# Provider Model
# Student Guide

**UR** Budget

Provider Model

UR Budget
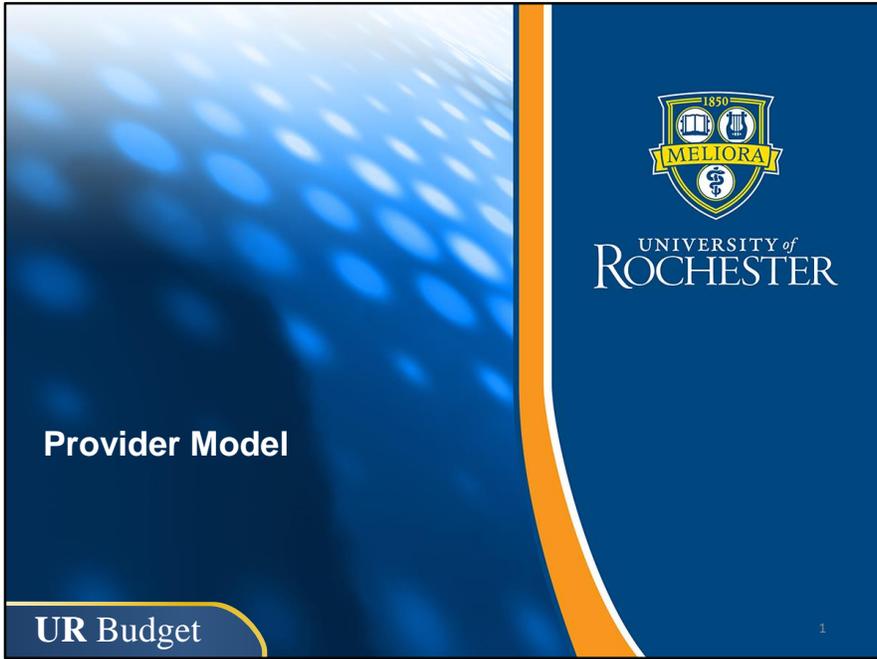
**What We're Covering Today**

- ✓ Welcome and Introduction
- ✓ Provider Model Process
- ✓ Views
  - ✓ 0: Providers
  - ✓ 1: Effort Distribution
  - ✓ 2: wRVU
  - ✓ 3: Compensation
  - ✓ 4: Revenue
  - ✓ 5: Cases
  - ✓ 6: Provider Summary & Incentive Comp Spread
  - ✓ 7: Totals
- ✓ Add a New Provider
- ✓ Reports
- ✓ Provider Model Data in FAO Plan Files
- ✓ Collaboration with FAO Plan File Owners
- ✓ Wrap Up

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- Today we'll explore all these key aspects of Provider Model.
- By the way, wRVU stands for work Relative Value Units.
- We'll refer to them as wRVUs or just RVUs.

**Training Methodology**

Information

Tools

Skills

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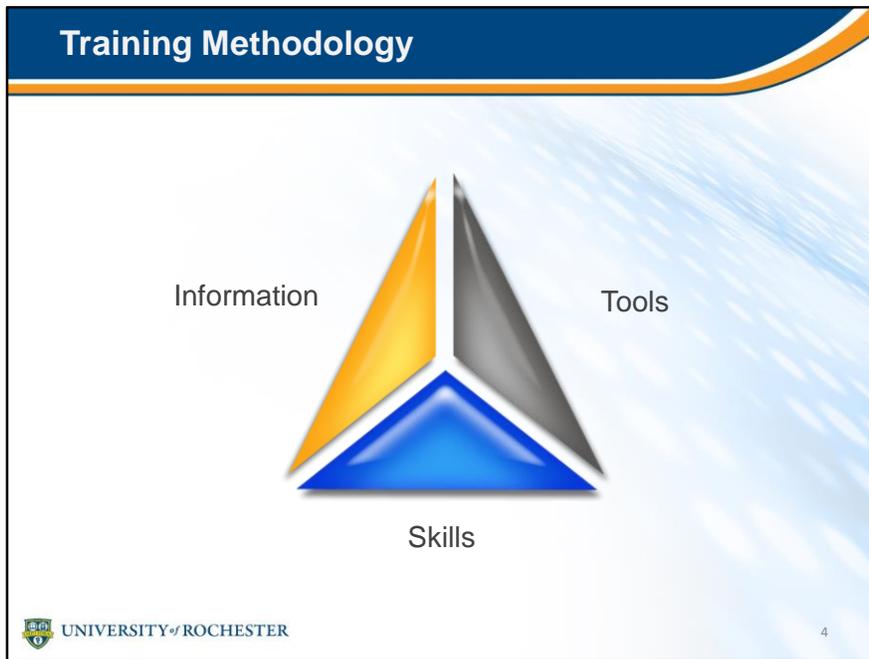
- Coming from the old system, you know all the concepts, you know the steps, and you're the experts in your jobs.
- You've seen the communications, been to the Demo Days, read the announcements and some of you have even been involved in testing.
- You HAVE the INFORMATION.
- UR is not changing the fundamentals of your job or job functions, just changing the TOOLS you're using to get the job done.
- Now in training we're going to bring it all together so you can rest assured you leave with the SKILLS you need to make the Provider Model work for you.

