINAL Audited 2021 – DID NOT MEET THRESHOLD TRIGGER         <ul> <li>Actual (\$18.63M) vs Threshold (\$17.39M) = Variance of (\$1.24M) (with threshold LARC accrual)</li> <li>Actual (\$18.63M) vs Budget/Target (\$14.50M) = Variance of (\$5.62M) (with threshold LARC accrual)</li> </ul> </li> <li>Request: \$3.0M 2021 CARES Funding to cover 2021 COVID expenses - MET THRESHOLD TRIGGER @ 80.5 (\$3.90U)</li> <li>Actual (\$18.63M) vs Threshold (\$20.39M) Variance of (\$1.75M) (with threshold LARC accrual)</li> <li>Actual (\$18.63M) vs Threshold (\$20.39M) Variance of (\$1.75M) (with threshold LARC accrual)</li> <li>Actual (\$18.63M) vs Stretch (\$16.00M) = Variance of (\$2.63M) (with threshold LARC accrual)</li> <li>Actual (\$18.63M) vs Stretch (\$16.00M) = Variance of (\$2.63M) (with threshold LARC accrual)</li> </ul> |

Organizational 2021 Leader at Risk Compensation Goals (50%)

| 2021 Organizational Goals  | National Benchmark   | 2020 Actual  | Metrics  | Q4 Update   | Weight %                       | Overall Goal<br>Weight % |
|--|--|--|--|---|--------------------------------|--------------------------|
| Clinical Excellence:  Improve (raw) Harm Score from 2020 actual  Dr. Palazzo   | NA   | 2019 Actual - 102<br>2020 Actual - 97<br>(original<br>projected 100) | Threshold: 100 Target: 95 (5% reduction from 2019 base) Stretch: 90 (10% reduction from 2019 base) | Q1 = 25<br>Q2 = 27<br>Q3 = 29<br>Q4 = 25<br>Total = 106             | 5%<br>10%<br>15%               | 15%                      |
| Culture & People:  • Decrease First Year Employee Turnover (excludes per diem)  Jess                                       | National = 32.9%<br>Pacific = 32.2%<br>(Advisory Board – (201-400<br>beds – 50 <sup>th</sup> %ile) | 28.6%<br>(Rolling 12 mos.<br>through<br>Dec 2020)                    | Threshold: 28.0%<br>Target: 27.5%<br>Stretch: 26.5%  | Q1 = 27.7%<br>Q2 = 23.8%<br>Q3 = 21.2%<br>Q4 = 22.0%<br>Met Stretch | 1.66%<br>3.33%<br>5.00%        | 5.0%                     |
| Culture & People:  • Actions plans completed for departments falling below the organizational engagement score of 80  Jess | Engagement Score: 74 (out of 100)  | Engagement<br>Score: 80 (out of<br>100)                              | Threshold: 85% Target: 90% Stretch: 95%  | Q1 = 100%<br>Q2 = 100%<br>Q3 = 100%<br>Q4 = 100%<br>Met Stretch     | 1.66%<br>3.33%<br><b>5.00%</b> | 5.0%                     |

| 2021 Organizational Goals                                     | National Benchmark | 2020 Actual             | Metrics  | Q4 Update   | Weight %                         | Overall Goa<br>Weight % |
|---|--------------------|-------------------------|--|---|----------------------------------|-------------------------|
| Financial Stewardship (Kirkland): Achieve NOI \$ trigger Tina | N/A                | 2020 Final<br>(\$42.8M) | Threshold: (\$12.8M) (80% of budget) Target: (\$10.7M) (budget) Stretch: (\$9.6M) (110% of budget)  Final Through December 2021 - MET THRESHOLD Actual (\$12.5M) vs Threshold (\$12.8M) = Variance of \$0.3M (with threshold LARC accrual) Actual (\$12.5M) vs Budget/Target (\$10.7M) = Variance of (\$1.8M) (with target LARC accrual) Actual (\$12.5M) vs Stretch (\$9.6M) = Variance of (\$2.9M) (with threshold LARC accrual) | Q1 = Below threshold Q2 = Met threshold Q3 = Met threshold Q4 = Met threshold Q4 vs adj triggers w/\$3.0M 2021 CARES funding received to cover 2021 COVID expenses = Met stretch  Request for Adjustment to 2021 Results for \$3.0M 2021 CARES funding received to Cover 2021 COVID expenses  Adj Threshold: (\$15.8M) (80% of adj budget) Adj Target: (\$13.7M) (100% of adjusted budget) Adj Stretch: (\$12.6M) (110% of adj budget)  Actual (\$12.5M) vs Adj Threshold (\$15.8M) = \$3.3M (with LARC threshold accrual) Actual (\$12.5M) vs Adj Target (\$13.7M) = \$1.2M (with LARC threshold accrual) Actual (\$12.5M) vs Adj Stretch (\$12.6M) = \$0.1M (with LARC threshold accrual) | 3.33%<br>6.66%<br>10.0%<br>10.0% | 10%                     |

