

# DETERMINING HOW MUCH TO PAY A PROVIDER

Paul D. Vanchiere, MBA
Paul@PediatricSupport.com

www.PediatricSupport.com

1



# Agenda

- Today's webinar is straightforward
  - Find out key variables needed
  - Plug in the numbers
- Couple of key metrics needed...much easier than one would think...
- 99% of the time it's a math problem...

www.PediatricSupport.com

2

## It's Simple Business 101



Revenue – Expenses = Profit

If you understand this, you can figure out how much to pay a provider...just gotta know what to look for & plug in the numbers...

www.PediatricSupport.com

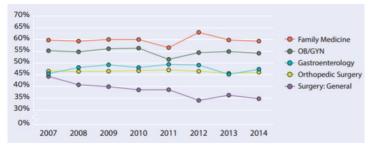


3

## **Overhead is Your Biggest Enemy**

Increase in overhead reduces the profit/pot to pay physicians

Operating Cost as Percentage of Total Revenue



http://www.mgma.com/Libraries/Assets/Industry%20Data/Survey%20Reports/MGMA-2015-Cost-and-Revenue-Report-Based-on-2014-Survey-Data-Executive Summary-Report.pdf?ext=\_pdf



## It's All About The Pot (Of Gold)

Revenue Generated

Overhead

Available \$\$



## **Increase The Pot**

- Higher Volume (FFS)
- Higher Revenue Per Encounter (Well vs. Sick)
- Lower Overhead
  - Staffing
  - IT Costs
  - Administrative Costs
  - Vaccine Expenses
- PMPM Payments

www.PediatricSupport.com

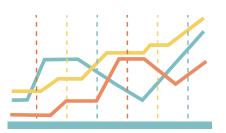


- Lower Patient Volume (FFS)
- Lower Revenue Per Encounter
- Higher Overhead
  - Staffing
  - IT Costs
  - Administrative Costs
  - Vaccine Expenses



## **Information Needed**

Practices with High %age of FFS













#### What Does Revenue Per Encounter Tell Me?

Revenue per encounter is an excellent barometer of your financial health. There are many things that influence the revenue per encounter and consequently allow you to see the impact of things such as:

- ☐ Are your claims being processed timely?
- ☐ Are your claims being paid properly?
- Are you being paid fairly?
- ☐ Is your payor mix excellent, fair or poor?
- ☐ Are you following proper CPT coding guidelines?

www.PediatricSupport.com

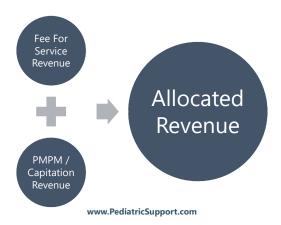




7

## 1. Revenue per Encounter

Total Allocated Revenue / Office Encounters= \$500,0000 = \$125.00 4,000







## **Break It Down**

By Provider:

1.Number Of Office Visits

2.Total Revenue Allocated

Run for an entire 12-month period to pick up seasonal variations.

	Patients Seen	Revenue Allocated	Revenue Per Encounter	
Provider 1	1,751	\$ 216,000	\$ 123.36	
Provider 2	3,600	\$ 422,100	\$ 117.25	
Provider 3	1,875	\$ 228,600	\$ 121.92	
Provider 4	4,500	\$ 530,550	\$ 117.90	

www.PediatricSupport.com



9

## 2. Daily Activity

10

- Provider Days:
   Scheduled days per week X weeks per year
  - 4 days per week X 49 weeks = 196 Days
- Visits Per Day (Previous 12 Months)
   Total Visits/Total Days Worked
   4,000 / 196 = 20.4 Visits Per Day



#### **Overhead Rate**

Figure out how much it cost to provider care to a child **BEFORE** provider compensation.

www.PediatricSupport.com



11

#### **Overhead Rate**



Total Revenue / Total Expenses = \$1,500,0000 = 65.00% \$975,000

- Subject to seasonality (winter versus summer months thanks to vaccine costs & check up season)
- Timing of paying the vaccine bill is problematic
- Look at Overhead Rate over last calendar year (or rolling 12 months)

PEDIATRIC MANAGEMENT INSTITUTE

## **Run the Numbers**

Α	Visits Per Day	20	Estimate
В	Revenue Per Encounter	\$ 145	Analysis
C	Revenue Per Day	\$ 2,900	AXB