**Content-Mirrored Instruction**

- So how will we be sure everyone gains the skills they need?
- Through a training method called Content-Mirrored Instruction.
- For this training:
- The trainer has the exact same files and software as you.
    - It's active learning, using realistic exercises - the physical action of clicking along helps tie down the learning.
    - It might feel awkward at first, but things are always difficult at the beginning. The repetition helps you set up patterns. This leads to skill development!
    - This is what content-mirrored instruction is all about – this is why it works!
    - **When I show you a blue screen, that means we'll be going into the UR Budget System to work through exercises together.**
    - **Your student guide only has presentation slides, not the exercises, so you can concentrate on the live UR Budget training environment.**
- My promise to you is that I won't leave anybody behind:
    - Raise your hand if I'm going too fast, if you don't see where I've clicked, or you have a question that is directly about something that I'm discussing.
    - Make eye-contact with or wave to a facilitator if you have technical issues.
    - If you have a question about potential functionality or a business process, we've set up time in the training to discuss your questions.
- **When you're here, you're here – please stay in the classroom so you don't miss any content; Breaks are scheduled. We'll keep you up-to-date on when the next one is coming!**
    - That will help you get the best value out of today's class.
    - Will you agree to stay with me, tap for tap, throughout the class today?
        - If you will, I promise your skill development will proceed at an enormous rate!

- You're not alone.
- You have plenty of support to guide you when back at your desk.
- Your divisional finance office is available to answer any questions.
- You're free to re-watch any chapter of the eLearning.
- Many of you have already taken UR Budget Summary & Labor training and can review the Summary & Labor training Student Guide and training recording.
- We'll make a recording of this live training so you can go back to any section for a refresher.
- Quick reference cards and videos are available on the UR Budget website: www.rochester.edu/adminfinance/urbudget.
  - We'll be adding new ones all the time.