| 2021 Organizational Goals  | National Benchmark | 2020 Actual  | Metrics  | Q4 Update  | Weight %   | Overall Goal<br>Weight % |
|--|--------------------|--|--|--|--|--------------------------|
| Growth & Access:  Increase number of: radiation new starts (Cancer); deliveries (OB); surgical cases (Ortho); surgical cases (Neuro); EP procedures via EHA (Cardiac); & bariatric surgeries (GI)  Chris | N/A                | Cancer: 510<br>OB: 4,367<br>Ortho: 2,635<br>Neuro: 93<br>Cardiac: 977<br>GI: 301 | For each service line achieving or exceeding 2021 budget, the award % will be 1/6 <sup>th</sup> of 5%  2021 Budget: Cancer: 528 1/6 <sup>th</sup> of 5%  OB: 4,350 1/6 <sup>th</sup> of 5%  Ortho: 2,833 1/6 <sup>th</sup> of 5%  Neuro: 179 1/6 <sup>th</sup> of 5%  Cardiac: 1043 1/6 <sup>th</sup> of 5%  GI: 458 1/6 <sup>th</sup> of 5% | Service         YE Total           Cancer         486           OB         4,753           Ortho         2,736           Neuro         317           Cardiac         1,076           GI         461    Met 4/6 <sup>th</sup> of 5% | .833%<br>.833%<br>.834%<br>.834%<br>.833%<br>.833%<br>4/6 <sup>th</sup> of 5%<br>= 3.33% | 5.0%                     |
| Growth & Access: Increase the number of unique new patient encounters to EH system as tracked in Cerner – YTD 2021 Chris/CMCO  | N/A                | 58,676   | Threshold: 58,881<br>Target: 58,969<br>Stretch: 59,087   | Q1 = 16,113<br>Q2 = 15,365<br>Q3 = 18,055<br>Q4 = 17,262<br>YE 2021 = 66,795<br>Met Stretch  | 1.66%<br>3.33%<br><b>5.00%</b>   | 5.0%                     |

| 2021 Organizational Goals   | National Benchmark | 2020 Actual | Metrics   | Q4 Update  | Weight %                   | Overall Goal<br>Weight % |
|---|--------------------|-------------|---|--|----------------------------|--------------------------|
| Community Engagement Leaders (165 managers & above) will volunteer for 4 hours of approved community service in communities where we care for patients for a total of 660 organizational hours. This time will be considered work time if volunteering during normal work time. This process will be supported by the Community Engagement Council & Community Engagement Team.  Monique/CMCO | N/A                | N/A         | Threshold: 495 = 75% Target: 561 = 85% Stretch: 627 = 95% | Q1 = N/A<br>Q2 = N/A<br>Q3 = 17% of leaders<br>Q4 = 88% of leaders<br>Met Target | 1.66%<br>3.33%<br>5.00%    | 5.0%                     |
|   |                    |             |   | Total: <mark>24.99</mark>  | <mark>%</mark> @ 0% payout | 50%                      |

