



PHYSICIAN PRACTICE PRICING ANALYSIS

The pricing of Physician services is an ongoing challenge for many health care organizations because of the complicated reimbursement methodologies from various payers. To ensure maximum reimbursement opportunity, facilities need to develop a rational, well-defined, and competitive pricing strategy. Self-Administered Drugs (SAD) should have lower markups to comply with Medicare billing standards

The purpose of the **ParaRev Physician Fee Schedule - Market Based Pricing Analysis** is to maximize practice net revenue by ensuring the individual charges are priced at market rates and the charges cover all contracted fee schedules.

ParaRev will assemble a worksheet containing the following:

1. Practice charge master
2. Managed care contract fee schedules (maximum eight contracts)
3. Medicare and Medicaid fee schedules
4. Market pricing – based on Medicare Carrier locality
5. Revenue and usage stats

Once the worksheet is assembled, ParaRev will perform an analysis and provide recommendations of the multiplier of Medicare that should be used to set rates.

The screenshot displays the ParaRev software interface for contract management. The top navigation bar includes tabs for Select, Charge Quote, Charge Process, Claim/RA, Contracts, Pricing Data, Pricing, Rx / Supplies, Filters, CDM, Calculator, Advisor, Admin, RAC, CAT, and PARA. The main window is titled 'Contract Management and Analysis Process' and features a 'Show Pro Forma Contracts' checkbox. Below this, there are fields for '*Contract Mnemonic:' (MCAR), '*Insurance Company Name:' (MEDICARE), and 'Bind to this Parent contract:' (MEDICARE - Parent). A 'Save Contract' button is visible. The interface also includes various input fields for contract terms, renewal status, billing time limit, payment late penalty, pre-authorization, contract term, required notice period, renewal status warning, rebillable status, interest rate of late payment, pro fees billable, co-pay rates for different patient types, annual revenue inflation cap, and percentage of Medicare. At the bottom, a table shows 'Total Charges: \$143,925,044.52 : Date Range: 07/01/2012 - 06/30/2013' and a summary table with columns for Hospital Patient Type (PTP), PARA Patient Type Map, Total Charge(s) Per PTP, Total Terms Per PARA Patient Ty..., and Total Accounts Per PTP.

Hospital Patient Type (PTP)	PARA Patient Type Map	Total Charge(s) Per PTP	Total Terms Per PARA Patient Ty...	Total Accounts Per PTP
SDC - SURGICAL DAY CARE	Ambulatory Surgical	\$0.00	0	0
1DAYSURG - 1DAYSURG	Ambulatory Surgical	\$0.00	0	0
ER - EMERGENCY ROOM	Emergency	\$0.00	0	0
INP - INPATIENT	Inpatient	\$0.00	1	0
IP - IP	Inpatient	\$0.00	1	0
IP NICU - IP NICU	Inpatient	\$0.00	1	0
IP PSYCH - IP PSYCH	Inpatient	\$0.00	1	0
TCU - TCU	Inpatient	\$0.00	1	0
CAN REF - CANCEL REFERRAL	Non-Patient	\$0.00	0	0

Contact your ParaRev Account Representative to learn more about ParaRev's Physician Practice Pricing program!

Peter Ripper pripper@pararevenue.com (800) 999-3332 x 210
Sandra LaPlace slaplace@pararevenue.com (800) 999-3332 x 225
Violet Archuleta-Chiu varchuleta@pararevenue.com (800) 999-3332 x 219

ParaRev
(800) 999.3332 | www.pararevenue.com