**Provider Model Process**

**UR** Budget
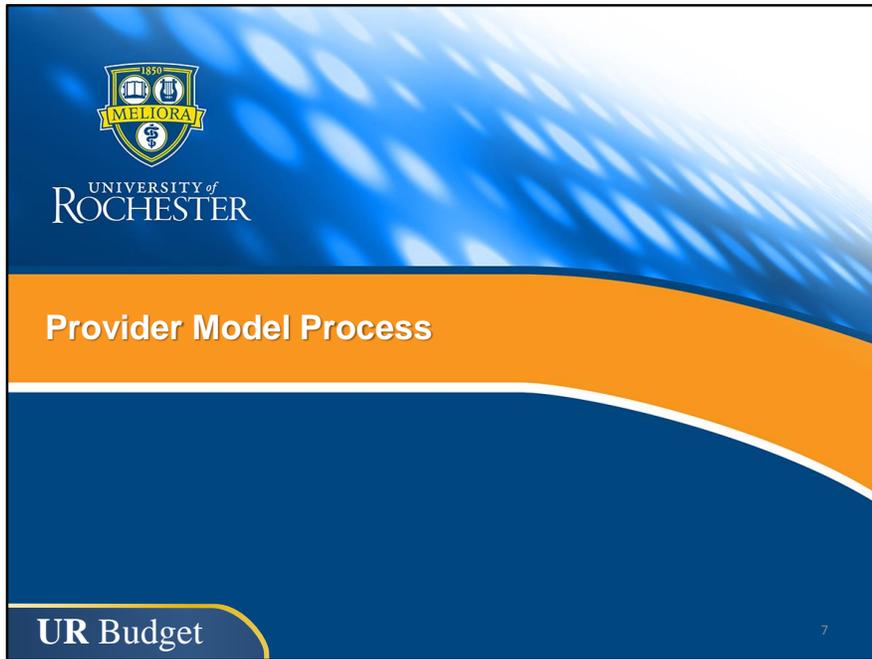
- Let's take a look at what the Provider Model is, and where it fits into the financial systems.
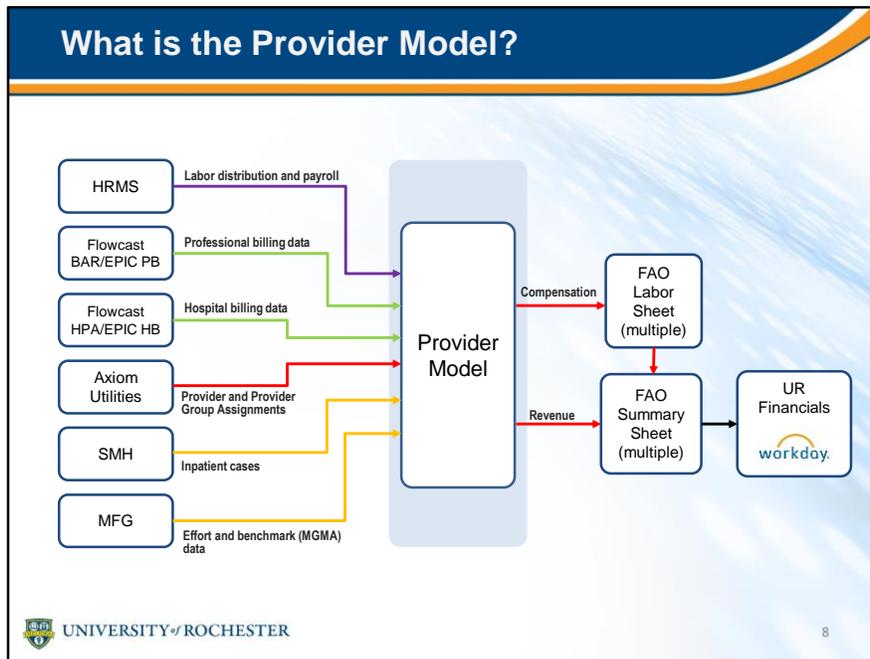
- Here is a graphic representation of how the Provider Model fits into the big picture.
- Data flows in from different sources - on the left.
- And from the Provider Model, compensation is output to FAO Labor sheets and revenue is output to FAO Summary Sheets, and finally, to UR Financials.

**What is the Provider Model?**

- Includes all Providers and Faculty across the medical center
- Full transparency around time spent on each mission
  - Clinical
  - Administration
  - Research
  - Academics
  - Other

- Assigned Administrator or Finance Manager enters data that crosses all divisions
  - Based on HRMS Home division/department
  - Regardless of company
  - Ensures communication between Administrators

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- The Provider model includes all Providers and faculty across the medical center and integrates all companies.
- And there is full transparency around time spent on each mission, split between clinical, administration, research, academics and other.
- Administrators will enter data that crosses all divisions based on the HRMS Home division.

**What has changed**

- Budget at the Provider level
  - Not FAO level
- Budget required statistics are within the model
- Professional Revenue automatically calculated
  - Once wRVUs are entered
- New benchmarking capabilities
  - Salary and productivity
- System views guide order of recommended workflow

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- How is the Provider Model different than current state?
- There are a number of enhancements.

## Provider Groups

- Based on HRMS Home Division/Department
- Provider groups are aligned with the medical specialty
  - e.g. Pulmonary, Cardiology

Includes Clinical Faculty, Researchers, Advance Practice Providers (APP) and Physician Scientists

| Provider | Effort | Compensation | wRVU | Revenue | Cases | Total |
|----------|--------|--------------|------|---------|-------|-------|
| Clinical Faculty | Y | Y | Y | Y | Y | Y |
| Researchers | Y | Y | N | N | N | Y |
| APPs | N | Y | Y | Y | N | Y |
| Physician Scientists | Y | Y | Y | Y | Y | Y |

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- Provider Model includes several roles, broken down into Provider Groups.
- This table shows which Views pertain to roles.
- You'll see that researchers are part of the Provider Model even though they have 0 billing activity.
- Notice in the table that there will be no values in wRVU, Revenue and Cases Views for Researchers.
- There will be no values in Effort or Cases for APPs.

