

# Scheduling, CPT Coding, Billing & Productivity: How They All Interrelate for Outpatient Therapy

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1

## Learning Objectives

- Differentiate different ways of scheduling your patients and how this impacts your coding, billing and productivity
- Explain the definition of “requires one-on-one patient contact” and how that impacts your billing and product
- Assess your current process of scheduling, billing and productivity and compare it to what was taught in today’s session
- Describe what financial data to analyze and how to interpret this data to determine the financial success or failure of your practice/organization



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2

2

## CPT Coding

- **Constant Attendance Modalities**

The application of a modality that requires direct (one-on-one) patient contact.

- **Therapeutic Procedures**

Physician or other **qualified healthcare professional** (ie, therapist) required to have direct (**one-on-one**) patient contact



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3

## Qualified Healthcare Professional

- Is an individual who is qualified by education, training, licensure/regulation (when applicable), and facility privileging (when applicable) who performs a professional service within his/her scope of practice and **independently** reports that professional service
- This would include physical therapists, occupational therapist and speech-language pathologists



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## Clinical Staff

- Is a person who works under the supervision of a physician or other qualified healthcare professional and who is allowed by law, regulation, and facility policy to perform or assist in the performance of a specified professional service, but who **does not individually report** that professional service
- This would include physical therapist assistants, occupational therapy assistants and support personnel



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## Direct Patient Contact

- CPT Assistant December 1999

Therapeutic procedure, one or more areas, each 15 minutes; ... requires the therapist to maintain direct patient contact (ie, visual, verbal and/or manual contact) during provision of the service



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## CPT Codes That Require Direct One-on-One Patient Contact

- 97032 The application of a modality to 1 or more areas; electrical stimulation (manual), each 15 minutes
- 97033 Iontophoresis, each 15 minutes
- 97034 Contrast bath, each 15 minutes
- 97035 Ultrasound, each 15 minutes
- 97036 Hubbard tank, each 15 minutes



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## CPT Codes That Require Direct One-on-One Patient Contact

- **90912:** Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry when performed; **initial 15 minutes of one-on-one physician or other qualified health care professional contact with the patient**
- **90913:** Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry when performed; **each additional 15 minutes of one-on-one physician or other qualified health care professional contact with the patient**



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## CPT Codes That Require Direct One-on-One Patient Contact

- 97110 Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and **endurance**, range of motion and flexibility
- 97112 Neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities (i.e. Baps Board, Trampoline, Swiss Ball, Body Blade, PNF, NDT, etc.)
- 97113 Aquatic therapy with therapeutic exercise
- 97116 Gait training (includes stair climbing)
- 97124 Massage, including effleurage, petrissage and/or tapoment (stroking, compression, percussion)



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9

## CPT Codes That Require Direct One-on-One Patient Contact

- **97129** - Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing and sequencing tasks), direct (one-on-one) patient contact; **initial 15 minutes**
- **97130** – Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing and sequencing tasks), direct (one-on-one) patient contact; **each additional 15 minutes** (list separately in addition to code for primary procedure)



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10

## CPT Codes That Require Direct One-on-One Patient Contact

- 97140 Manual therapy techniques (eg. Mobilization/manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes
- 97530 Therapeutic activities, **direct (one on one) patient contact** (use of dynamic activities to improve functional performance), each 15 minutes
- 97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, **direct (one-on-one) patient contact**, each 15 minutes
- 97535 Self care/home management training (eg, activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instruction in use of adaptive equipment) **direct one on one contact**, each 15 minutes



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11

## Can I Double Book Medicare Patients?

- The Medicare program has no rules or regulations dictating how you schedule Medicare Part B patient's
- The key is you only bill the appropriate number of time-based units based on the amount of direct one-on-one time you spent with the Medicare patient plus any untimed services provided during that treatment session



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## Can I Schedule a Medicare Patient and Non-Medicare Patient at Same Time

- The Medicare program has no rules or regulations dictating how you schedule Medicare Part B patient's
- Non-Medicare insurance carriers have no rules or regulations dictating how you schedule their patient's
- The key is you only bill the appropriate number of time-based units based on the amount of direct one-on-one time you spent with the Medicare patient plus any untimed services provided during that treatment session



