STAR² CENTER TALKS COMPENSATION PLANNING

MAY 8, 2019

IPM EASTERN







ASSOCIATION OF CLINICIANS FOR THE UNDERSERVED

Access to Care & Clinician Support

Recruitment & Retention

National Health Service Corps

Resources

Training

Networking





WHOWEARE

Association of Clinicians for the Underserved



Funded by HRSA's Bureau of Primary Health Care







STAR² CENTER

- www.chcworkforce.org | 844-ACU-HIRE
- Allison Abayasekara | <u>aabayasekara@clinicians.org</u>
 - **703-562-8820**
- Mariah Blake | mblake@clinicians.org
 - **703-562-8819**
- Suzanne Speer | <u>sspeer@clinicians.org</u>
 - **703-577-1260**







WEBINAR HOUSEKEEPING

We are Recording

Ask Questions

Have Fun







FINANCE OF RECRUITMENT & RETENTION

Curt Degenfelder

curt@degenfelderhealth.com

www.degenfelderhealth.com

310-740-0960







THE KEYS TO HEALTH CENTER BOTTOM LINE

- I. Maximizing organizational service capacity
- 2. Regularly filling that capacity
- 3. Getting paid for services delivered







WHAT PHYSICS TEACHES US ABOUT COMMUNITY HEALTH CENTERS

Newton's First Law

A body in motion tends to stay in motion, unless acted upon by an outside force. A body at rest tends to stay at rest

Second Law of Thermodynamics

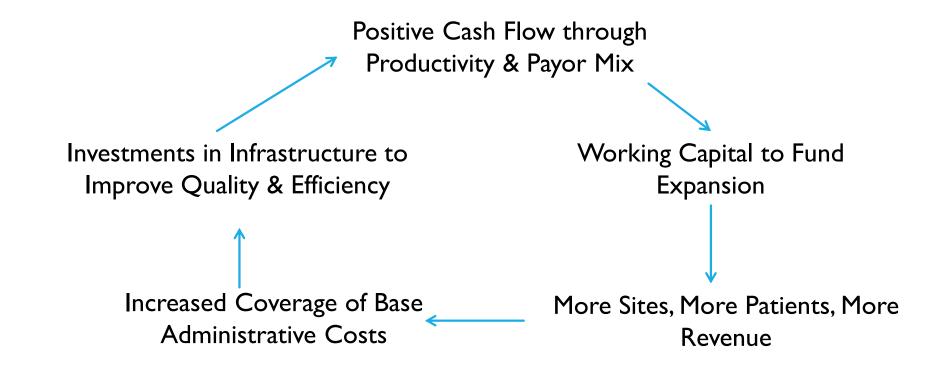
The total entropy (disorder) of an isolated system always increases over time







THE VIRTUOUS CYCLE

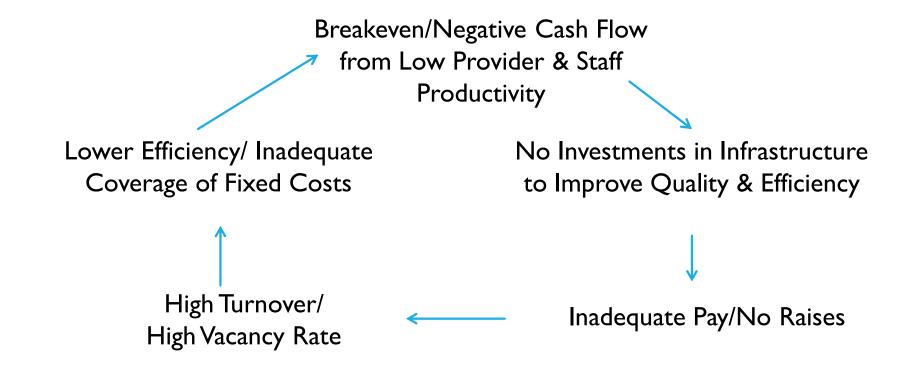








THE VICIOUS CYCLE









SOURCES OF CHC REVENUE

- Patient service revenue: 55 80% (increases with health center size)
- Grant revenue: 15 40%
- Other revenue: 5 15%

Health centers get the majority of their revenue from seeing patients, recording the service, billing & collecting. Grant revenue is generally fixed, used to cover priorities (uninsured, certain services, activities)