**Exercise:**
**Provider Model Process and Tour**

**Scenario:**

You've gotten your Provider Budget File for the first time. Browse each View to get accustomed to it.

**Objectives:**

☐ Log into UR Budget
☐ Access Provider Model
☐ Show each View

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- Now, we'll go into UR Budget together and walk through exercise 1.
- Exercises are not in your student guide, so you can concentrate on the live UR Budget training environment.

GO TO UR BUDGET

Follow along with trainer

01: Provider Model Process and Tour

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**Debrief: Provider Model Process and Tour**

- One-stop shop:
  - Provider Model revenue and compensation data feeds into FAO Summary and Labor Plan files
- Saves time and streamlines processes
- Views contain key functionalities
- Interface similar to Excel

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View 1: Effort Distribution

UR Budget

**Effort Distribution**

- Effort split by mission for each Provider
  - Clinical
  - Administration
  - Research
  - Academics
  - Contract/Other
- Current year projections carry over to next fiscal year as a starting point and can be modified
- Effort Distribution influences wRVUs and pay distribution

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- View 1 is where you'll allocate the effort for each Provider.
- Go to the training area of the UR Budget website for a Quick Reference Card that defines each of the missions: https://www.rochester.edu/adminfinance/urbudget.

- View 1 is where you'll allocate the effort for each Provider.

**Exercise: View 1: Effort Distribution**

**Scenario:**

In the past, Marge Mccormack was heavily involved in clinical work. In the coming year, she will be reducing her clinical workload to take on more research. You'll need to adjust her effort distribution.

On the other hand, Tyrone Thomas's administrative appointment ends in the current fiscal year, so you'll need to adjust his effort distribution to include only clinical work.

**Objectives:**

- ☐ Navigate in View
- ☐ Enter effort projections
- ☐ Enter effort for next fiscal year budget
- ☐ Enter comments to describe rationale

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02: View 1: Effort Distribution

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**Debrief: View 1: Effort Distribution**

- Effort must add up to 100%
- Yellow cells can be edited
  - White cells can't be edited
- Values carry over from Projection to next fiscal year Budget and can be modified if required
- **Best Practice:** enter rationale for changes in Comments section

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## What are wRVUs?

- Work Relative Value Unit (wRVU):
  - Only for Providers with clinical effort
    - Providers without wRVUs hidden from View
  - Determined by complexity of office visit or other procedure
  - Higher number indicates greater complexity
- wRVU View organized by Provider and FAO
- wRVUs can spread across several FAOs

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- Next we'll get into wRVUs.

**Target vs. Incentive wRVU**

- Target wRVU is a baseline
- Incentive wRVU is volume above target
- Total wRVUs are calculated per FAO and overall

| | |
|---|---|
| Tyrone Thomas | TR00000165 |
| Tyrone Thomas | TR000001 - Oncology |
| Tyrone Thomas | Target wRVU |
| Tyrone Thomas | Incentive wRVU |
| Tyrone Thomas | Total wRVU |
| Tyrone Thomas | TR000002 - Oncology |
| Tyrone Thomas | Target wRVU |
| Tyrone Thomas | Incentive wRVU |
| Tyrone Thomas | Total wRVU |
| | >> Add New FAO (DBL CLK) |
| Tyrone Thomas | **Totals** |
| Tyrone Thomas | **Total Target wRVU** |
| Tyrone Thomas | **Total Incentive wRVU** |
| Tyrone Thomas | **Total wRVU** |
| Tyrone Thomas | **Total wRVU Benchmark % (Acad.)** |

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## Managing wRVUs

- Default MGMA productivity benchmarks by specialty are loaded for each Provider
  - Information will tell you where Provider falls within the benchmark
  - Percentiles range from 9% to 90%
- Incentive wRVUs should reflect productivity above the target
- Can change wRVU monthly spread

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**Debrief: View 2: wRVUs**

- wRVU input includes target and incentive wRVUs
- Benchmarks show your productivity placement
- **Best Practice:** enter comments for all changes

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UR Budget - Provider Model

Compensation View allows you to…

- Allocate pay distribution per FAO

| | Comp Alloc % |
|---|---|
| Tyrone Thomas | |
| Salary Planning | 100.00% |
| TR000001 - Oncology | 72.00% |
| TR000002 - Oncology | 23.00% |
| TR000003 - Oncology | 5.00% |

- Enter incentive compensation budget

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- You can see the views are in a logical order – they are set up to support the recommended workflow.
- The next View is compensation.