## **Run the Numbers**

Α	Visits Per Day	20	Estimate
В	Revenue Per Encounter	\$ 145	Analysis
C	Revenue Per Day	\$ 2,900	AXB
D	Provider Days Worked	200	Estimate
Ε	Provider Annual Revenue	\$ 580,000	CXD



## **Run the Numbers**

Α	Visits Per Day	20	Estimate
В	Revenue Per Encounter	\$ 145	Analysis
C	Revenue Per Day	\$ 2,900	AXB
D	Provider Days Worked	200	Estimate
Ε	Provider Annual Revenue	\$ 580,000	CXD
F	Practice Overhead Rate	65%	Analysis
G	Practice Overhead	\$ 377,000	EXF



## **Run the Numbers**

Α	Visits Per Day	20	Estimate
В	Revenue Per Encounter	\$ 145	Analysis
C	Revenue Per Day	\$ 2,900	A X B
	·		
D	Provider Days Worked	200	Estimate
Ε	Provider Annual Revenue	\$ 580,000	CXD
F	Practice Overhead Rate	65%	Analysis
G	Practice Overhead	\$ 377,000	EXF
Н	Allowance for Provider (The Pot)	\$ 203,000	E - G



#### **Run the Numbers**

Α	Visits Per Day	20	Estimate
В	Revenue Per Encounter	\$ 145	Analysis
C	Revenue Per Day	\$ 2,900	AXB
	,		
D	Provider Days Worked	200	Estimate
Е	Provider Annual Revenue	\$ 580,000	CXD
F	Practice Overhead Rate	65%	Analysis
G	Practice Overhead	\$ 377,000	EXF
Н	Allowance for Provider (The Pot)	\$ 203,000	E - G
	Provider Salary	\$ 150,000	Survey
J	Provider Bonus	\$ 7,500	Analysis
K	Benefits (17%)	\$ 26,775	Estimate
L	Total Provider Cost	\$ 184,275	I + J + K
	Practice Margin/Profit	\$ 18,725	H - L



## Few Thoughts...

- 18
- 1. If include vaccines in Revenue Per Encounter, you must include the vaccine drug costs in the overhead. Conversely, if you calculate the Revenue Per Encounter without vaccines, do not include it in the overhead rate.
- 2. Practices with more than 10% PMPM or Capitation should consider an RVU model to determine proposed bonus structure.
- 3. If fixed costs remain the same (Rent), then utilizing that space for a provider actually drives the overhead rate down.
- 4. The overhead for the first 10 patients seen in the day is much higher than the overhead rate for the last 10 patient seen.
- 5. Stark Laws- Ancillary services CANNOT be included in revenue bonus model for Medicaid patients.
- 6. Vaccine drugs acceptable but margin is very small. Cannot afford to pay 10-20% bonus on such items. www.PediatricSupport.com





## It's Really Simple...



Provider Revenue Generated

- Allocated Expenses

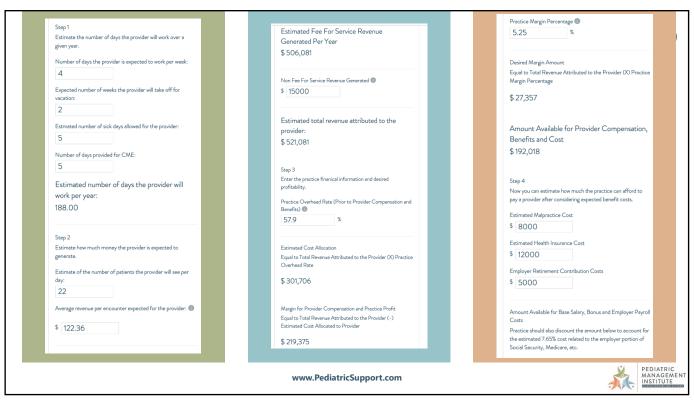
The Pot

The Pot determines how much you can afford to pay them...