CHC REVENUE

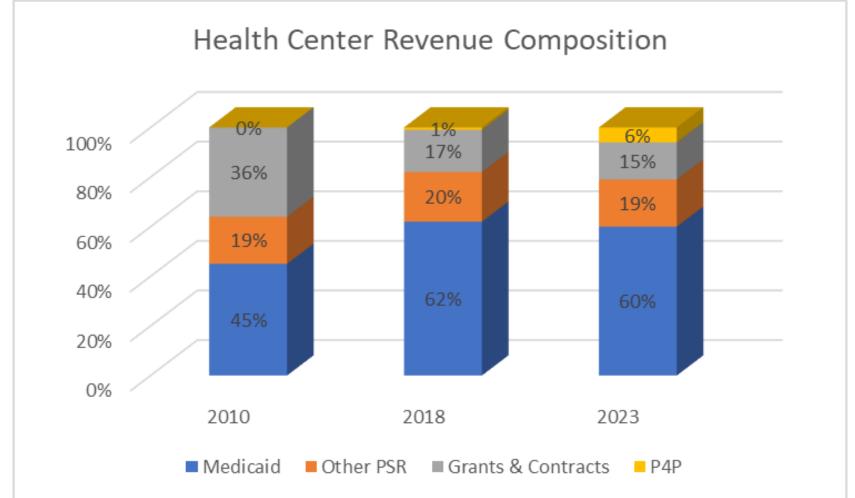
Patient Service Revenue							
Medicaid FFS	\$	913,581					
Medicaid MC	\$	3,268,697					
Medicare	\$	731,571					
Commercial	\$	60,492					
Self-Pay	\$	243,604					
Family Planning	\$	154,239					
Total PSR	\$	5,372,184					
340b	\$	1,001,978					
330 Grant	\$	842,956					
Other Grants	\$	93,169					
Other Revenue	\$	91,991					
Total Revenue	\$	7,402,278					







FQHC REVENUE TODAY & IN THE FUTURE







Note that this graphic excludes consideration of 340b, which varies by health center but may decline in the future

CHC EXPENSES

- Salaries/contracted staff: 55 –68%
 - Clinicians: 22 30%
- Fringe benefits: 10 19%
- Other than personnel: 18 35%

 Health centers are a service business. As such, the majority of expenses are people-related







CHC EXPENSES

<u>_</u>	'	, -,
Non- Provider Salaries & Wages	\$	1,846,300
Payroll Taxes	\$	240,151
Employee Benefits	\$	131,802
Medical consultants	\$	286,025
Otuside Services - Staff	\$	314,588
Total Compensation	\$	4,032,640
Outreach	\$	57,535
Conferences & travel	\$	72,039
Depreciation	\$	193,903
Insurance	\$	79,555
Interest	\$	2,284
Laboratory	\$	67,114
Medical supplies	\$	290,727
Office expenses	\$	169,555
Outside services	\$	338,779
Professional services	\$	237,315
Rent	\$	548,285
Repairs and maintenance	\$	72,290
Taxes, license & fees	\$	18,564
Telephone	\$	39,757
Utilities	\$	94,077
Total Non-Compensation	\$	2,281,779
Total Expense	\$	6,314,419

Provider Salaries & Wages







1,213,774

IMPACT OF PROVIDER TURNOVER ON HEALTH CENTER BOTTOM LINE

When health center loses a provider:

- There is a los of revenue from an open provider slot
- There is a cost to recruiting a new provider
- Access to visits may be limited
- Provider continuity with staff is interrupted
- Patient continuity with their provider is interrupted
- New providers take time to learn CHC EHR and operational setup, lowering productivity
- The health center may lose patients loyal to that provider







IMPACT OF PROVIDER VACANCIES SCENARIO I

		PF	PS Provider
	Current	\	/acancies
Provider FTEs	10		8
Visits/FTE	3,900		3,900
Total Visits	39,000		31,200
Patients	13,000		10,400
Visits PPPY	3.0		3.0
Provider Panel Size	1,300		1,300
Net Revenue/Visit	\$ 120.00	\$	120.00
Patient Service Revenue	\$ 4,680,000	\$	3,744,000
P4P Revenue			
Grant & Other Revenue	\$ 1,300,000	\$	1,300,000
Total Revenue	\$ 5,980,000	\$	5,044,000
Provider Compensation	\$ 1,750,000	\$	1,400,000
Variable Staff Compensation	\$ 1,200,000	\$	960,000
Fixed Staff Compensation	\$ 1,600,000	\$	1,600,000
Total Compensation	\$ 4,550,000	\$	3,960,000
Variable OTPS	\$ 600,000		480,000
Fixed OTPS	\$ 780,000	\$	780,000
Total OTPS	\$ 1,380,000	\$	1,260,000
Total Expense	\$ 5,930,000	\$	5,220,000
Net Income	\$ 50,000	\$	(176,000)







