



Chip Hart

Insurance Contracting:
Setting Your Practice Up for Success

Pediatric **Health** Network



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We **do not** intend to discuss an unapproved/investigative use of a commercial product/device in my presentation.

Insurance Contracting: Setting Your Practice Up for Success

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Links

- <https://learn.pcc.com/wp/wp-content/uploads/UC2024-Insurance-Negotiations-a-4-Part-Series.pdf>
- <https://youtu.be/hfRYIBkdAFE>

At the conclusion of the presentation, participants should be able to:

1. Identify the data they need to gather and understand to optimize negotiations on payer contracts.
2. Create a strategy for managing contract negotiations with payers.
3. Feel confident in their ability to navigate different outcomes with payer contracts (revised terms, termination, etc.).

Getting Your Data Ducks in a Row: Optimizing Contract Negotiation

Chip Hart




- This is a business to them. They *do not* care about you or your patients.
- The process is usually simple, but not easy. The squeaky wheel gets the grease.
- No insurance company is prepared for *a pediatrician with data*.

Step 1: Your Contracts

bit.ly/PMISampleWorksheets

	A	B	C	D	E	F	G
1	Sample MCO Contract Abstraction Sheet						
2							
3		BBMCO	MCO1	MCO2	MCO3	MCO4	MCO5
4	Phase I- Inquiry						
5	Contract Effective Date(s):	January 1, 2020					
6	Renewal Date	January 1, 2021					
7	Days Notice To Cancel	90 Days					
8	Network Name(s):	Little Apples, Orange Grove					
9	Product Type(s):	PPO, HMO, EPO					
10	Products/Networks/Plans Not Contracted for:	Medicare Advantage					
11	Network Contracted Through	Direct / IPA / CIN, etc.					
12	Largest Employer In Area	Wal Mart					
13	# 2 Employer In Area	Coca Cola Bottler					
14	# 3 Employer In Area	ABC Community Hospital					
15	Current Number of Patients Covered (GWP Actives)	2500					
16	Factor of Medicare RBRVS	125%					
17	Factor of Medicare RBRVS Year						
18	Factor of Medicare GPCI Applied						
19	Medicare RBRVS Method	(Blended or Line by line)					
20	Medicare RBRVS Year	Current Year (2020)					
21	Nurse Practitioner Rates	No Differential					
22	Nurse Practitioner Rates Source	www.BBMCO.com/np_rate_rules					
23	Physician Assistant Rates	No Differential					
24	Physician Assistant Rates Source	www.BBMCO.com/pa_rate_rules					
25	Medicare Fee Schedule Information	https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/index.html					

Step 2: Financial Reports - RVU Breakdown

 PCC Pediatric EHR Solutions Build-Your-Own RVU Calculator for 2023 Instructions at http://chipsblog.pcc.com/free-2023-rvu-calculator V1.0 Updated 12/23/22														
				Work GPCI	PE GPCI	MP GPCI								
Medicare Multiplier	100	%	GPCI Location	FL, REST OF FLORIDA	1	0.9	1.5							
Medicare Factor	\$33.06													
Practice FAF	139%													
Payment FAF	59%													
Enter CPT Codes Below	Your Units	Your Price	Your Payment	Description	Status Code	Work RVU	Non-Fac PE RVU	MP RVU	Total RVUs	Medicare Rate	CPT Price at 100%	Medicare Relative Price	Your Payment Relative To Medicare	
99213	5000	\$120.00	\$51.00	Office o/p est low 20-29 min	A	1.300	1.203	0.145	2.648	\$87.55	\$87.55	137.1%	58.2%	
99214	3000	\$175.00	\$75.00	Office o/p est mod 30-39 min	A	1.920	1.626	0.203	3.749	\$123.96	\$123.96	141.2%	60.5%	
90460	3000	\$31.00	\$11.00	Im admin 1st/only component	A	0.240	0.385	0.029	0.654	\$21.64	\$21.64	143.3%	50.8%	

<https://chipsblog.pcc.com/free-2023-rvu-calculator>

Step 2: Financial Reports - Visit Based Breakdown

Per-Visit Analysis by Payor ('activity' style)



Ins Group at Time of Service	Number of Visits	Charges Per Visit	Avg Charge Per Visit	Avg Deposited Per Visit	Number of Procedures	Charge Amount	Amount Deposited (all pmts)
Personal/No Insurance	288	3.32	\$245.48	\$120.78	957	\$70,697.49	\$34,785.31
Other	382	3.56	\$363.38	\$177.91	1361	\$138,810.61	\$67,963.38
Scott/White	400	3.56	\$354.12	\$168.22	1425	\$141,649.10	\$67,289.51
Amerigroup	266	4.38	\$257.26	\$86.43	1164	\$68,430.81	\$22,991.35
Aetna	1791	3.27	\$326.52	\$165.41	5862	\$584,798.39	\$296,242.19
Cigna	399	3.37	\$345.55	\$172.41	1343	\$137,875.46	\$68,790.87
Humana	7	3.14	\$294.43	\$133.88	22	\$2,061.04	\$937.15
Tricare	12	3.83	\$319.07	\$155.14	46	\$3,828.89	\$1,861.63
BCBS	671	3.34	\$341.23	\$174.16	2239	\$228,962.50	\$116,861.02
UHC	18	2.83	\$289.46	\$128.27	51	\$5,210.30	\$2,308.89
	4234	3.42	\$326.48	\$160.61	14470	\$1,382,324.59	\$680,031.30

Criteria for this report run.