www.PediatricSupport.com

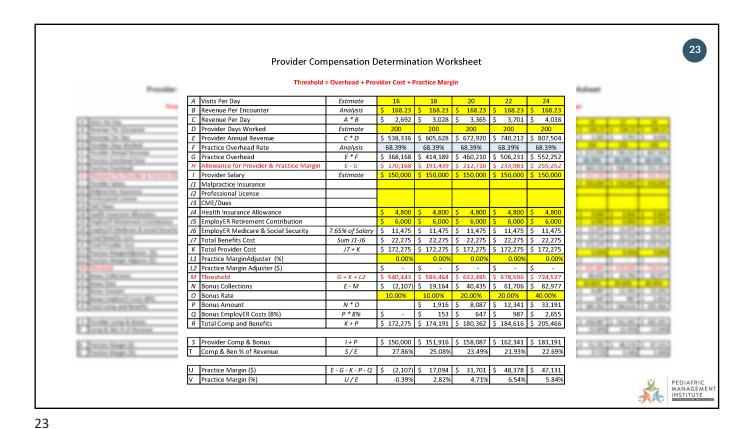


19





22 Provider Compensation Determination Worksheet Estimate A Visits Per Day Analysis A \* B B Revenue Per Encounter C Revenue Per Day Estimate C \* D E Provider Annual Revenue F Practice Overhead Rate Analysis G Practice Overhead \$ 460,181 1 Provider Salary Estimate J1 Malpractice Insurance J2 Professional License J3 CME/Dues J4 Health Insurance Allowance 7.65% of Salary \$ 11.475 J6 EmployER Medicare & Social Security K Total Provider Cost J7 + K L1 Practice MarginAdjuster (%) L2 Practice Margin Adjuster (\$) N Bonus Collections E-M \$ 40,464 O Bonus Rate P Bonus Amount \$ 8,093 ionus EmployER Costs (8%) \$ 180,368 R Total Comp and Benefits K + PS Provider Comp & Bonus \$ 158,093 Comp & Ben % of Revenue 23.49% U Practice Margin (\$) E-G-K-P-Q \$ 31,724 PEDIATRIC MANAGEMEN' INSTITUTE



24 Provider bonus based on three areas: 1. wRVU's Billed- Based on provider reaching at least 4,500 wRVU's. Practice to provide flat-rate amount for each wRVU in excess of identified wRVU threshold as followed: [(Total wRVU worked - Threshold) X Bonus Rate]. 2. Patient and Team Satisfaction Score- Based on frequency of complaints from patients and staff as well as provider punctuality. 3. Closed Chart Score- Based on the number of closed charts within the quarter. Practice may elect to determine average of number of open charts at the end of each month to determine the quarterly average. **Provider Base Annual Pay** Physician Extender 2 Days per Week 80,000 \$ 53,333 2.5 Days per Week 100,000 \$ 66,667 120,000 \$ 80,000 3 Days per week 3.5 Days per week 140,000 \$ 93,333 4 Days per week 160,000 \$ 106,667 Provider Annual Bonus wRVU Threshold wRVU Threshold 2 Days per Week 2,250.00 2.5 Days per Week 2,812.50 3 Days per week 3.5 Days per week 3.937.50 4,500.00 4 Days per week Sample Bonus Calculation Provider Base Salary 140,000 3,937.50 wRVU Threshold Actual wRVU's Worked 4,300.00 Eligible wRVU's for Bonus wRVU Bonus Rate 35.00 wRVU Bonus 12,688 Estimated Provider Compensation PEDIATRIC MANAGEMEN' INSTITUTE www.PediatricSupport.com



#### **Optional Bonus Features**

#### **Patient and Team Satisfaction Score**

Percent of Salary

90	
Arrival @ work 20 minutes prior to first appt > 80% of Time	1%
<3 Staff Complaints per Quarter	2%
<2 Patient or Family Complaints per Quarter	2%

Maximum Performance Score

5% of Base Salary

#### **Closed Chart Score**

Based on number of charts not closed and/or signed at end of quarter.

Percent of Salary

< 10 Open Charts	5%
> 10 Open Charts	3%
> 20 Open Charts	2%
> 25 Open Charts	0%

**Maximum Performance Score** 

5% of Base Salary

www.PediatricSupport.com



26

25

## **Significant PMPM / Capitation**

You Will Need To Get Creative

- Far greater complexity
- · Align practice culture with financial incentives/results of practice
- Consider splitting earnings into several categories

	Owner / Partner	Employed Physician	Extender
Base Salary	Yes	Yes	Yes
Production Incentive	Yes	Yes	Yes
Quality Incentives	Yes	Yes	Yes
Vaccine Drugs	Yes	No	No