MARGIN ANALYSIS OF PRODUCTIVITY INCREASE

Revenue

Net revenue per visit \$120 x 100 = \$12,000

Expense

- Provider and staff salary \$0
- Provider incentive compensation \$40 x 100 = \$4,000
- Medical supplies \$6 x 100 = \$600
- Office supplies $$3 \times 100 = 300

Margin - Change in Profit/(Loss)

■ \$12,000 - 4,900 = \$7,100







CAPACITY – COST OF REPLACING A PROVIDER - CDCI

		NACHC		СНС	
Recruitment Cost	\$	10,000	\$	25,000	
Average length of vacancy	3.5	5 months	3.5	months	
Annual Productivity		3,600		3,500	
Lost visits in 3.5 months		1,050		1,021	
Net Revenue per visit	\$	120.00	\$	134.60	
Lost Revenue = 1,050 X \$120	\$	126,000	\$	137,404	
Provider Salary saved at \$180,000 + 22% benefits	\$	64,050	\$	69,686	(\$195,840 + 25% fringe)
Marginal Cost (revenue lost)	\$	61,950	\$	67,718	
Months to full ramp up		6		6	
Lost visits in 6 months (incl credentialling)		864		864	
Lost Revenue (\$120 X 180 visits)	\$	103,680	\$	116,294	
Total Cost for one provider turnover	\$	175,630	\$	209,012	







CAPACITY – COST OF REPLACING A PROVIDER - ACU

Physician Data Input Table							
		National					
Description	Input Value	Estimate	Select Estimate				
Salary Information			Click to Use All Estimates				
Business Office (Patient Accounts/Billing) Salary and Benefits per hour		\$ 33.66	Business Office				
CEO/Administrator Salary and Benefits per hour		\$ 54.53	○ CEO/Admin				
Chief Medical Officer Salary and Benefits per hour		\$ 125.30	○ смо				
Human Resources Salary and Benefits per hour		\$ 33.66	○ HR				
IT Hourly Rate plus benefits		\$ 21.40	Оп				
Leaving Provider Annual Salary plus benefits		\$ 160,000	C Leaving Provider				
Nurse/MA Hourly Rate plus benefits		\$ 31.45	○ Nurse/MA				
Other Providers Average Hourly Rate plus benefits		\$ 92.30	Other Providers				
Support Staff Salary and Benefits per hour		\$ 23.23	Support Staff				
Outside Recruiting Expenses							
Recruiting Service		\$ 26,000	Recruiting Service				
Advertising Costs (2 national journal print ads, 1 national online service x 3 mths)		\$ 4,200	○ Advertising				
Leaving Provider Practice Information							
Average patient visits per day by leaving provider		14	O Patient Visits				
Average revenue/collections per visit with leaving provider		\$ 116	Revenue per Visit				
Malpractice Tail Coverage (if any)		\$ 12,000	○ Malpractice				

https://chcworkforce.org/star%C2%B2-center-financial-assessment-tool







TOTAL PROVIDER CAPACITY

- When should we/do we hire a new provider? Given how long it takes to recruit, should we build an inventory of excess provider FTEs?
- May result in only incremental costs, and help cover fixed costs
- Track other items that decrease provider capacity:
 - Provider absences (and what are the number of the visits done at a site when one provider isn't there)
 - Vacation/CME/sick time/FMLA
 - Moving providers around sites
 - Vacancies







PROVIDER CONSISTENCY

- Same provider, same exam rooms, same support staff
- Also same patients (patients not new to the health center, but new to the provider, take 5 –
 8 minutes longer)
- Need to rethink use of part-time and locum providers
- Needed for continuity of care as driver of clinical quality and patient management

Provider compensation, and its relation to provider turnover, has a large impact on this consistency