31.66% @ 100% payout 31.66% @ 110% payout

# 2021 <u>Hospital</u> Division Leader At-Risk Compensation (LARC) Goals 4th Quarter Update (through December 31, 2021)

| 2021 Division Goals  | National<br>Benchmark | 2020 Actual  | Metrics   | Q4 Update  | Weight %  | Overall Goal<br>Weight % |
|--|-----------------------|--|---|--|---|--------------------------|
| <ul><li>Experience &amp; Loyalty - <u>Inpatient</u>:</li><li>Nurse Communication</li></ul> | N/A                   | YTD November 2020 = 78.7% Top Box or 41 <sup>st</sup> %ile | Threshold: 79.0% = 43 <sup>rd</sup> %ile<br>Target: 80.1% = 51 <sup>st</sup> %ile<br>Stretch: 81.6% = 63 <sup>rd</sup> %ile | Q1 YTD = 81.8% = 71 <sup>st</sup> %ile<br>Q2 YTD = 80.0% = 54 <sup>th</sup> %ile<br>Q3 YTD = 79.8% = 57 <sup>th</sup> %ile<br>Q4 YTD / YE 2021 = 79.2% = 56 <sup>th</sup> %ile | 5.55%<br>11.10%<br>16.66%                         | 16.66%                   |
| Mary   |                       | (YE 2020 with updated benchmarking)                        | %ile rankings as of YE 2020   | %ile rankings as of YE 2021  Met Threshold for Top Box Score   | Avg of<br>Threshold<br>and                        |                          |
|  |                       |  |   | Met Target for %ile Ranking  | Target = 8.33%                                    |                          |
| Experience & Loyalty - <u>Inpatient</u> : • Responsiveness of Staff                        | N/A                   | YTD November 2020 = 66.4% Top Box or 61 <sup>st</sup> %ile | Threshold: 66.5% = 54 <sup>th</sup> %ile<br>Target: 67.9% = 61 <sup>st</sup> %ile<br>Stretch: 71.2% = 74 <sup>th</sup> %ile | Q1 YTD = 68.4% = 73 <sup>rd</sup> %ile<br>Q2 YTD = 67.6% = 65 <sup>th</sup> %ile<br>Q3 YTD = 68.5% = 72 <sup>nd</sup> %ile<br>Q4 YTD / YE 2021 = 67.4% = 74 <sup>th</sup> %ile | 5.55%<br>11.10%<br>16.66%                         | 16.66%                   |
| Mary   |                       | (YE 2020 with updated benchmarking)                        | %ile rankings as of YE 2020   | %ile rankings as of YE 2021  Met Threshold for Top Box Score   | Avg of<br>Threshold<br>and<br>Stretch =<br>11.10% |                          |
| Clinical Excellence  |                       |  | Threshold: 44 (9%)  | Met Stretch for %ile Ranking  Q1 = 13  | 5.56%   | 16.68%                   |
| (CAUTI, HAPI, Fall resulting in serious injury or death, and Periop Hemorrhage Hematoma)   | N/A                   | 48 Total Events 2020                                       | Target: 39 (18% ) Stretch: 35 (27% )  Percentage reduction from metrics used specifically for this indicator.               | Q2 = 10 $Q3 = 10$ $Q4 = 10$ Total 2021 = 43  | 11.12%<br>16.68%                                  | . 5.5575                 |
| Dr. Palazzo  |                       |  | Not comparable to 2020 due to change in individual metrics.   | Met Threshold (10% reduction)  |   |                          |

Total: <mark>24.99%</mark>

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50%

| 2021 Division Goals  | National Benchmark   | 2020 Actual     | Metrics  | Q4 Update We   | 0              |
|--|--|-----------------|--|--|----------------|
| Clinical Excellence: Meet EHMG Quality Goals for Primary Care & Specialty Practice for High Blood Pressure  a. Controlling High Blood Pressure | HEDIS 5 Star Ratings 1 Star < 51% 2 Star 51% to < 62% 3 Star 62% to < 75% 4 Star 75% to < 82% 5 Star 82% | 74.91% = 3 Star | Threshold: 79% (4 Star) Target: 80% (4 Star) Stretch: 82% (5 Star) | Q1 = 74.39%<br>Q2 = 74.41%<br>Q3 = 74.99%<br>Q4 = 75.04%<br>YE 2021 = 75.04%<br>Did not meet | 9%             |
| b. % of Patient Visits Blood Pressure Taken & Recorded  Chris  | N/A  | 88.95%          | Threshold: 90% Target: 91% Stretch: 92%                            | Q1 = 87.01%<br>Q2 = 91.47%<br>Q3 = 89.50%<br>Q4 = 89.50%<br>YE 2021 = 89.50%<br>Did not meet | 8.33%<br>8.33% |