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13

## Use of Support Personnel

- Physical therapists can utilize physical therapist assistants to provide therapy services, if allowed by the insurance carrier and state practice act, under the direction and supervision of the physical therapist
- Occupational therapists can utilize occupational therapy assistants to provide therapy services, if allowed by the insurance carrier and state practice act, under the direction and supervision of the occupational therapist
- Where allowed by state practice act **AND** insurance carrier(s) policy, can utilize support personnel such as rehab aides, rehab techs, athletic trainers, etc. to provide delegated interventions under their direction and supervision of the therapist



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14

## Scheduling Software

- Does your scheduling system only allow patients to be scheduled in 15-minute intervals (ie, 9:00AM, 9:15AM, 9:30AM, 9:45AM), 30-minute intervals (ie, 9:00AM, 9:30AM, 10:00AM) or on the top of every hour?
- Or does your scheduling system allow you to schedule in 5 or 10-minute increments or allows for customized scheduling



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15

## Time Management

- Knowing what your patient needs when they come in for their appointment
- Will your patient begin with a modality or warm up on a bike, treadmill, or UBE?
- Does the patient need to begin with direct one-on-one interventions provided by a PT, PTA, OT, OTA or SLP?
- Do you have support personnel (aide or tech) to assist you?



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16

16

	PT 1	PT 2	PT 3
8:00AM	Patient 1	Patient 1 (New Evaluation)	Patient 1
8:30AM	Patient 2		Patient 2
8:45AM		Patient 2	
9:00AM			Patient 3
9:15AM	Patient 3	Patient 3	
9:45AM	Patient 4		Patient 4

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17

	PT 1	PT 2	PT 3
10:00AM		Patient 4	
10:15AM			Patient 5
10:30AM	Patient 5	Patient 5	
10:45AM			
11:00AM			Patient 6 (New Evaluation)
11:15AM	Patient 6	Patient 6	

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18

	PT 1	PT 2	PT 3
1:00PM	Patient 7 (New Evaluation)	Patient 7	Patient 7 (New Evaluation)
1:30PM		Patient 8	
1:45PM	Patient 8		
2:00PM			Patient 8
2:15PM		Patient 9	
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	PT 1	PT 2	PT 3
2:30PM	Patient 9		
2:45PM			Patient 9 (New Evaluation)
3:00PM		Patient 10 (New Evaluation)	
3:15PM	Patient 10		
3:30PM			Patient 10
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20

## “8 Minute Rule” Medicare Part B

- Applies to CPT codes timed in 15-minute increments only
- For any single timed CPT code, providers bill the appropriate number of units based on the time intervals outlined on the next slide
- If more than one 15-minute timed CPT code is billed on a calendar day, then the total number of time-based units that can be billed is constrained by the total treatment time of time-based interventions by that discipline. Do not count minutes of service-based CPT codes
- When more than one service represented by 15-minute timed codes is performed in a single day, the total number of minutes of timed service determines the number of time-based units billed
- If any 15-minute timed service that is performed for 7 minutes or less on the same day as another 15-minute timed service that was performed for 7 minutes or less and the total time of the 2 is 8 minutes or greater, then bill 1 unit for the service performed for the most minutes



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21

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## “8 Minute Rule” Medicare Part B

≥ 8 through 22 minutes	1 unit
≥ 23 through 37 minutes	2 units
≥ 38 through 52 minutes	3 units
≥ 53 through 67 minutes	4 units
≥ 68 through 82 minutes	5 units
≥ 83 through 97 minutes	6 units
≥ 98 through 112 minutes	7 units
≥113 through 127 minutes	8 units



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22

22

## Non-Medicare Insurances “Each 15-Minutes” or “Per Hour”

- What defines “each 15 minutes” or “per hour”?
- What is considered “substantial” of a time-based CPT per the American Medical Association (AMA) to bill a time-based CPT code to an insurance carrier who does not follow Medicare’s “8-minute rule”?
- What does AMA say in the CPT book regarding substantial? Answer is – A unit of time is attained when the mid-point is passed
- Check with specific insurance carriers and be able to defend what you bill for with rationale



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## Billing

- Do you apply Medicare’s “8-minute rule” to all insurance carriers?
- Do you follow the American Medical Associations’ definition of substantial portion of a time-based CPT code for insurance carriers that do not follow Medicare’s “8-minute rule”?
- The Medicare program determines how I bill to all insurance carriers, correct?
- All Medicare Advantage plans follow traditional Medicare in terms of billing and the “8-minute rule”, correct?



