#### **Expense and Revenue Considerations**

Facility or anesthesia department budgeting can be time-consuming and complex. CRNAs should be aware of facility/department operations, billing and reimbursement methodology, revenue streams, expenses, and staffing needs. Knowing this information will aid CRNAs in identifying where they can provide value-added services and show the value of CRNA practice and expertise.

➤ Based on the presentation, titled "Anesthesia Practice Models," developed by Juan Quintana, DNP, MHS, CRNA, the calculator in the Productivity Tab was developed to aid CRNAs with general calculations in determining their value in varied practice model scenarios.

➤ This tool should only be used for informational purposes, as it presents a one-sided analysis of anesthesia revenue generation but does not incorporate the fixed and variable costs of doing business at a facility.

➤ Any further calculations should take into account site-specific differences (e.g., the requirements for an ambulatory surgical center are different than that in a facility requiring 24-hour coverage). This tool does not account for non-billable or non-productive time (e.g., downtime, 24-hour shift, on-call, in house time).

The list below presents examples of expenses that a facility accounts for in a financial analysis. These expenses vary based on facility size, case load, total staff, etc. and are not reflected in the calculator in the Productivity Tab.

#### **Expense Considerations**

#### **Personnel Related Expenses**

Staff Salaries (e.g., clinicians, administrative staff)

Vacation and Sick Pay

**Healthcare Benefits** 

Medical Insurance

**Dental Insurance** 

Vision Insurance

Disability Insurance

Other

Retirement Benefits

Malpractice Insurance

**FICA Tax** 

Worker's Compensation

Stipends

Bonus / Incentive Pay

**Relocation Costs** 

**Dues / Continuing Education** 

#### **Billing Fees**

Billing and Collection Fees

#### **Facility Related Expenses**

Office Space

Office Supplies

Uniforms

Medical/Surgical Supplies

**Pharmaceuticals** 

Repair and Maintenance

Answering Service

Utilities

Telephone

Electricity

Water

Waste Management

**Property Taxes** 

Depreciation

Other Overhead Factors

#### **Other Fees**

# **Expense and Revenue Considerations**

Accounting Fees
Marketing Fees
Practice Incorporation Fees
Transcription Fees
Credit Card Fees
Licenses
Legal Fees

<u> </u>	T TOO GAT GOO
	A Primer on Hospital Accounting and Finance for Trustees and other Healthcare Professionals
	Identifying, Controlling, and Reducing Overhead Costs
	National Rural Health Resource Center: Critical Access Hospital Finance 101 Manual

## **Anesthesia Revenue Considerations**

Before using this tool, read the information and instructions on the Considerations Tab.

Edit the values in the **outlined fields** to reflect the specific employment scenario being analyzed. Do not edit the shaded cells. The calculations make assumptions based on values entered.

### **Personal Production Days Calculation**

Working Days per Year:		
52 weeks x 2 weekend days =	104	weekend days
365 days - 104 weekend days =	261	days
261 - 6 holidays =	255	working days
Time Off / Vacation =	6	weeks
Personal Production Days =	225	

#### **Procedure Time Calculation**

Avg procedure length =	90
Avg turnover time =	20
Avg time / procedure =	110
Avg time / procedure =	1.8
Routine operating hours / day =	8
Avg cases (procedures) / day =	4.4

## **Conversion Factor (CF) Resources and Calculation**

Medicare: CMS Anesthesiologists Center

2016 National Medicare Average = \$22.44

Commercial Payer Information: ASA Survey Results for Commercial Fees Paid for Anesthesia Services – 2015

AANA: Medicare Anesthesia Conversion Factor List (member login required)

Average conversion factor will vary based on payer mix:

## **Anesthesia Revenue Considerations**



## **Productivity Calculation**

Avg Days Worked =	255	Enter days with or without time off
Avg Cases / Day =	4.4	
Avg Conversion Factor =	\$35.48	Enter value calculated above or assumed value
Avg Units / Case =	10	National Average = 10-13 units / case
Revenue / Case (Avg CF * Avg Units / Case) =	\$354.80	
Daily Revenue (Revenue / Case * Avg Cases / Day) =	\$1,561.12	
Yearly Revenue (Daily Revenue * Avg Days Worked) =	\$398,085.60	

## **Revenue / Potential Reimbursement Calculation**

Anesthetizing Locations =	12	
Revenue / Case =	\$354.80	(from calculation above)
Daily Revenue =	\$1,561.12	(from calculation above)
Daily Revenue * Locations =	\$18,733.44	
Yearly Revenue for all Locations:		
Daily Revenue * Locations * Avg Days Worked =	\$4,777,027.20	
_		
Cost of Billing =	6%	
Potential Reimbursement =	\$4,490,405.57	*contingent on collecting all revenue

#### **Practice Model Calculation**

Number of CRNAs	13
Avg CRNA Salary	\$180,000.00

## **Anesthesia Revenue Considerations**

Number of Anesthesiologists
Avg Anesthesiologist Salary \$350,000.00

Potential Reimbursement = \$4,490,405.57

FTE Cost at All Anesthetizing Locations = \$3,390,000.00

Net Gain / Loss = \$1,100,405.57

(from calculation above)

#### Notes:

- -Anesthesiologist Only Model: Enter "0" CRNAs
- -CRNA Only Model: Enter "0" Anesthesiologists
- -Medical Supervision Model: Can be billed when medical direction requirements not met; Anesthesiologist cannot obtain 100% of allowable reimbursement. Adjust "Avg Units / Case" to reflect this scenario.
- -Medical Direction Model: Calculation does not take into consideration potential time lost, cost of labor, and OR costs due to delay of case start.