Transaction Date Range: 05/01/22 - 04/30/23

Step 3: Clinical Reports

- All payor-driven quality report metrics
 - Well visit coverage
 - Screening coverage
 - 99050/1 volume
 - Immunization coverage
 - ICD-10 counts
 - No-show comparisons
 - Telemedicine Volume

Step 4: Demographic Reports

- Breakdowns by Patient age, sex, race, languages
 - Zipcode-based report
 - Employers

Step 5: External Benchmarking

- Regional
- National
- HEDIS
- Public

Step 6: Narratives and Storytelling

- Vignettes about your practice
- Earnings reports and news about the payor

[Redacted]

Reports \$5.6 Billion Profit As 2023 Starts Strong For [Redacted] And Health Plans

[Redacted] Group reported a \$5.6 billion first quarter profit as the healthcare giant's [Redacted] insurance plans and [Redacted] medical provider businesses grew by "double-digit" percentages, the company said Friday.

Finally at the Table: Managing Contract Negotiation

Susanne Madden, MBA, PCMH, CCE

Understand each Payers' process:

- Send the proposal through the appropriate channels
- Include the information that they want in the way they expect to see it
- Write a short, but compelling overview as to why you should be paid more (what are you doing that is better than a competitor, supported by data)
- Follow up within the timeframe the Payer quotes you for a response
- Expect that they will say 'no', and know what your come back is going to be

The Payers' profit depends upon saying 'no'

- Don't simply accept it and walk away
 - Keep the representative engaged
- Ask for other options for improving revenues (e.g. Value based options, risk, etc.)
- If they refuse to engage because you are too far outside of the effective date (many will only begin negotiations 6 months before renewal) or conversely inside of the renewal period (usually 120 days), set your calendar and come back to them at the 'right' time
- If they still say 'no' ask how you can get them to 'yes' - what do they need to see or have you do in order to pay you more
 - Show them how efficient / effective / etc you are with DATA

Send them a proposal

- No payer will make you an offer first, they want to see what you are looking for and counter-offer from there (Kim will walk us through this later)
- Ask for reasonable increases; if you ask for too much, it might kill the deal; too little and they will sign you up quick!
 - Don't accept their first counter; go at least three rounds
- Focus in on the codes that are highest volume and those that may be lagging other Payers using data (as discussed next by Paulie)

Assessing the proposal carefully:

- If they offer you X% on your preventive codes and Y% on the rest, run out ALL the numbers. A slight decrease to your vaccine adminis could more than eliminate any gains on your well visit codes
 - Run out the actual dollar increases. 110% of Medicare 2023 might sound great compared to your current 103%, but if your base year had a better RVU then you could be accepting less than you are on now.
RUN OUT THE NUMBERS.
- Most Payers will only provide you with a 'sample' at the offered rate; use PCC's BYO RVU to calculate out all of your codes
- Wait until you have agreed to final numbers, THEN ask them for year-over-year 'escalators' so that your income can grow

Many contracts now carry 'downside' options (Kim will expound on this later)

- Understand what you are agreeing to; missing metrics can cost you BIG
 - If the terms are vague, ask the Payer to provide you with scenarios using your practice data. For example "tell us where we fall currently with regard to your threshold" and see if you have a large gap to close
 - Figure out a plan for closing those gaps or staying at the levels you are at now to secure the 'bonuses' (Kim will discuss)
 - Make sure that you have stop-loss insurance if you will be carrying any financial risk (i.e. if the Payer can withhold or take back money in the event you miss metrics/budget allocations)
 - Set reasonable terms and timelines; stepped approach works best

Understanding Business Implications: Navigating Possible Outcomes

Paul Vanchiere, MBA



Current

Payor Revenue	\$	1,250,000
Allocated Expenses	\$	850,000
Allocated Overhead		68.00%
Margin For Provider Comp / Profit	\$	400,000

~7,800 @ \$160

	Current	Expected
Payor Revenue	\$ 1,250,000	\$ 1,125,000
Allocated Expenses	\$ 850,000	\$ 850,000
Allocated Overhead	68.00%	75.56%
Margin For Provider Comp / Profit	\$ 400,000	\$ 275,000

	Current	Expected	Variance	
Payor Revenue	\$ 1,250,000	\$ 1,125,000	\$ (125,000)	-10.00%
Allocated Expenses	\$ 850,000	\$ 850,000		
Allocated Overhead	68.00%	75.56%		
Margin For Provider Comp / Profit	\$ 400,000	\$ 275,000	<u>\$ (125,000)</u>	<u>-31.25%</u>

	Current	Expected	Variance	
Payor Revenue	\$ 1,250,000	\$ 1,125,000	\$ (125,000)	-10.00%
Allocated Expenses	\$ 850,000	\$ 850,000		
Allocated Overhead	68.00%	75.56%		
Margin For Provider Comp / Profit	\$ 400,000	\$ 275,000	<u>\$ (125,000)</u>	<u>-31.25%</u>

	Current	Expected	Variance	
Payor Revenue	\$ 1,250,000	\$ 1,375,000	\$ 125,000	10.00%
Allocated Expenses	\$ 850,000	\$ 850,000		
Allocated Overhead	68.00%	61.82%		
Margin For Provider Comp / Profit	\$ 400,000	\$ 525,000	<u>\$ 125,000</u>	<u>31.25%</u>