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## How Would You Bill?

- 25 Minutes Therapeutic exercises for strengthening of the shoulder
- 25 Minutes Manual therapy techniques to increase shoulder range of motion



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## How Would You Bill?

- 10 Minutes Ultrasound to low back
- 13 Minutes Strengthening exercises for trunk
- 11 Minutes Manual therapy techniques to low back



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26

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## How Many Units Can I Bill In an Hour?

- I can only bill 4 15-minute units per hour, correct?
- If my patient population is 100% Medicare, I can only bill 4 units per hour, correct?



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27

## How Many Units Can I Bill In an Hour?

- Example 1 – Patient A is seen from 8:00AM – 8:25AM for therapeutic exercise. Patient B seen from 8:26AM – 8:50AM for therapeutic exercise. Patient C seen from 8:51AM – 9:00AM for therapeutic exercise
- You would bill 5 15-minute units in an hour. This example is true for all patient's, including Medicare Part B



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## How Many Units Can I Bill In an Hour?

Example 2 – Patient A is seen from 8:00AM – 8:25AM for a combination of therapeutic exercise (15 minutes) and manual therapy (10 minutes) and is then placed on unattended electrical stimulation until 8:45AM.

Patient B is seen from 8:30AM – 8:55AM for a combination of therapeutic exercise (12 minutes) and manual therapy (13 minutes) and is then placed on mechanical cervical traction starting at 9:00AM

Both Patient A and Patient B would be charged 2 timed units and 1 untimed unit for a total of 6 units combined in an hour



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29

## How Many Units Can I Bill In an Hour?

Example 3 – Non “8-Minute Rule” Payers

Patient A is seen from 8:00AM – 8:10AM for therapeutic exercise, 8:11AM – 8:20AM for manual therapy and 8:21AM – 8:30AM for gait training

Patient B is seen from 8:31AM – 8:40AM for therapeutic exercise, 8:41AM – 8:50AM for manual therapy and 8:51AM – 9:00AM for therapeutic activities

Patient A and Patient B would each be charged 3 time-based units for a combined total of 6 units in an hour



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## What is Your Payer Mix?

- Medicare
- Managed Medicare
- Medicaid and Managed Medicaid
- Commercial/Private Insurance Carriers
- Workers Compensation
- Personal Injury/Lien Cases
- Auto



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## How Are You Paid?

- Per CPT Code (Units per visit important)
- Per Visit Rate (Volume more important than units)
- Percent of Charges (Rare to see and if it does, mainly occurs with hospital contracts)



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32

<b>All Medicare Productivity</b>				
	<b>PT #1</b>	<b>PT #2</b>	<b>PT #3</b>	<b>PT # 4</b>
Visits per Day	6	8	7	8
Units per Visit	4	3	4	3.5
Units per Day	24	24	28	28
Payment Per Visit	\$101.28	\$77.69	\$101.28	\$89.48
Total Payment	\$607.68	\$621.52	\$708.96	\$715.84
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33

<b>All Medicare Productivity</b>				
	<b>PT #1</b>	<b>PT #2</b>	<b>PT #3</b>	<b>PT # 4</b>
Visits per Day	8	12	10	14
Units per Visit	4	3	3.5	2.5
Units per Day	32	36	35	35
Payment Per Visit	\$101.28	\$77.69	\$89.48	\$65.89
Total Payment	\$810.24	\$932.28	\$894.80	\$922.46
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34

## So, Would You Be Happy?

- Physical Therapists in next slide all make \$43.00 per hour
- Benefits cost an employer approximately 30% of the employee's hourly rate
- When benefits are added in, hourly cost of each physical therapist is \$55.90
- Average daily cost (paid 8 hours) for each physical therapist, that includes salary and benefits, is \$447.20.



