

COST AND REVENUE DATA SET

MGMA DataDive Cost and Revenue focuses on one thing: your comprehensive financial success. This data set allows you to perform thorough cost reduction analysis, recognize practice traits that enhance cost efficiency and evaluate overall profitability. It is the quickest way to assess the financial health of your organization.

The MGMA DataDive Cost and Revenue platform will enable you to:

- **Drive more revenue through productivity.**

Staff appropriately by evaluating ratios between productivity levels and the number of support staff and providers. In addition, analyze your full-time-equivalent (FTE) staffing levels via key performance indicators to drive more revenue through productivity.

- **Keep operating expenses contained and within budget.**

Keep your operating expenses and costs contained by performing a thorough cost-reduction analysis that takes into account your productivity levels, staffing and expenses, and compares them against your revenue.

- **Demonstrate the effectiveness of your management processes to your physicians or board of directors.**

Determine how your payer mix affects your organization's bottom line, and benchmark accounts receivable and collections to identify areas for improvement to increase your overall profitability.

- **Maintain a healthy bottom line.**

Understand all the factors that influence your bottom line, including information technology (IT) costs; liability insurance costs; building and occupancy expenses; support staff (front-office, clinical support, business operations and ancillary support staff); investment per physician; payer mix; and the association between productivity levels and the ratio of support staff to providers.

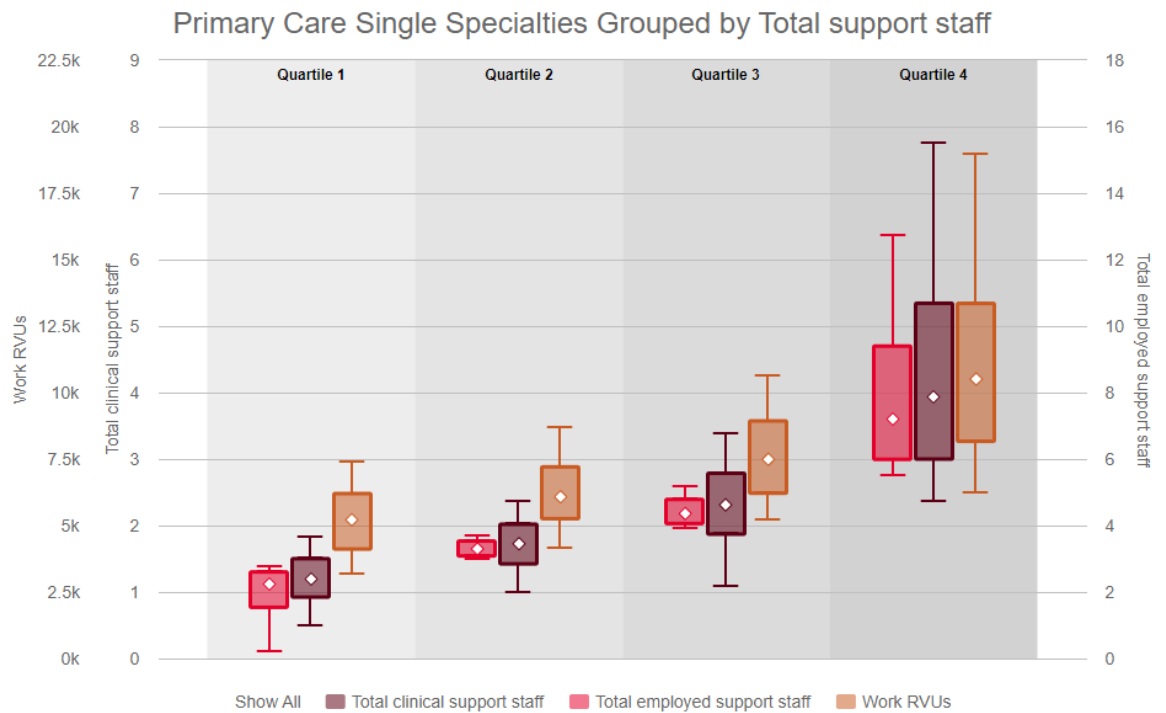
PRO TOOLS

PRO REPORT BUILDER

For the data gurus, this tool allows you to get into the weeds and search very fine data points, like five-year data trends, and roll up specialties. It also lets you compare your organization’s data side by side with MGMA data!

QUARTILE TOOL

View data partitioned by highest/lowest performers and the corresponding values of up to three additional benchmarks, like staffing, revenue and expenses. Data is displayed by quartile in a table and interactive graph.



View expense, revenue and staffing data partitioned by highest/lowest performers and the corresponding values of up to three additional benchmarks. Data is displayed by quartile in a table and interactive graph.

BENCHMARKS

EXPENSES

- Physicians, APPs and Provider Cost
- Support Staff Cost – Detailed by Type of Staff
- General Operating Cost, i.e. IT, Building and Occupancy, Furniture
- A/R, Collections, Payer Mix

STAFFING

- FTE Staffing Ratios for position included under:
- Physicians, Support Staff, Business Operations Support Staff, Front Office Support Staff, Clinical Support Staff, Ancillary Support Staff

CHARGES AND REVENUE

- Total Gross Charges
- Total Medial Revenue
- Total Medical Revenue After Operating Cost
- Net FFS Revenue
- Net Capitation Revenue
- Nonmedical Revenue
- Net Income

PRODUCTIVITY

- ASA Units
- Patients
- Work RVUs
- Total RVUs
- Total Encounters
- Panel Size
- Square Feet
- Total Procedures
- Number of Exam/Treatment Rooms

FILTERS

- All Practices
- Better Performing Practices
- Demographic Classification
- Geographic Section
- HHS Region
- Legal Organization
- Minor Geographic Region
- Number of FTE Physicians
- Organizational Ownership

- Practice was Affiliated with Accountable Care Organization
- Practice was Federally Qualified Health Center
- Practice was Patient Centered Medical Home
- Practice was Rural Health Clinic
- Practice Specialty

- Ratio of APP to FTE Physician FTE
- Rent vs. Own Practice Space
- Total Medical Revenue

DATA CUT

- Per FTE Physician
- As a % of Total Medical Revenue
- Per FTE Provider
- Per Square Foot
- Per Total RVU
- Per Work RVU
- Per ASA Unit
- Per Patient
- Per Encounter

ADVANCED TOOLS

- Custom Group Data
- Custom Specialty Builder
- Percentiles between 10-90
- Quartile Tool
- Trend up to 5 years

To learn more, visit mgma.com/ddcost
or contact us based on your organization type:



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