	Total Charges	Percent of Charges	Total Adjustments	Percent of Adjustments	Total Payments	Percent of Payments	Net A/R	Percent of A/R	Gross Collection Rate	Net Collection Rate
Payor 1	\$ 818,000	40.90%	\$ 350,000	43.75%	\$ 450,000	38.96%	\$ 18,000	40.00%	55.01%	96.15%
Payor 2	\$ 410,000	20.50%	\$ 170,000	21.25%	\$ 235,000	20.35%	\$ 5,000	11.11%	57.32%	97.92%
Payor 3	\$ 340,000	17.00%	\$ 130,000	16.25%	\$ 200,000	17.32%	\$ 10,000	22.22%	58.82%	95.24%
Payor 4	\$ 265,000	13.25%	\$ 90,000	11.25%	\$ 165,000	14.29%	\$ 10,000	22.22%	62.26%	94.29%
Payor 5	\$ 167,000	8.35%	\$ 60,000	7.50%	\$ 105,000	9.09%	\$ 2,000	4.44%	62.87%	98.13%
Total	\$2,000,000		\$ 800,000		\$1,155,000		\$ 45,000		57.75%	96.25%

CPT Code	CPT Description	Payor 1	Payor 2	Payor 3	Payor 4	Payor 5	Medicare Rate	Payor 1	Payor 2	Payor 3	Payor 4	Payor 5
90460	Im admin 1st/only component	🟡 \$ 25.00	🟢 \$ 26.00	🟢 \$ 27.00	🔴 \$ 22.00	🔴 \$ 21.00	\$ 22.70	110.11%	114.52%	118.92%	96.90%	92.49%
90461	Im admin each addl component	🟢 \$ 11.00	🟡 \$ 10.00	🟢 \$ 12.00	🔴 \$ 9.00	🔴 \$ 8.75	\$ 10.17	108.20%	98.37%	118.04%	88.53%	86.07%
90471	Immunization admin	🔴 \$ 17.00	🔴 \$ 17.00	🟢 \$ 28.00	🟡 \$ 20.00	🔴 \$ 15.00	\$ 20.33	83.61%	83.61%	137.71%	98.37%	73.77%
90472	Immunization admin each add	🟢 \$ 17.00	🟢 \$ 17.00	🟡 \$ 14.00	🟡 \$ 15.00	🔴 \$ 11.00	\$ 14.57	116.67%	116.67%	96.08%	102.94%	75.49%
99000	Specimen handling office-lab	🟢 \$ 11.00	🔴 \$ 5.00	🔴 \$ 5.00	🔴 \$ 4.00	🔴 \$ 5.00						
99202	Office o/p new sf 15-29 min	🟢 \$ 94.00	🔴 \$ 92.00	🔴 \$ 91.00	🟢 \$ 95.00	🔴 \$ 91.00	\$ 72.86	129.02%	126.27%	124.90%	130.39%	124.90%
99203	Office o/p new low 30-44 min	🟢 \$ 145.00	🟢 \$ 145.00	🟢 \$ 134.00	🟡 \$ 118.00	🔴 \$ 98.00	\$ 112.84	128.50%	128.50%	118.75%	104.57%	86.85%
99204	Office o/p new mod 45-59 min	🟡 \$ 172.00	🟡 \$ 187.00	🟢 \$ 221.00	🔴 \$ 161.00	🔴 \$ 145.00	\$ 167.40	102.75%	111.71%	132.02%	96.18%	86.62%
99205	Office o/p new hi 60-74 min	🟢 \$ 285.00	🔴 \$ 257.00	🟢 \$ 280.00	🔴 \$ 260.00	🔴 \$ 256.00	\$ 220.94	128.99%	116.32%	126.73%	117.68%	115.87%
99211	Off/op est may x req phy/qhp	🟢 \$ 28.00	🟢 \$ 30.00	🟢 \$ 29.00	🟡 \$ 25.00	🔴 \$ 20.00	\$ 23.38	119.75%	128.30%	124.03%	106.92%	85.54%
99212	Office o/p est sf 10-19 min	🟡 \$ 55.00	🟡 \$ 55.00	🟢 \$ 62.00	🟡 \$ 56.00	🔴 \$ 49.00	\$ 56.93	96.61%	96.61%	108.90%	98.37%	86.07%
99213	Office o/p est low 20-29 min	🟡 \$ 92.00	🟡 \$ 92.00	🟢 \$ 109.00	🟡 \$ 94.00	🔴 \$ 79.00	\$ 90.82	101.30%	101.30%	120.02%	103.50%	86.99%
99214	Office o/p est mod 30-39 min	🟡 \$ 134.00	🟡 \$ 134.00	🟢 \$ 159.00	🟡 \$ 131.00	🔴 \$ 111.00	\$ 128.43	104.33%	104.33%	123.80%	102.00%	86.43%
99215	Office o/p est hi 40-54 min	🟡 \$ 180.00	🟢 \$ 207.00	🟢 \$ 203.00	🟡 \$ 185.00	🔴 \$ 156.00	\$ 179.94	100.03%	115.04%	112.81%	102.81%	86.70%
99381	Init pm e/m new pat infant	🟡 \$ 138.00	🟡 \$ 138.00	🟢 \$ 168.00	🔴 \$ 108.00	🔴 \$ 96.00	\$ 109.46	126.08%	126.08%	153.49%	98.67%	87.71%
99382	Init pm e/m new pat 1-4 yrs	🔴 \$ 124.00	🟡 \$ 147.00	🟢 \$ 175.00	🔴 \$ 111.00	🔴 \$ 100.00	\$ 114.20	108.58%	128.72%	153.24%	97.20%	87.57%
99383	Prev visit new age 5-11	🟢 \$ 151.00	🟢 \$ 151.00	🟢 \$ 165.00	🔴 \$ 121.00	🔴 \$ 100.00	\$ 118.61	127.31%	127.31%	139.12%	102.02%	84.31%
99384	Prev visit new age 12-17	🟢 \$ 170.00	🟢 \$ 174.00	🟢 \$ 185.00	🔴 \$ 133.00	🔴 \$ 117.00	\$ 133.52	127.33%	130.32%	138.56%	99.61%	87.63%
99391	Per pm reeval est pat infant	🟡 \$ 125.00	🟡 \$ 125.00	🟢 \$ 150.00	🔴 \$ 98.00	🔴 \$ 86.00	\$ 98.27	127.20%	127.20%	152.64%	99.72%	87.51%
99392	Prev visit est age 1-4	🟢 \$ 133.00	🟢 \$ 133.00	🟢 \$ 145.00	🔴 \$ 104.00	🔴 \$ 92.00	\$ 105.05	126.61%	126.61%	138.03%	99.00%	87.58%
99393	Prev visit est age 5-11	🟢 \$ 132.00	🟢 \$ 132.00	🟢 \$ 145.00	🔴 \$ 103.00	🔴 \$ 91.00	\$ 104.71	126.06%	126.06%	138.48%	98.37%	86.91%
99394	Prev visit est age 12-17	🟢 \$ 145.00	🟢 \$ 145.00	🟢 \$ 158.00	🔴 \$ 113.00	🔴 \$ 100.00	\$ 114.20	126.97%	126.97%	138.35%	98.95%	87.57%
99395	Prev visit est age 18-39	🟢 \$ 149.00	🟢 \$ 149.00	🟢 \$ 162.00	🔴 \$ 115.00	🔴 \$ 102.00	\$ 116.91	127.45%	127.45%	138.57%	98.37%	87.25%