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35

35

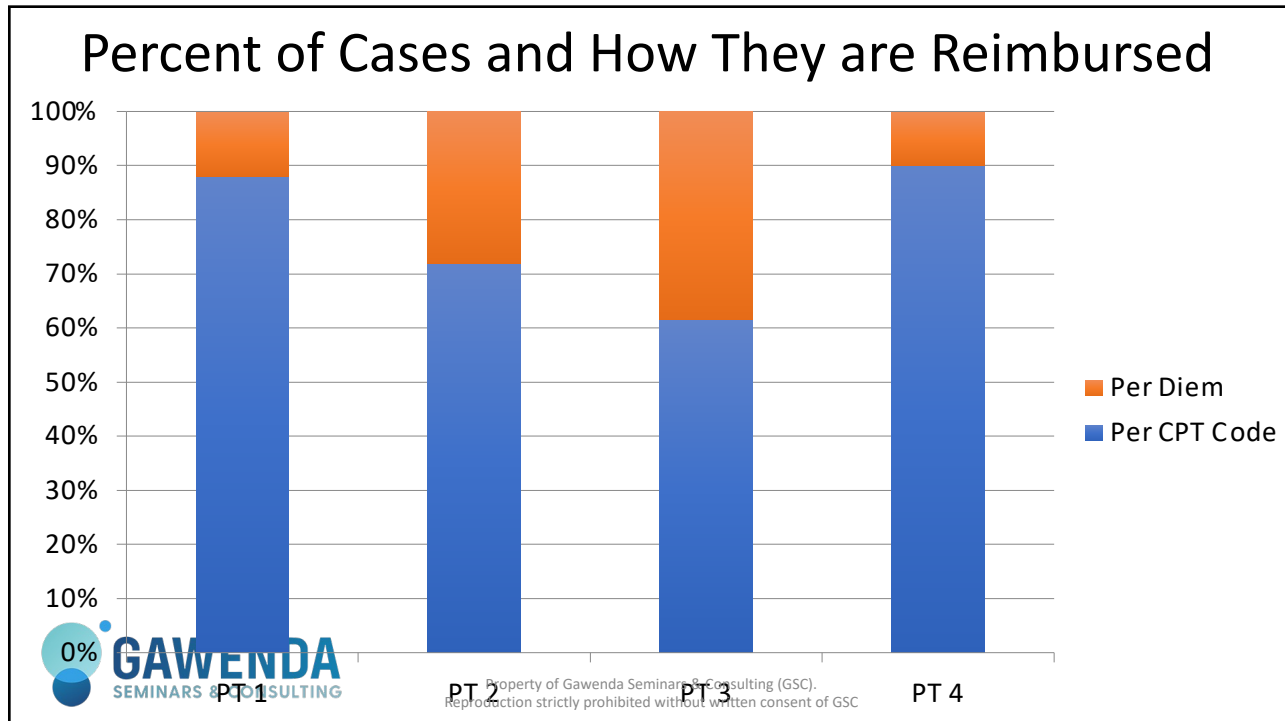
## PT Productivity

	PT #1	PT #2	PT #3	PT #4
Visits per Day	8.5	12.5	13	10
Units per Visit	3.7	3.25	3.0	3.7
Units per Day	31.45	40.6	39	37

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36



37

### Generated Revenue

	PT #1	PT #2	PT #3	PT #4
Visits/Day Paid by CPT Code	7.5	9.0	8	9
Units Paid by CPT Code \$25.00 per unit	28 Units \$700.00	29 Units \$725.00	24 Units \$600.00	33 Units \$825.00
Visits/Day Paid per Diem \$70 per visit	1.0 \$70.00	3.5 \$245.00	5 \$350.00	1 \$70.00
<b>Total Payment/Day</b>	<b>\$770.00</b>	<b>\$970.00</b>	<b>\$950.00</b>	<b>\$895.00</b>