| 2021 Division Goals  | National Benchmark | 2020 Actual           | Metrics  | Q4 Update   | Weigh t %                 | Overall Goal<br>Weight % |
|--|--------------------|-----------------------|--|---|---------------------------|--------------------------|
| Experience & Loyalty - a. Press Ganey Overall for <u>Primary Care</u> Top Box% | 93.0 = 50%ile      | a. Primary Care 79.8% | Threshold: 81.1%<br>Target: 82.0%<br>Stretch: 84.3%    | Q1 YTD = 79.6% = 41 <sup>st</sup> %ile<br>Q2 YTD = 79.4% = 37 <sup>th</sup> %ile<br>Q3 YTD = 79.1% = 31 <sup>st</sup> %ile<br>Q4 YTD = 78.6% = 36 <sup>th</sup> %ile<br>YE 2021 = 79.0% = 40 <sup>th</sup> %ile<br>Did not meet | 2.78%<br>5.56%<br>8.33%   | 8.33%                    |
| b. Press Ganey Overall for <u>Specialty</u> Top Box%  Mary                     | 93.0 = 50%ile      | b. Specialty 78.9%    | Threshold: 80.4% Target: 81.6% Stretch: 83.2%          | Q1 YTD = 79.7% = 41 <sup>st</sup> %ile<br>Q2 YTD = 79.5% = 38 <sup>th</sup> %ile<br>Q3 YTD = 79.2% = 40 <sup>th</sup> %ile<br>Q4 YTD = 77.1% = 29 <sup>th</sup> %ile<br>YE 2021 = 78.7% = 37 <sup>th</sup> %ile<br>Did not meet | 2.78%<br>5.56%<br>8.33%   | 8.33%                    |
| Financial Stewardship Charge lag in days Tina                                  | N/A                | 10 days               | Threshold: 9.0 days Target: 8.6 days Stretch: 8.2 days | Q1 = 8.67<br>Q2 = 8.57<br>Q3 = 9.34<br>Q4 = 8.85<br>YE 2021 = 8.93<br>Met Threshold   | 5.56%<br>11.12%<br>16.68% | 16.68%                   |

Total: 5.56% 50%

### 2021 <u>Home Care</u> Leader At-Risk Compensation (LARC) Goals 4th Quarter Update (through December 31, 2021)

| Threshold: Meet 1 of 3   Target: Meet 2 of 3   Stretch: Meet 3 of 3   HH: 2,988 (11,952)   H1.11%   Ho. 46,637 (186,548)   HH: 1,170 (4,680)   HH Actuals: 11,210   HD Target: 190,298 (3% )   HH: 5,933 (11,866)   HO: 93,219 (186,438)   HMH: 2,310 (4,620)   HMH: 3,433 (4,577)   Ho: 141,111 (188,148)   HH: 11,775   HO: 149,931   HMH: 3,433 (4,577)   HMH: 3,433 (4,577)   HMH: 4,497   HMH: 4,497 | 2021 Division Goals  | National<br>Benchmark | 2020 Actual         | N                                      | letrics   | Q4 Update   | Weight %        | Overall Goal<br>Weight % |
|--|--|-----------------------|---------------------|--|---|---|-----------------|--------------------------|
| Met Threshold  | <ul> <li>Achieve growth in Home Health episodes/admissions</li> <li>Hospice Program Days</li> <li>In-Home Mental Health Tiers</li> </ul> |                       | HO Actuals: 184,755 | Target: Stretch: HH Target: HO Target: | Meet 2 of 3<br>Meet 3 of 3<br>11,434 (2% )<br>190,298 (3% ) | HH: 2,988 (11,952) HO: 46,637 (186,548) IHMH: 1,170 (4,680)  Q2 Threshold (1/3) HH: 5,933 (11,866) HO: 93,219 (186,438) IHMH: 2,310 (4,620)  Q3 Threshold (1/3) HH: 8,755 (11,673) HO: 141,111 (188,148) IHMH: 3,433 (4,577)  Q4 Threshold (1/3) HH: 11,775 HO: 189,931 IHMH: 4,497 | 5.55%<br>11.11% | ŭ .                      |