COST OF NEW PATIENT VS. ESTABLISHED VISIT

		99203	99213
Health Center Cost Per RVU		\$ 60.00	\$ 60.00
RVU for CPT Code		3.14	2.11
Cost per Procedure		\$ 188.40	\$ 126.60
Addl Registration/Enrollment Eff	ort	\$ 60.00	
(3 hrs @ \$20/hr comp cost)			
Total Cost Per Service		\$ 248.40	\$ 126.60







A DISCUSSION OF THE FUTURE

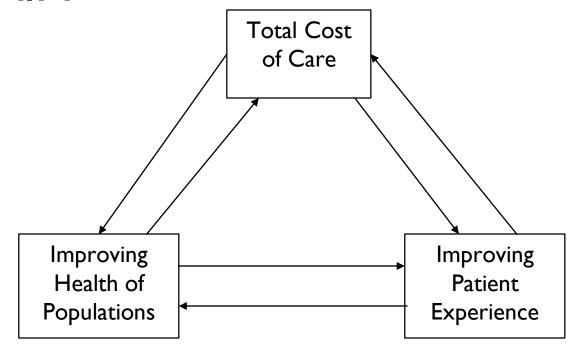
PROFITABILITY IN COMMUNITY HEALTH CENTERS







THE TRIPLE AIM









PRACTICE TRANSFORMATION/APM







THOUGHTS ON PROVIDER RECRUITMENT AND

RETENTION IN 2019



1973

1972 Chevy Impala



1974



1982 Ford Escort







In 2019, what is expensive and in short supply in the future?



PCMH COST/BENEFIT ANALYSIS

- Physician: \$180,000 230,000
- Nurse practitioner: \$140,000 180,000
- RN: \$65,000 \$75,000
- Medical assistant 1: \$12/hr
- Medical assistant 2: \$14/hr
- Medical assistant 3: \$20/hr
- Care coordinator: \$20/hr
- Front desk: \$13/hr
- Scribe: \$12 15/hr

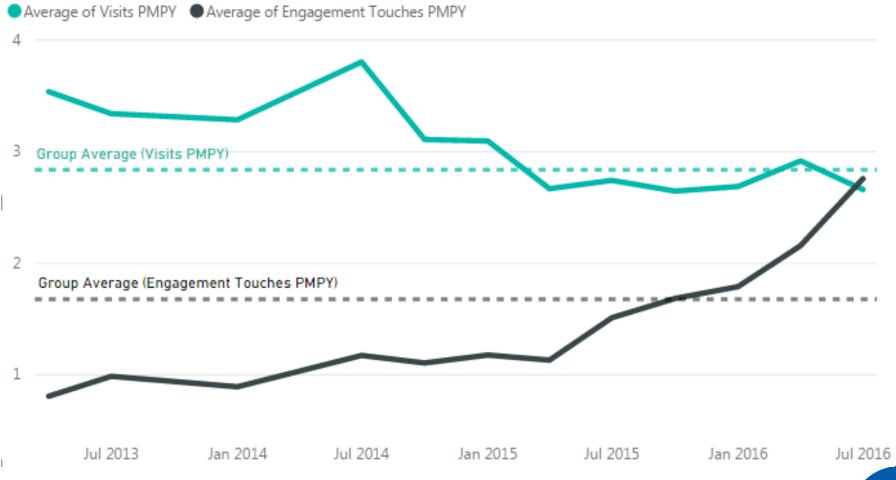






APM-ACTUAL - VISITS TO TOUCHES

Average Visits PMPY and Average Engagement Touches PMPY





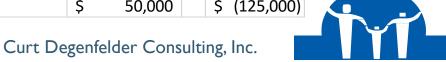


FUTURE FINANCIAL SCENARIOS SCENARIO 2 - PCMH

	Current	PPS PCMH
Provider FTEs	10	10
Visits/FTE	3,900	3,900
Total Visits	39,000	39,000
Patients	13,000	13,448
Visits PPPY	3.0	2.9
Provider Panel Size	1,300	1,345
Net Revenue/Visit	\$ 120.00	\$ 120.00
Patient Service Revenue	\$ 4,680,000	\$ 4,680,000
P4P Revenue		\$ 25,000
Grant & Other Revenue	\$ 1,300,000	\$ 1,300,000
Total Revenue	\$ 5,980,000	\$6,005,000
Provider Compensation	\$ 1,750,000	\$ 1,750,000
Variable Staff Compensation	\$ 1,200,000	\$ 1,400,000
Fixed Staff Compensation	\$ 1,600,000	\$ 1,600,000
Total Compensation	\$ 4,550,000	\$ 4,750,000
Variable OTPS	\$ 600,000	\$ 600,000
Fixed OTPS	\$ 780,000	\$ 780,000
Total OTPS	\$ 1,380,000	\$1,380,000
Total Expense	\$ 5,930,000	\$6,130,000
Net Income	\$ 50,000	\$ (125,000)