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<b>Subtract Daily Cost of PT</b>				
	<b>PT #1</b>	<b>PT #2</b>	<b>PT #3</b>	<b>PT #4</b>
Total Payment/Day	\$770.00	\$970.00	\$950.00	\$895.00
Cost of PT/Day	\$447.20	\$447.20	\$447.20	\$447.20
Net Income/Day Before Other Expenses	\$322.80	\$522.80	\$502.80	\$447.80
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<b>Subtract Other Daily Expenses</b>				
	<b>PT #1</b>	<b>PT #2</b>	<b>PT #3</b>	<b>PT #4</b>
Net Income/Day Before Other Expenses	\$322.80	\$522.80	\$502.80	\$447.80
1 Front Office Person and 2 Rehab Aides (\$54/HR) Divided by 4	\$108.00	\$108.00	\$108.00	\$108.00
Rent/Utilities/Repairs/Etc \$5,000 per month/20 work-days/4	\$62.50	\$62.50	\$62.50	\$62.50
Net Income per Day	\$152.30	\$352.30	\$332.30	\$277.30
Net Income per Year (Based on 235 Workdays)	\$40,067.50	\$82,790.50	\$78,090.50	\$65,165.50
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40

<b>Subtract Other Daily Expenses</b>				
	<b>PT #1</b>	<b>PT #2</b>	<b>PT #3</b>	<b>PT #4</b>
Net Income/Day Before Other Expenses	\$322.80	\$522.80	\$502.80	\$447.80
1 Front Office Person and 2 Rehab Aides (\$54/HR) Divided by 4	\$108.00	\$108.00	\$108.00	\$108.00
Rent/Utilities/Repairs/Etc \$7,000 per month/20 work-days/4	\$87.50	\$87.50	\$87.50	\$87.50
Net Income per Day	\$127.30	\$327.30	\$307.30	\$252.30
Net Income per Year (Based on 235 Workdays)	\$29,915.50	\$76,915.50	\$72,215.50	\$59,290.50
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41

<b>Generated Revenue</b>				
	<b>PT #1</b>	<b>PT #2</b>	<b>PT #3</b>	<b>PT #4</b>
Net Income/Day Before Other Expenses	\$322.80	\$522.80	\$502.80	\$447.80
1 Front Office Person and 2 Rehab Aides (\$54/HR) Divided by 4	\$108.00	\$108.00	\$108.00	\$108.00
Rent/Utilities/Repairs/Etc \$10,000 per month/20 work-days/4	\$125.00	\$125.00	\$125.00	\$125.00
Net Income per Day	\$89.80	\$289.80	\$269.80	\$214.80
Net Income per Year (Based on 235 Workdays)	\$21,103.00	\$68,103.00	\$63,403.00	\$50,478.00
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42

Generated Revenue				
	PT #1	PT #2	PT #3	PT #4
Net Income/Day Before Other Expenses	\$322.80	\$522.80	\$502.80	\$447.80
1 Front Office Person and 2 Rehab Aides (\$54/HR) Divided by 4	\$108.00	\$108.00	\$108.00	\$108.00
Rent/Utilities/Repairs/Etc \$15,000 per month/20 work-days/4	\$187.50	\$187.50	\$187.50	\$187.50
Net Income per Day	\$27.30	\$227.30	\$207.30	\$152.30
Net Income per Year (Based on 235 Workdays)	\$6,415.50	\$53,415.50	\$48,715.50	\$35,790.50
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43

Generated Revenue				
	PT #1	PT #2	PT #3	PT #4
Net Income/Day Before Other Expenses	\$322.80	\$522.80	\$502.80	\$447.80
1 Front Office Person and 2 Rehab Aides (\$54/HR) Divided by 4	\$108.00	\$108.00	\$108.00	\$108.00
Rent/Utilities/Repairs/Etc \$20,000 per month/20 work-days/4	\$250.00	\$250.00	\$250.00	\$250.00
Net Income per Day	<b>-\$35.20</b>	\$164.80	\$144.80	\$89.80
Net Income per Year (Based on 235 Workdays)	<b>-\$8,272.00</b>	\$38,728.00	\$34,028.00	\$21,103.00
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44


Generated Revenue				
	PT #1	PT #2	PT #3	PT #4
Net Income/Day Before Other Expenses	\$322.80	\$522.80	\$502.80	\$447.80
1 Front Office Person and 2 Rehab Aides (\$54/HR) Divided by 4	\$108.00	\$108.00	\$108.00	\$108.00
Rent/Utilities/Repairs/Etc \$25,000 per month/20 work-days/4	\$312.50	\$312.50	\$312.50	\$312.50
Net Income per Day	<b>-\$97.70</b>	\$102.30	\$82.30	\$27.30
Net Income per Year (Based on 235 Workdays)	<b>-\$22,959.50</b>	\$24,040.50	\$19,340.50	\$6,415.50