	Revenue	
Payor 1	\$ 325,071	14.24%
Payor 2	\$ 389,913	17.08%
Payor 3	\$ 994,055	43.55%
Payor 4	\$ 295,016	12.92%
Payor 5	\$ 278,725	12.21%
Total	\$2,282,780	

CPT Code	CPT Description	Payor 1			Payor 2			Payor 3			Payor 4			Payor 5		
		Count	Rate	Revenue	Count	Rate	Revenue	Count	Rate	Revenue	Count	Rate	Revenue	Count	Rate	Revenue
90460	Im admin 1st/only component	800	\$ 25.00	\$ 20,000	925	\$ 26.00	\$ 24,050	2306	\$ 27.00	\$ 62,262	735	\$ 22.00	\$ 16,170	876	\$ 21.00	\$ 18,396
90461	Im admin each addl component	746	\$ 11.00	\$ 8,206	998	\$ 10.00	\$ 9,980	2475	\$ 12.00	\$ 29,700	687	\$ 9.00	\$ 6,183	890	\$ 8.75	\$ 7,788
90471	Immunization admin	24	\$ 17.00	\$ 408	10	\$ 17.00	\$ 170	47	\$ 28.00	\$ 1,316	13	\$ 20.00	\$ 260	11	\$ 15.00	\$ 165
90472	Immunization admin each add	2	\$ 17.00	\$ 34	1	\$ 17.00	\$ 17	4	\$ 14.00	\$ 56	1	\$ 15.00	\$ 15	1	\$ 11.00	\$ 11
99000	Specimen handling office-lab	90	\$ 11.00	\$ 990	65	\$ 5.00	\$ 325	180	\$ 5.00	\$ 900	102	\$ 4.00	\$ 408	58	\$ 5.00	\$ 290
99202	Office o/p new sf 15-29 min	0	\$ 94.00	\$ -	0	\$ 92.00	\$ -	1	\$ 91.00	\$ 91	0	\$ 95.00	\$ -	0	\$ 91.00	\$ -
99203	Office o/p new low 30-44 min	2	\$ 145.00	\$ 290	9	\$ 145.00	\$ 1,305	9	\$ 134.00	\$ 1,206	7	\$ 118.00	\$ 826	4	\$ 98.00	\$ 392
99204	Office o/p new mod 45-59 min	2	\$ 172.00	\$ 344	1	\$ 187.00	\$ 187	4	\$ 221.00	\$ 884	1	\$ 161.00	\$ 161	5	\$ 145.00	\$ 725
99205	Office o/p new hi 60-74 min	0	\$ 285.00	\$ -	0	\$ 257.00	\$ -	1	\$ 280.00	\$ 280	0	\$ 260.00	\$ -	0	\$ 256.00	\$ -
99211	Off/op est may x req phy/qhp	5	\$ 28.00	\$ 140	8	\$ 30.00	\$ 240	6	\$ 29.00	\$ 174	6	\$ 25.00	\$ 150	3	\$ 20.00	\$ 60
99212	Office o/p est sf 10-19 min	11	\$ 55.00	\$ 605	21	\$ 55.00	\$ 1,155	34	\$ 62.00	\$ 2,108	9	\$ 56.00	\$ 504	7	\$ 49.00	\$ 343
99213	Office o/p est low 20-29 min	604	\$ 92.00	\$ 55,568	844	\$ 92.00	\$ 77,648	1611	\$ 109.00	\$ 175,599	561	\$ 94.00	\$ 52,734	500	\$ 79.00	\$ 39,500
99214	Office o/p est mod 30-39 min	326	\$ 134.00	\$ 43,684	396	\$ 134.00	\$ 53,064	768	\$ 159.00	\$ 122,112	308	\$ 131.00	\$ 40,348	269	\$ 111.00	\$ 29,859
99215	Office o/p est hi 40-54 min	98	\$ 180.00	\$ 17,640	24	\$ 207.00	\$ 4,968	73	\$ 203.00	\$ 14,819	56	\$ 185.00	\$ 10,360	68	\$ 156.00	\$ 10,608
99381	Init pm e/m new pat infant	21	\$ 138.00	\$ 2,898	29	\$ 138.00	\$ 4,002	83	\$ 168.00	\$ 13,944	27	\$ 108.00	\$ 2,916	42	\$ 96.00	\$ 4,032
99382	Init pm e/m new pat 1-4 yrs	4	\$ 124.00	\$ 496	4	\$ 147.00	\$ 588	4	\$ 175.00	\$ 700	10	\$ 111.00	\$ 1,110	7	\$ 100.00	\$ 700
99383	Prev visit new age 5-11	2	\$ 151.00	\$ 302	6	\$ 151.00	\$ 906	5	\$ 165.00	\$ 825	4	\$ 121.00	\$ 484	5	\$ 100.00	\$ 500
99384	Prev visit new age 12-17	5	\$ 170.00	\$ 850	4	\$ 174.00	\$ 696	2	\$ 185.00	\$ 370	1	\$ 133.00	\$ 133	3	\$ 117.00	\$ 351
99391	Per pm reeval est pat infant	154	\$ 125.00	\$ 19,250	184	\$ 125.00	\$ 23,000	516	\$ 150.00	\$ 77,400	126	\$ 98.00	\$ 12,348	218	\$ 86.00	\$ 18,748
99392	Prev visit est age 1-4	203	\$ 133.00	\$ 26,999	242	\$ 133.00	\$ 32,186	609	\$ 145.00	\$ 88,305	193	\$ 104.00	\$ 20,072	180	\$ 92.00	\$ 16,560
99393	Prev visit est age 5-11	180	\$ 132.00	\$ 23,760	296	\$ 132.00	\$ 39,072	445	\$ 145.00	\$ 64,525	165	\$ 103.00	\$ 16,995	174	\$ 91.00	\$ 15,834
99394	Prev visit est age 12-17	148	\$ 145.00	\$ 21,460	154	\$ 145.00	\$ 22,330	294	\$ 158.00	\$ 46,452	165	\$ 113.00	\$ 18,645	138	\$ 100.00	\$ 13,800
99395	Prev visit est age 18-39	27	\$ 149.00	\$ 4,023	23	\$ 149.00	\$ 3,427	60	\$ 162.00	\$ 9,720	39	\$ 115.00	\$ 4,485	26	\$ 102.00	\$ 2,652