FUTURE FINANCIAL SCENARIOS SCENARIO 3 – APM PCMH

	Current	PPS PCMH	APM PCMH
Provider FTEs	10	10	10
Visits/FTE	3,900	3,900	3,900
Total Visits	39,000	39,000	39,000
Patients	13,000	13,448	13,929
Visits PPPY	3.0	2.9	2.8
Provider Panel Size	1,300	1,345	1,393
Net Revenue/Visit PMPM	\$ 120.00	\$ 120.00	\$ 30.00
Patient Service Revenue	\$ 4,680,000	\$ 4,680,000	\$ 5,014,286
P4P Revenue		\$ 25,000	\$ 50,000
Grant & Other Revenue	\$ 1,300,000	\$1,300,000	\$ 1,300,000
Total Revenue	\$ 5,980,000	\$ 6,005,000	\$ 6,364,286
Provider Compensation	\$ 1,750,000	\$ 1,750,000	\$ 1,750,000
Variable Staff Compensation	\$ 1,200,000	\$ 1,400,000	\$ 1,500,000
Fixed Staff Compensation	\$ 1,600,000	\$ 1,600,000	\$ 1,600,000
Total Compensation	\$ 4,550,000	\$ 4,750,000	\$ 4,850,000
Variable OTPS	\$ 600,000	\$ 600,000	\$ 600,000
Fixed OTPS	\$ 780,000	\$ 780,000	\$ 780,000
Total OTPS	\$ 1,380,000	\$ 1,380,000	\$ 1,380,000
Total Expense	\$ 5,930,000	\$6,130,000	\$ 6,230,000
Net Income	\$ 50,000	\$ (125,000)	\$ 134,286







FUTURE FINANCIAL SCENARIOS SCENARIO 4 – APM PCMH VACANCIES

		PPS Provider		APM PCMH
	Current	Vacancies	APM PCMH	Vacancies
Provider FTEs	10	8	10	8
Visits/FTE	3,900	3,900	3,900	3,900
Total Visits	39,000	31,200	39,000	31,200
Patients	13,000	10,400	13,929	11,556
Visits PPPY	3.0	3.0	2.8	2.7
Provider Panel Size	1,300	1,300	1,393	1,444
Net Revenue/Visit PMPM	\$ 120.00	\$ 120.00	\$ 30.00	\$ 30.00
Patient Service Revenue	\$ 4,680,000	\$ 3,744,000	\$ 5,014,286	\$4,160,000
P4P Revenue			\$ 50,000	\$ 25,000
Grant & Other Revenue	\$ 1,300,000	\$ 1,300,000	\$ 1,300,000	\$1,300,000
Total Revenue	\$ 5,980,000	\$ 5,044,000	\$ 6,364,286	\$5,485,000
Provider Compensation	\$ 1,750,000	\$ 1,400,000	\$ 1,750,000	\$1,400,000
Variable Staff Compensation	\$ 1,200,000	\$ 960,000	\$ 1,500,000	\$1,260,000
Fixed Staff Compensation	\$ 1,600,000	\$ 1,600,000	\$ 1,600,000	\$1,600,000
Total Compensation	\$ 4,550,000	\$ 3,960,000	\$ 4,850,000	\$4,260,000
Variable OTPS	\$ 600,000	480,000	\$ 600,000	\$ 480,000
Fixed OTPS	\$ 780,000	\$ 780,000	\$ 780,000	\$ 780,000
Total OTPS	\$ 1,380,000	\$ 1,260,000	\$ 1,380,000	\$1,260,000
Total Expense	\$ 5,930,000	\$ 5,220,000	\$ 6,230,000	\$5,520,000
Net Income	\$ 50,000	\$ (176,000)	\$ 134,286	\$ (35,000)









Curt Degenfelder Consulting, Inc.

CURT@DEGENFELDERHEALTH.COM

(310) 740-0960

WWW.DEGENFELDERHEALTH.COM







THANKYOU!