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45

## So, Would You Be Happy?

- Physical Therapists in next slide all make \$43.00 per hour and Physical Therapist Assistants make \$30.00 per hour
- Benefits cost an employer approximately 30% of the employee’s hourly rate
- When benefits are added in, hourly cost of each physical therapist is \$55.90 and physical therapist assistant is \$39.00
- Average daily cost (paid 8 hours) for each PT, that includes salary and benefits, is \$447.20 and PTA is \$312.00



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46

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PT and PTA Productivity				
	PT #1	PTA #1 CQ	PT #2	PTA # 2 CQ
Visits per Day	8	8	10	10
Units per Visit	4	4	3.5	3.5
Units per Day	32	32	35	35
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Generated Revenue				
	PT #1	PTA #1 CQ	PT #2	PTA #2 CQ
Visits/Day Paid by CPT Code	8	8	10	10
Units Paid by CPT Code	32 Units	32 Units	35 Units	35 Units
2 units 97110 1 unit 97112 1 unit 97530	\$112.50 per visit	\$95.63 per visit	\$100.70 per visit	\$85.60 per visit
Total Payment/Day	\$900.00	\$765.04	\$1007.00	\$856.00
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48

<b>Subtract Daily Cost of PT and PTA</b>				
	<b>PT #1</b>	<b>PTA #1 CQ</b>	<b>PT #2</b>	<b>PTA #2 CQ</b>
Total Payment/Day	\$900.00	\$765.04	\$1007.00	\$856.00
Cost of PT/Day	\$447.20	\$312.00	\$447.20	\$312.00
Net Income/Day Before Other Expenses	\$452.80	\$453.04	\$559.80	\$544.00
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<b>Generated Revenue</b>				
	<b>PT #1</b>	<b>PTA #1</b>	<b>PT #2</b>	<b>PTA #2</b>
Net Income/Day Before Other Expenses	\$452.80	\$453.04	\$559.80	\$544.00
1 Front Office Person and 1 Rehab Aide (\$46/HR) Divided by 4	\$92.00	\$92.00	\$92.00	\$92.00
Rent/Utilities/Repairs/Etc \$10,000 per month/20 work-days/4	\$125.00	\$125.00	\$125.00	\$125.00
Net Income per Day	\$235.80	\$236.04	\$342.80	\$327.00
Net Income per Year (Based on 235 Workdays)	\$55,413.00	\$55,469.40	\$80,558.00	\$76,845.00

50

## So What Should We Be Tracking?

- Units per Visit
- Visits per Day
- Units per Day
- Cancel/No Show Rate



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## Plus the Following

- Units per Paid Worked Hour
- Visits per Paid Worked Hour
- Arrival Rate
- Charge per Visit
- Charge per Unit
- Income per Visit
- Income per Unit



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## Plus the Following (cont.)

- Expense per Visit
- Expense per Unit
- Number of Units of Each CPT Code Billed
- Percentage of Time-Based Units versus Supervised Modalities
- Percentage of Therapeutic Procedure Units versus Modality Units
- Payer Mix and How Paid by Each Payer



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53

53

## Suggested Standards

	With Tech Support	Without Tech Support
Visits/Hour	1.5 – 2.0	1.0 - 1.5
Units/Visit	3.5 – 4.0	3.5 – 4.0
Units/Hour	5.0 – 7.0	4.0 – 5.0

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54

54

	Actual	Projection 1	Projection 2
Units/Hour	3.16	4.0	4.0
Visits/Hour	0.88	1.0	1.0
Units/Day	25.25	32	32
Visits/Day	7.02	8.0	8.0
Gross Charges	\$1,264,790.00	\$1,605,230.20	\$1,540,153.30
Gross Income	\$911,214.67	\$995,360.30	\$1,041,783.32
Expenses	\$711,231.15	\$711,231.15	\$711,231.15
Net Income	\$199,983.52	\$284,129.15	\$330,551.17