Current Rates	\$ 325,071
Proposed Rates	\$ 326,999
Variance	\$ 1,928

CPT Code	CPT Description	Count	Current Rates		Proposed Rates		Variance
			Rate	Revenue	Rate	Revenue	
90460	Im admin 1st/only component	800	\$ 25.00	\$ 20,000	\$ 26.00	\$ 20,800	\$ 800
90461	Im admin each addl component	746	\$ 11.00	\$ 8,206	\$ 10.00	\$ 7,460	\$ (746)
90471	Immunization admin	24	\$ 17.00	\$ 408	\$ 17.00	\$ 408	\$ -
90472	Immunization admin each add	2	\$ 17.00	\$ 34	\$ 17.00	\$ 34	\$ -
99000	Specimen handling office-lab	90	\$ 11.00	\$ 990	\$ 5.00	\$ 450	\$ (540)
99202	Office o/p new sf 15-29 min	0	\$ 94.00	\$ -	\$ 92.00	\$ -	\$ -
99203	Office o/p new low 30-44 min	2	\$ 145.00	\$ 290	\$ 145.00	\$ 290	\$ -
99204	Office o/p new mod 45-59 min	2	\$ 172.00	\$ 344	\$ 187.00	\$ 374	\$ 30
99205	Office o/p new hi 60-74 min	0	\$ 285.00	\$ -	\$ 257.00	\$ -	\$ -
99211	Off/op est may x req phy/qhp	5	\$ 28.00	\$ 140	\$ 30.00	\$ 150	\$ 10
99212	Office o/p est sf 10-19 min	11	\$ 55.00	\$ 605	\$ 55.00	\$ 605	\$ -
99213	Office o/p est low 20-29 min	604	\$ 92.00	\$ 55,568	\$ 93.75	\$ 56,625	\$ 1,057
99214	Office o/p est mod 30-39 min	326	\$ 134.00	\$ 43,684	\$ 132.50	\$ 43,195	\$ (489)
99215	Office o/p est hi 40-54 min	98	\$ 180.00	\$ 17,640	\$ 207.00	\$ 20,286	\$ 2,646
99381	Init pm e/m new pat infant	21	\$ 138.00	\$ 2,898	\$ 130.00	\$ 2,730	\$ (168)
99382	Init pm e/m new pat 1-4 yrs	4	\$ 124.00	\$ 496	\$ 120.00	\$ 480	\$ (16)
99383	Prev visit new age 5-11	2	\$ 151.00	\$ 302	\$ 148.00	\$ 296	\$ (6)
99384	Prev visit new age 12-17	5	\$ 170.00	\$ 850	\$ 174.00	\$ 870	\$ 20
99391	Per pm reeval est pat infant	154	\$ 125.00	\$ 19,250	\$ 125.00	\$ 19,250	\$ -
99392	Prev visit est age 1-4	203	\$ 133.00	\$ 26,999	\$ 133.00	\$ 26,999	\$ -
99393	Prev visit est age 5-11	180	\$ 132.00	\$ 23,760	\$ 132.00	\$ 23,760	\$ -
99394	Prev visit est age 12-17	148	\$ 145.00	\$ 21,460	\$ 145.00	\$ 21,460	\$ -
99395	Prev visit est age 18-39	27	\$ 149.00	\$ 4,023	\$ 149.00	\$ 4,023	\$ -