### 2021 <u>Home Care</u> Leader At-Risk Compensation (LARC) Goals 4th Quarter Update (through December 31, 2021)

| 2021 Division Goals                                   | National<br>Benchmark | 2020 Actual      | N          | Metrics     | Q4 Update       | Weight<br>% | Overall Goal<br>Weight % |
|---|-----------------------|------------------|------------|-------------|-----------------|-------------|--------------------------|
| Clinical Excellence:                                  |                       |                  | Threshold: | Meet 1 of 3 | Q1 Stretch 3/3  | 5.55%       | 16.66%                   |
|   | N/A                   |                  | Target:    | Meet 2 of 3 | HH: 78.6%       | 11.11%      |                          |
|   |                       |                  | Stretch:   | Meet 3 of 3 | HO: 75.6%       | 16.66%      |                          |
|   |                       |                  |            |             | HH: 100%        |             |                          |
| HH-Improve Compliance for Infection Control Screening |                       | HH Actual: 68.3% | HH Target: | 70.3% (3%)  |                 |             |                          |
|   |                       |                  |            |             | Q2: Stretch 3/3 |             |                          |
| Hospice-Improve Compliance for Infection Control      |                       | HO Actual: 66.3% | HO Target: | 68.3% (3%)  | HH: 81.3%       |             |                          |
| Screening   |                       |                  |            |             | HO: 73.0%       |             |                          |
|   |                       |                  |            |             | HH: 100%        |             |                          |
| Oxygen Safety Evaluation Compliance                   |                       | HH Actual: 59.7% | HH Target: | 61.5% (3%)  |                 |             |                          |
|   |                       |                  |            |             | Q3 Stretch 3/3  |             |                          |
| Monique   |                       |                  |            |             | HH: 83.6%       |             |                          |
|   |                       |                  |            |             | HO: 78.6%       |             |                          |
|   |                       |                  |            |             | HH: 100%        |             |                          |
|   |                       |                  |            |             |                 |             |                          |
|   |                       |                  |            |             | Q4 Stretch 3/3  |             |                          |
|   |                       |                  |            |             | HH: 88% [83%]   |             |                          |
|   |                       |                  |            |             | HO: 82% [78%]   |             |                          |
|   |                       |                  |            |             | HH: 96%         |             |                          |
|   |                       |                  |            |             | NA 1 01 1 1     |             |                          |
|   |                       |                  |            |             | Met Stretch     |             |                          |

### 2021 <u>Home Care</u> Leader At-Risk Compensation (LARC) Goals 4th Quarter Update (through December 31, 2021)

| 2021 Division Goals  | National<br>Benchmark | 2020 Actual  | Metrics   | Q4 Update  | Weight<br>%               | Overall Goal<br>Weight % |
|--|-----------------------|--|---|--|---------------------------|--------------------------|
| <ul> <li>Financial Stewardship:</li> <li>Reduce HH supply spend by 2% (after inflation and measured by visit)</li> <li>Reduce HO supply spend by 2% (after inflation and measured by visit)</li> <li>Reduce Home Health LUPAs by .5%</li> <li>Monique</li> </ul> | N/A                   | HH Actual (with inflation): \$4.70/visit  HO Actual (with inflation): \$25.00  HH 2020 Actual: 14.9% | Threshold: Meet 1 of 3 Target: Meet 2 of 3 Stretch: Meet 3 of 3  HH Target: \$4.60/visit  HO Target: \$24.50/visit  HH Target: 14.4% (.5% ) | Q1 Threshold 1/3 HH \$4.96 HO \$25.43 LUPA 11.9%  Q2 Stretch 3/3 HH \$4.53 HO \$24.22 LUPA 11.9%  Q3 Target 2/3 HH \$4.58 HO \$24.86 LUPA 11.9%  Q4 Target 2/3 HH \$4.70 HO \$24.47 LUPA 11.9%  Met Target | 5.56%<br>11.12%<br>16.68% | 16.68%                   |
|  |                       |  |   | T  | 00.000                    | 500/                     |

Total: 33.33% 50%