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	Actual	Projection 3	Projection 4
Units/Hour	3.16	4.0	4.25
Visits/Hour	0.88	1.25	1.25
Units/Day	25.25	32	34
Visits/Day	7.02	10	10
Gross Charges	\$1,264,790.00	\$1,583,537.90	\$1,691,999.40
Gross Income	\$911,214.67	\$1,109,268.70	\$1,168,954.54
Expenses	\$711,231.15	\$711,231.15	\$711,231.15
Net Income	\$199,983.52	\$398,037.55	\$457,723.39

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	Actual	Projection 5	Projection 6
Units/Hour	3.16	4.5	5.0
Visits/Hour	0.88	1.25	1.25
Units/Day	25.25	36	40
Visits/Day	7.02	10	10
Gross Charges	\$1,264,790.00	\$1,778,768.60	\$1,973,999.30
Gross Income	\$911,214.67	\$1,207,827.74	\$1,360,732.40
Expenses	\$711,231.15	\$711,231.15	\$711,231.15
Net Income	\$199,983.52	\$496,596.59	\$649,501.25


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57

## What Does All This Mean?

- Private Practices
- EBITDA

Earnings Before Interest, Tax, Depreciation and Amortization



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58

58

## What Does All This Mean?

- Private Practice EBITDA
  1. Like to see minimum 15% net profit; ideal is 20% and higher
  2. EBITDA determined after subtracting expenses from income
  3. Expenses include reasonable salary for owner(s)
  4. Would add back 1-time expenses and expenses not usually incurred by a company (ie. cell phones, car allowance, 7-day trip to Hawaii for “continuing education”, daughter’s wedding, etc.)



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59

59

## Preparing for Sale

### List of Staff and Employment Status

- Physical therapists and physical therapist assistants
- Occupational therapists and occupational therapy assistants
- Front and back office with titles
- Owner
- Administrator
- Therapy support staff with titles



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60

60

## Preparing for Sale

### Benefit Package

- Health Insurance
- 401K or Retirement Plan including company match and percentage
- Vacation Time – How much
- Sick Time – How much



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61

61

## Preparing for Sale

### Litigation and OIG Exclusion

- Any past litigation against company, owner and/or staff
- Any pending litigation against company, owner and/or staff
- Yearly OIG Exclusion checks of all employees



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62

62

## Preparing for Sale

### Financials and Metrics for Past 3 Years and Current Year

- Number of evaluations, visits and units
- Cancel/No Show Rate as well as Arrival Rate
- Gross and Net Income
- Expenses
- FTEs for each employee classification



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63

## Preparing for Sale

### Miscellaneous Items

- Copies of employee handbooks, policies, and procedures
- A copy of Form I-9 and all retained supporting documents for each employee (current and former)
- All documents relating to or representing workers' compensation or disability policies, and any material claims with respect thereto of the Company



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64

64

## References

- <http://www.cms.gov/Manuals/>
- Click on Internet-Only Manuals
- Click on Pub 100-4  
Medicare Claims Processing Manual
- **Click on Chapter 5, Part B Outpatient Rehabilitation and CORF Services (Sections 10.2-10.7 and 20-20.4)**



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65

65

## References

- American Medical Association, *Current Procedural Terminology; CPT 2022; Professional Edition; Copyright 2021*

- CPT Assistants

<https://bit.ly/31mbcKQ>



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## Upcoming Webinars

- **November 16, 2022**

Establishing Your Budget and Metrics for 2023

- **December 8, 2022**

2023 Outpatient Therapy Regulatory and Payment Updates

- **December 15, 2022**

2023 MIPS for Physical, Occupational and Speech Therapy Services



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## Upcoming Webinars

- **January 5, 2023**

NCCI Edits and Modifier 59: Version 29.0

- **January 12, 2023**

Remote Therapeutic Monitoring for Physical & Occupational Therapy in 2023

- **January 26, 2023**

Complying with The Good Faith Estimate Requirement in 2023



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## Upcoming Webinars

- **February 16, 2023**

Outpatient Therapy Compliance Programs: Key Elements You MUST Have

- **March 8, 2023**

2023 Documentation for Evaluations and Reevaluations for PT, OT & SLP

- **April 19, 2023**

2023 Documentation for Everything After the Initial Evaluation for PT, OT & SLP



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69

69

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### Subscription Benefits

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Access to Your Medicare Contractors Therapy Policies

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70

70

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71

71

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72

72