**Exercise: View 3: Compensation**

**Scenario:**

Marge will be doing research now, so you'll add a Grant FAO for research compensation and reduce pay distribution proportionally in her clinical FAO.

Since Tyrone will be increasing clinical effort from 82% to 100%, you'll adjust his pay distribution accordingly.

**Objectives:**

☐ View columns
☐ Change % between FAOs
☐ Add an FAO
☐ Enter Incentive Compensation
☐ View how to change FAC and JobCode
☐ View condensed grant FAO

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04: View 3: Compensation

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## Debrief: View 3: Compensation

- Adjust FAO pay distribution percentages
- Incentive wRVU value prompts you to budget for incentive payout
  - Also include any incentive related to academic/other goals
- Enter global compensation increase, or set for each Provider
  - Compensation increases impact all FAOs
  - Orange cells indicate change from master formula
- View Academic Comp Benchmark to compare the Provider's compensation with the MGMA specialty benchmark

View 4: Revenue

**Revenue Formula**

- Revenue is calculated based on Net Revenue / wRVU
  - Revenue data loaded by Finance
- New Providers won't have wRVU history
  - Need to enter wRVUs, Encounters, Charge / wRVU, and Net Revenue / wRVU
- Enter Net Revenue / wRVU and Gross Charge / wRVU as negative numbers

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- Revenue is next.
- Remember that revenue is expressed as a negative number.
- So, Net Revenue / wRVU and its companion, Gross Charge / wRVU should be negative.

## When to Change Net Revenue / wRVU

- Change Net Revenue / wRVU if:
  - Payer mix or service mix are changing
  - Codes are no longer being reimbursed
- **Note:** Changing Net Revenue / wRVU breaks the calculated formula
- Any change to net revenue / wRVU should be discussed with your Finance liaison

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**Exercise: View 4: Revenue**

**Scenario:**

After entering data in the first three views for your Providers, you're ready to note the impact of these changes on revenue. Review changes for accuracy and reasonableness.

**Objectives:**

☐ Check revenue for accuracy

☐ Check revenue for reasonableness

☐ Check Net Revenue / wRVU

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05: View 4: Revenue

## Debrief: View 4: Revenue

- Check pre-populated cells for accuracy and consistency
- wRVUs should align with Encounters data
- New Providers won't have history
  - Populate all cells in this View

View 5: Cases

UR Budget

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## Cases

- Familiar process
  - Similar to current Cases spreadsheets
  - More convenient: now in UR Budget

| Provider Revenue, Stats, and Comp Budget<br>**View: 5 Cases**<br>**Provider / FAO / Metric** | **FY17**<br>**Actuals** | **FY18 YTD**<br>**Actuals** | **FY18**<br>**Curr. Budget** | **FY18**<br>**Projection** |
|---|---|---|---|---|
| Tyrone Thomas | | | | |
| Total Stat - Cases | 1,447 | 625 | 1,500 | 2,500 |
| Inpatient Cases | 1,447 | 625 | 1,500 | 2,500 |
| SMH | 1,447 | 625 | 1,500 | 2,500 |
| HH | 0 | 0 | 0 | 0 |

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- Cases should be very familiar to you.

## Cases



- Only affects Hospitals
- Populated with current budget
- Add projected cases for FY18 and incremental cases for FY19

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06: View 5: Cases

## Debrief: View 5: Cases

- Projections are informed by actuals when clinical effort remains consistent
- Apply information you know about case distribution and its impact on clinical workload
  - Enter negatives to represent reductions

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View 6: Provider Summary & Incentive Comp Spread and View 7: Totals

UR Budget

**Check Your Work in Summary and Totals**

- View 6: Provider Summary and Incentive Comp Spread
  - View for spreading incentive compensation
  - Organized by Provider and FAO
- View 7: Totals
  - Overview of key data
  - Organized by Provider
    - FAO values totaled

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- There are two more views that are helpful to review your data and catch any red flags if data doesn't align.