		Annual Code Billing Volume					Given Year Conversion Factor And Non Facility Total						2022 Quantities Applied To Given Year Allowed Amount					
		2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2023	2018	2019	2020	2021	2022	2023
CPT Code		2018	2019	2020	2021	2022	\$ 36.00	\$ 36.04	\$ 36.09	\$ 34.89	\$ 34.61	\$ 33.89						
90460	Im admin 1st/only component	22,393	27,781	29,283	26,872	27,180	0.58	0.47	0.40	0.49	0.49	0.67	\$ 567,512	\$ 460,385	\$ 392,366	\$ 464,713	\$ 460,892	\$ 617,106
90461	Im admin each addl component	18,012	23,674	25,150	22,621	22,819	0.36	0.36	0.36	0.37	0.37	0.30	\$ 295,731	\$ 296,055	\$ 296,470	\$ 294,603	\$ 292,181	\$ 231,982
99213	Office o/p est low 20-29 min	17,246	19,593	11,701	11,340	18,778	2.06	2.09	2.11	2.65	2.66	2.68	\$ 1,392,561	\$ 1,414,391	\$ 1,429,927	\$ 1,736,340	\$ 1,728,562	\$ 1,705,375
96110	Developmental screen w/score	10,129	10,792	11,121	12,181	12,198	0.29	0.28	0.28	0.29	0.31	0.32	\$ 127,346	\$ 123,089	\$ 123,262	\$ 123,432	\$ 130,859	\$ 132,274
99214	Office o/p est mod 30-39 min	9,623	11,271	10,739	13,342	12,142	3.04	3.06	3.06	3.76	3.75	3.79	\$ 1,328,806	\$ 1,339,015	\$ 1,340,892	\$ 1,593,007	\$ 1,575,707	\$ 1,559,427
90471	Immunization admin	12,205	12,706	10,772	11,732	9,946	0.58	0.47	0.40	0.49	0.49	0.60	\$ 207,670	\$ 168,469	\$ 143,579	\$ 170,053	\$ 168,655	\$ 202,225
99177	Ocular instrumnt screen bil		5,686	9,780	9,501	9,017	0.14	0.13	0.13	0.13	0.14	0.14	\$ 45,445	\$ 42,245	\$ 42,305	\$ 40,902	\$ 43,686	\$ 42,779
94760	Measure blood oxygen level	2,432	4,139	3,184	3,885	6,257	0.08	0.07	0.07	0.07	0.07	0.07	\$ 18,020	\$ 15,785	\$ 15,807	\$ 15,283	\$ 15,157	\$ 14,842
96127	Brief emotional/behav assmt	746	3,245	4,587	5,879	6,012	0.18	0.15	0.14	0.14	0.14	0.14	\$ 38,957	\$ 32,500	\$ 30,376	\$ 29,369	\$ 29,127	\$ 28,522
99391	Per pm reeval est pat infant	4,192	5,390	5,683	5,729	5,818	2.81	2.82	2.83	2.89	2.90	2.90	\$ 588,542	\$ 591,285	\$ 594,213	\$ 586,693	\$ 583,883	\$ 571,752
99393	Prev visit est age 5-11	5,432	5,999	5,928	5,746	5,626	2.99	3.00	3.00	3.08	3.07	3.09	\$ 605,576	\$ 608,268	\$ 609,120	\$ 604,630	\$ 597,712	\$ 589,107
99392	Prev visit est age 1-4	4,764	5,121	5,221	5,551	5,594	3.00	3.01	3.01	3.09	3.08	3.10	\$ 604,145	\$ 606,824	\$ 607,675	\$ 603,143	\$ 596,248	\$ 587,651
99394	Prev visit est age 12-17	4,369	4,720	4,899	4,730	4,462	3.28	3.29	3.30	3.37	3.36	3.37	\$ 526,867	\$ 529,053	\$ 531,405	\$ 524,685	\$ 518,827	\$ 509,560
90472	Immunization admin each add	2,435	2,904	2,604	2,739	2,407	0.36	0.36	0.36	0.37	0.37	0.43	\$ 31,194	\$ 31,229	\$ 31,272	\$ 31,075	\$ 30,820	\$ 35,074
99188	App topical fluoride varnish	296	926	1,067	1,437	1,626	0.35	0.35	0.35	0.36	0.35	0.35	\$ 20,487	\$ 20,510	\$ 20,539	\$ 20,425	\$ 19,694	\$ 19,285
92551	Pure tone hearing test air	1,391	1,713	1,504	1,413	1,319	0.35	0.33	0.33	0.34	0.34	0.36	\$ 16,619	\$ 15,687	\$ 15,709	\$ 15,648	\$ 15,519	\$ 16,091
99215	Office o/p est hi 40-54 min	657	902	828	1,041	971	4.10	4.10	4.11	5.25	5.29	5.31	\$ 143,318	\$ 143,475	\$ 144,027	\$ 177,876	\$ 177,758	\$ 174,723
99395	Prev visit est age 18-39	788	995	961	970	926	3.35	3.36	3.38	3.44	3.43	3.45	\$ 111,674	\$ 112,131	\$ 112,956	\$ 111,150	\$ 109,916	\$ 108,259
99212	Office o/p est sf 10-19 min	1,025	1,269	892	565	697	1.24	1.27	1.28	1.63	1.66	1.68	\$ 31,114	\$ 31,901	\$ 32,198	\$ 39,642	\$ 40,040	\$ 39,681
96161	Caregiver health risk assmt		322	623	887	688	0.11	0.09	0.07	0.08	0.08	0.08	\$ 2,724	\$ 2,232	\$ 1,738	\$ 1,921	\$ 1,905	\$ 1,865
99404	Preventive counseling indiv	2	75	281	501	581	3.19	3.21	3.24	3.29	3.31	3.26	\$ 66,721	\$ 67,213	\$ 67,937	\$ 66,698	\$ 66,552	\$ 64,184
99173	Visual acuity screen	7,096	3,661	775	135	512	0.09	0.08	0.08	0.09	0.09	0.09	\$ 1,659	\$ 1,476	\$ 1,478	\$ 1,608	\$ 1,595	\$ 1,562
96372	Ther/proph/diag inj sc/im	322	375	189	381	465	0.58	0.47	0.40	0.41	0.42	0.42	\$ 9,709	\$ 7,876	\$ 6,713	\$ 6,652	\$ 6,759	\$ 6,618
99238	Hosp ip/obs dschrg mgmt 30/<	388	267	440	527	453	2.07	2.06	2.06	2.07	2.08	2.39	\$ 33,757	\$ 33,631	\$ 33,678	\$ 32,720	\$ 32,607	\$ 36,689
99460	Init nb em per day hosp	385	271	436	514	450	2.71	2.71	2.70	2.74	2.75	2.74	\$ 43,902	\$ 43,950	\$ 43,849	\$ 43,023	\$ 42,825	\$ 41,783
99381	Init pm e/m new pat infant	388	390	216	474	427	3.13	3.13	3.13	3.22	3.21	3.23	\$ 48,114	\$ 48,167	\$ 48,234	\$ 47,976	\$ 47,434	\$ 46,738
99211	Off/op est may x req phy/qhp	1,697	1,838	1,023	593	397	0.61	0.64	0.65	0.66	0.68	0.69	\$ 8,718	\$ 9,157	\$ 9,313	\$ 9,143	\$ 9,342	\$ 9,283
90474	Immune admin oral/nasal addl	264	304	219	486	377	0.36	0.36	0.36	0.37	0.37	0.35	\$ 4,886	\$ 4,891	\$ 4,898	\$ 4,867	\$ 4,827	\$ 4,471
17110	Destruct b9 lesion 1-14	410	428	389	338	322	3.18	3.13	3.17	3.33	3.37	3.41	\$ 36,862	\$ 36,322	\$ 36,838	\$ 37,414	\$ 37,553	\$ 37,209
99383	Prev visit new age 5-11	319	378	334	367	317	3.40	3.41	3.42	3.49	3.48	3.50	\$ 38,800	\$ 38,957	\$ 39,126	\$ 38,603	\$ 38,176	\$ 37,598
94640	Airway inhalation treatment	519	577	213	162	297	0.53	0.51	0.50	0.41	0.33	0.27	\$ 5,667	\$ 5,459	\$ 5,359	\$ 4,249	\$ 3,392	\$ 2,717
													\$ 7,180,305	\$ 7,058,327	\$ 6,990,579	\$ 7,655,971	\$ 7,606,442	\$ 7,651,848

