Clinical Mission
FY 2017
Our mission at UF Health Jacksonville is to **heal**, **comfort**, **educate**, and **discover**.
Clinical Mission

Our mission is realized by dedicated work to improve the lives of those we touch through quality health care, medical education, innovation, and research.
Medical Education

Residency Training
  13 Core programs
Subspecialty Training
  21 Accredited Residencies
  11 Accredited Fellowships
  2 CODA residencies
  14 Non-Accredited Fellowships
Medical Student Education
  MS3-1627*  MS4-530*

* Student Weeks
Medical Education

Midwifery Training
CRNA Training
Radiology Technician Training
Nurse Practitioner Training
Physician Assistant Training
Phar.D.
Sources of Revenue
General Operating Fund

Annual Operating Budget $250,000,000 (net revenue)

Patient Revenue (56%)
Grants and Contracts (12%)
Academic Support (13%)
State Based Funding (2%)
Charity Funding (2%)
UPL (11%)
Other (4%)
All non-clinical programs (teaching, research, outreach, humanitarian efforts) are dependent on clinical revenue for sustainability. If we are successful in generating clinical revenue, we will be successful in fulfilling our overall mission.
How to Accomplish Our Mission in Today’s Economic Environment

Clinical access!

Only approx. 6% of our total net revenue comes from non-clinical sources.
Sources of Clinical Revenue

- Commercial Insurance
- Medicare/Tricare
- Medicaid
- Workman’s Comp. Insurance
- Special Programs (VA, Industry)
- City Contract
- Self-pay
Commercial is best reimbursement (charge to payment ratio or “collection rate”)

Florida Blues
Aetna
Cigna
United
Etc.
Medicare with supplement

Good payer
(charge to payment ratio)

Includes regular Medicare and Medicare Advantage.

BCBS offers Supplemental coverage. Also AARP, Tricare, others.
Medicare (without supplement) and Tricare

Marginal payer
(charge to payment ratio)

Tricare alone is not a good payer but when combined with M’care, as a supplement, it’s much better for both.
Medicaid

Actual Net Revenue (cash in the door) is less than cost of seeing patient.

UPL (Upper Payment Limit) Supplement
Slightly better than Medicare.
Reasonably good payer
(charge to payment ratio)

Very bureaucratic.

Better for specialty than primary.

Occupational Medicine.
Special Programs

Contracts with Industry
Wellness Programs
Children’s Hospital (Pediatrics)
V.A.
Telemedicine
Defined population from Duval County
Not eligible for M’caid
9,000 members (7,000-12,000)
City contract

1. Full Risk Program
2. Hospital Based
3. Funded by City of Jacksonville
4. $26,000,000 annually (fixed)
   (approx. $1,800/participant)
City contract

1. Annual Cost $45,000,000 - $60,000,000
2. UFJP receives $4,500,000 from hospital to provide specialty care
3. TCC (hospital based) provides primary care.
ED is only clinical area required to provide care regardless of ability to pay. Also, only required to stabilize condition. Includes Patient’s share of cost (co-pay, deductible)
Secrets of Success, The 3 "A's"

Availability
(patient access)

Gets the patient in the door.
Secrets of Success,
The 3 "A's"

Ability
(well trained, competent and leaders in the field).

Re-enforces decision to come to UF
Secrets of Success, The 3 "A's"

Affability
(treat people as you would like to be treated)

Brings them back!
Questions?