



## Do You Need to Turn Up the Dial on the Performance of Your Employed Physicians?

The levels of subsidy required by employed physicians has grown beyond the tolerable. This can potentially stop the growth and development of a valuable strategic resource in its tracks until total subsidies can be reduced, possibly by millions of dollars.

**To reduce those subsidies, you need to turn up the dial on the performance of your employed physicians.**

Veralon will work with you to improve short-term budgetary performance, with initiatives focused on the sustainable growth of the physician enterprise.

### Key high return initiatives typically include:

- Physician compensation re-design
- Operations improvement / Practice redesign
- Practice promotion
- Organizational design and governance
- Revenue optimization

AVERAGE  
SUBSIDY PER  
EMPLOYED  
PHYSICIAN



### WHY VERALON?

**The physician enterprise touches every aspect of your strategy and operations. Veralon has the knowledge to deal with the enterprise and each of those touch points.**

**Extensive experience with compensation design.** We have designed more than 100 physician compensation plans, incorporating volume- and value-based incentives, and accommodating teaching, administration, and research activities.

**Experienced in practice assessment.** Veralon has conducted hundreds of physician practice assessments and practice valuations.

**Skilled in financial analysis.** Veralon can assess the impact of a range of potential options, individually and collectively, on the enterprise and the health system as a whole.

**Deep knowledge of hospital-physician relationships.** Our senior team brings expertise from over 25 years each working with all forms of arrangements between physicians and hospitals or health systems. Some have national reputations in this field.



We perform a comprehensive assessment of current enterprise performance, then identify and prioritize improvements that shrink subsidies and position the physician enterprise for the future.

### **Performance Overview**

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- Assess overall financial position
- Clarify strategic objectives
- Evaluate geography of existing sites

### **Site and Provider-Specific Performance**

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For each practice location, evaluate:

- Utilization and financial performance
- Management and leadership
- Innovative practice models
- Ancillary capabilities
- Practice management systems
- Quality measurement and reporting
- Physician recruitment needs
- Facility layout/configuration

### **Physician Compensation Design**

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- Assure compensation is commensurate with performance
- Integrate quality incentives
- Align incentives with value-based and other payer initiatives
- Test impact on physicians
- Respond to evolving priorities

### **Operations Improvement / Practice Redesign**

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- Develop high level recommendations on facility consolidation and distribution
- Determine need for modifications in management and support staff
- Specify requirements for information technology and data tools, including those for sharing performance data
- Recommend approaches to scheduling optimization
- Other recommendations

### **Practice Promotion**

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- Improve patient access (internet or call center)
- Develop recommendations for traditional print and social media promotion
- Identify opportunities for physician-to-physician marketing

### **Organizational Design and Governance**

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- Evaluate organization and management structure
- Assess alternatives
- Engage employed physicians for meaningful change

### **Revenue Optimization**

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- Assess revenue cycle indicators
- Evaluate charge capture and front desk EMR utilization
- Identify opportunities for:
  - improving charge capture
  - Facilitating resolution of payer/patient conflicts
  - Payer mix management
  - Optimizing fee schedules
- Determine whether to fold physician professional services into system-wide payer contracts