- PMI Responsibility Matrix
 - Scheduling Guide
 - Scheduling Reference
- Sample Provider Compensation Model
- Sample Provider Margin Review
- Practice Overhead Calculation
 - Sample Partner/Owner Allocation
- Provider Compensation Model #2
 - Employee Bonus #1
 - Employee Bonus #2
 - Employee Bonus #3
- Practice Valuation Calculation
 - **MCO Rate Grid**
 - **Payor CPT Comparison**

- **MCO Abstraction Worksheet**
- KPI's Explained
- Daily KPI Tracking Sample
- Monthly KPI Tracking Sample
- Labor Tracking Sample
- Vaccine Tracking Sample
- Vaccine Payment Analysis
- Budget Step 1- Revenue
- Budget Step 2- Operating Expenses
- Budgeting Step 3- Provider Expenses
- Budgeting Step 4- Capital Expenses
- Budgeting Step 5- Review
- **Payor Comparison**
- **Payor CPT Review**
- **Payor Compare**
- **Payor Proposal**



https://bit.ly/pmi_spreadsheets

Insurance

The contra proferentem rule is often applied in [contract disputes](#) involving insurance companies that have refused to pay claims. Insurance companies have complete control over the contracts their policyholders sign, and they sometimes include ambiguous language that could allow them to deny claims that policyholders would assume are covered. Insurance companies use experienced and talented attorneys to draft their policy documents, so they may find it difficult to argue that ambiguous language is unintentional.



The Law Offices of
Sanford F. Young P.C.