**Watch for Red Flags in View: 7 Totals**

- UR Budget flags Providers when compensation and productivity percentiles don't align
  - If gap is 15% or more

| Provider Revenue, Stats, and Comp Budget | | | |
|---|---|---|---|
| **View: 7 Totals** | | **FY19** | |
| **Provider / FAO / Metric** | | **Budget** | **Flag** |
| Tyrone Thomas | TR00000165 | FACULTY | |
| Tyrone Thomas | **Total Net Revenue** | $3,635 | |
| Tyrone Thomas | **Total Target wRVU** | 3,564 | |
| Tyrone Thomas | **Total Incentive wRVU** | 0 | |
| Tyrone Thomas | **Total wRVU** | 3,564 | |
| Tyrone Thomas | **Total wRVU Benchmark % (Acad.)** | 9 Percentile | |
| Tyrone Thomas | **Total Encounters** | 3,564 | |
| Tyrone Thomas | **Total Cases** | 2,500 | |
| Tyrone Thomas | **Effort - Clinical** | 80% | |
| Tyrone Thomas | **Total Target Comp** | $285,000 | |
| Tyrone Thomas | **Total Comp Incentives** | $0 | |
| Tyrone Thomas | **Total Comp** | $285,000 | |
| Tyrone Thomas | **Total Comp Benchmark % (Acad.)** | 38 Percentile | ⊠ |
| Tyrone Thomas | **Total Benefits** | $48,935 | |

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## Exercise: Views 6 and 7

**Scenario:**

You've entered all the data for Marge and Tyrone. Now it's time to check your work for each and note any red flags.

**Objectives:**

- ☐ Review rows by FAO (View 6)
- ☐ Check incentive compensation spread (View 6)
- ☐ Review rows for each Provider (View 7)
- ☐ Note red flags (View 7)

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07: Views 6 and 7

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**New Provider**

- How do you add a new Provider?
  - Create in View 0: Providers
  - Build Provider data in View sequence covered today
- What information do you need to add a new Provider?
  - Vacant or new position
  - Home CO
  - Benchmark Stat
  - FAC
  - JobCode
- When should you add a new Provider?
  - During budget planning period
- Where do you assign FAOs?
  - View 2: wRVU

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- Now that we've explored the views, it's time to add a new Provider.

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08: View 0 Providers: Add a New Provider

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**Debrief: Add a New Provider**

- View 0: Providers makes it easy to enter new Providers
- New Provider has no history
  - Need to enter additional data using the Views
- Add new FAO in View 2: wRVU

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**Case Study Procedure**

- Build data step-by-step in views
  - Use new Provider just created
  - Raise your hand if you need help
- Use data on next slide
- Stop at the end to debrief

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- Now that we've created a new Provider together it's your turn to fill in some data on your own in the system.
- You'll enter and view the data for the new Provider using the views we just saw for Marge and Tyrone.
- The next slide will guide you on what to enter.
- But don't worry! If you get stuck or have questions, just raise your hand.
- At the end of the exercise, we'll debrief as a group.

- Here is the data you'll need to enter for the new Provider.
- For example, in the first View, you'll allocate her effort as 70% clinical and 30% administrative.
- We'll take about 10 minutes for the exercise.
- Let's get started!

## Debrief: Case Study

- What did you find when entering data for the new Provider?
- What were you able to input?
  - Yellow cells
- Not able to input?
  - White cells

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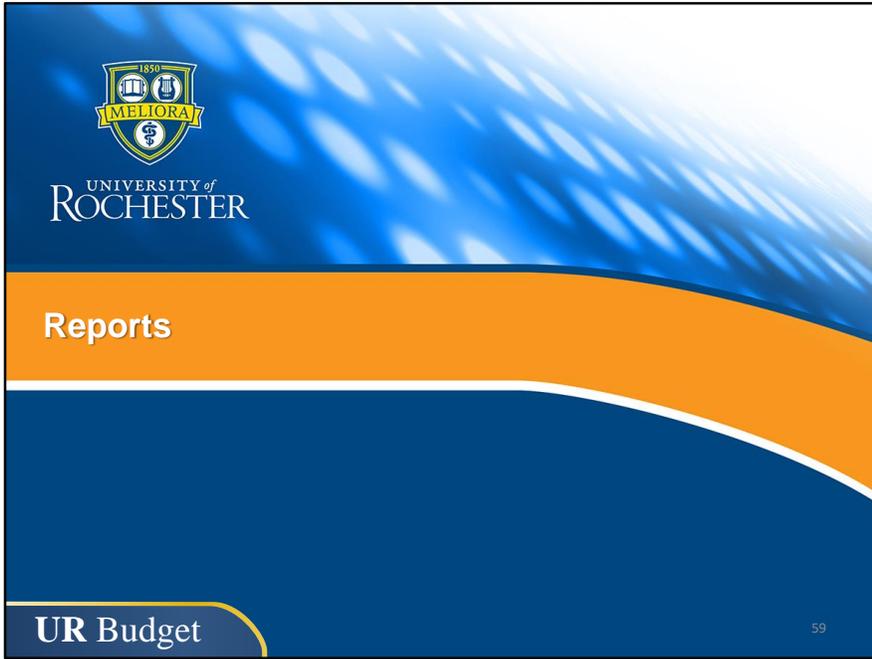
**Data at your fingertips**

- Use Reports in addition to Views
- Snapshot of other key information
  - Effort
  - Compensation
  - Revenue
- Easily communicate information
  - Follow confidentiality rules
  - Share Reports
  - Print Reports

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- Reports provide another way to view your data.
- The reports presented today will show you how you can tie out your data from the Provider file to the FAO Labor and Summary files.
- Prior to go-live there are additional enhancements planned for these reports that will provide even more detail.
- Additionally there is another report that lists the Providers in the Provider file, but for today's training we will focus on one report.

GO TO UR BUDGET

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09: Reports

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## Debrief: Reports

- Reports provide other key data
- Save snapshots and send to colleagues
  - Follow confidentiality rules
- Easy to print

Provider Model Data in FAO
Plan Files

UR Budget

**Data Migration**

- Provider Model data is pushed through to Summary and Labor sheets
  - Part of UR Budget Data Flow
- Must have communication between Provider Model Administrator and FAO owner
- **Reminder:** Enter extra compensation and benefits in Summary sheet

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- How do the Provider Model data and Summary and Labor work together?

**Demo: Provider Model Data in FAO Plan Files**

**Scenario:**

☐ You've completed your Provider file and saved it, so compensation and revenue data is pushed to several FAOs. Use reports to compare values and ensure the data migrated.

**Objectives:**

☐ Save Provider file
☐ Link to FAO plan file
☐ Refresh FAO
☐ View changes in Summary sheet
☐ View changes in Labor sheet

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10: Provider Model Data in FAO Plan Files

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## Debrief: Provider Model Data in FAO Plan Files

- Save Provider file to push data to FAOs
- Refresh FAO plan file to bring in Provider file data
- Verify data was pushed to each FAO
- Investigate with FAO plan file owner any unusual changes to FAO

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**Data Migration**

- FAO owner and Provider Group owner could be same person or different people
  - If same owner, do Provider Model planning first
  - If different owners, refer to Provider Group Owner list on UR Budget home page and website
  - Resolve differences and move on

- Keep on schedule for completing Provider Model and push to FAO plan files

  - FAO owner works on staff and supplies budget until Provider file data is pulled through

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- Collaboration with the FAO plan file owners is very important.

**Provider Model Key Takeaways**

- Provider Model brings data from multiple sources to one place
  – Budget at the Provider level
  – Automatic revenue calculations
- Views follow recommended workflow
- Easy to compare benchmark, wRVU and compensation percentages

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Next Steps

- Go Live: End of December
  - Open sessions for additional assistance
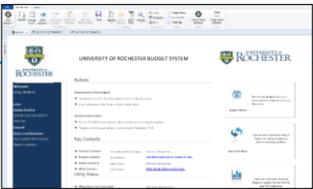
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- We'll make a recording of this live training so you can go back to any section for a refresher.
- The UR Budget home page guides are always available.
- Keep an eye out for future hands-on sessions.
- You could also export a plan file to Excel and play with it offline.
- Ongoing training is also at your fingertips, including this Course Guide, and quick reference cards and videos.