<https://www.sfyllaw.com/blog/2023/02/how-the-contra-proferentem-rule-is-applied-in-contract-disputes/>

**Contracting Tips and Tricks:
Practice Manager's Perspective**

Kimberly Brennan, MBA, CMPE



Who We Are:

- Medium-sized (and growing!) independent group practice
- 9 physicians, 5 PNP's, 1 Psych NP, ~65 employees total
- Integrated behavioral health - both practice-employed and with 3rd party community agencies
- Always looking for new ways to pull financial levers

Challenges We Faced as of January 2020:

- Outdated, unorganized contracts
- Falling short in P4P incentive programs, despite high quality services and care
- Unresponsive payors. First level negotiation shutdowns.
- Limited experience in contracting/negotiations
- Enrolled in new shared risk contract with limited understanding, poor deficit repayment options



Fast forward 3 years...

Wins we've achieved:

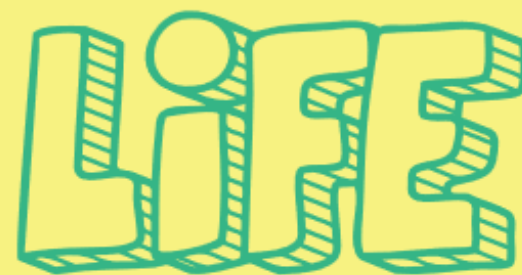
- HUGE success with shared risk VBC program
- Increased most large commercial payer contracts, and still going
- Improved billing department
- Drastically increased confidence in demanding what we deserve!
- Next slide for the big one...






























Changes in profit

2019 vs 2018	7% increase
2020 vs 2019	20% decrease
2021 vs 2020	33% increase
2022 vs 2021	1% increase
2023 vs 2022	Loading...

Data gathering.
Bring your old, dusty contracts to



etrics > Payer Contracts

<input type="checkbox"/> Name	Status	Date modified	Type	Size
 Aetna - Better Health & Commercial	 	4/16/2023 7:59 PM	File folder	
 Amerihealth	 	8/7/2023 8:59 AM	File folder	
 Avmed	 	8/7/2023 8:59 AM	File folder	
 Beacon Health Options - Commercial	 	3/22/2022 12:26 PM	File folder	
 Beacon Health Strategies - Medicaid	 	8/7/2023 8:59 AM	File folder	
 Behavioral Services Network	 	6/14/2022 8:32 AM	File folder	
 CareSource	 	8/7/2023 8:59 AM	File folder	
 Cigna	 	8/7/2023 8:59 AM	File folder	
 Community Care Plan	 	8/7/2023 8:59 AM	File folder	

- House a summary of your critical dates in **one, simple place.**
- **Check it monthly!**



SAVE
A
COPY!



PAYOR CONTRACT MASTER									
LAST UPDATED		9/1/2023							
PRACTICE		High Quality Pediatrics							
	Contract Payor	Orig. Effective Date	Anniversary Date	Days to Anniversary	Term (years)	Term Notice (days)	Notice/Term Due Date	Notice Notes	Reimbu
Examples	Behemoth Payer 1	July 1, 2021	July 1 2024	304	3	90	April 2 2024	Include proposal, quality data, carve out vaccine admin to \$24+/dose	105% of
	Behemoth Payer 2	January 1 2023	January 1 2024	122	1	60	November 2 2023	Include TIN on all pages, proposal must be submitted based on current CMS RBVRS rates	115% of
	Smaller Payer 3	October 1 2015	October 1 2024	396	1	120	June 3 2024	Carve out rates for POC testing	125% of
	Small Payer 4	October 1 2022	October 1 2023	30	1	15	September 16 2023	No changes, but need to ensure no changes proposed by rep	120%
				4/28/1776			0		
				4/28/1776			0		
				4/28/1776			0		
				4/28/1776			0		

Your Basic VBC Toolkit

- Make it clear to physicians and mid-levels that **THIS is where the BONUS pool fills**, and how everyone wins, including patients.
 - Share their data
 - Make appropriate, constructive suggestions for opportunities that do not sacrifice patient care
 - Provide program and coding education and resources.
- Key points for staff:
 - Open slots = Lower practice performance
 - Missed quality opportunities = lower practice performance (Yes, even the date of that annual dental visit)
 - Lower practice performance = fewer opportunities for bonuses.
- Re-purpose and get creative.
 - Slow day at the office? **Anyone** can call a non-engaged member to introduce your practice and transfer to schedulers.
- Pay close, persistent attention.
 - **REQUIRE** monthly performance reviews with program payor reps - regardless of risk status.
 - This is your \$ marriage. Nag when needed. Set calendar reminders to follow up frequently.
- Email is your best friend.
 - It takes approximately 1-3 minutes to remind a contractor you have a term letter on your desk awaiting your signature. and only a few documented, ignored exchanges to evidence non-responsiveness for escalation.
 - Find your best employed stalker. Someone who can scavenge the interwebs for high-level payor contacts (think LinkedIn).
- Alas...know and accept not all employees will care.
 - Handsomely reward those who do.

The purpose of this letter is to initiate renegotiations for the fee schedule for Palm Beach Pediatrics, PA. As you may recall, this contract was renegotiated for a 1-year term (then annual auto-renewing) in 2010. In the effort of timeliness for both parties, we felt it prudent to begin this process in a judicious manner.

We request that [REDACTED] update our current fee schedule to better align with current CMS RBRVS rate, effective beginning June 1, 2022. Please find our detailed proposal enclosed. This increase is less than the medical rate of inflation. As we are sure you are aware, practice expenses increased exponentially over the last two years. The most significant of these increases for our practice were incorporating in-office COVID-19 testing for your members, increased vaccine costs, and increased recruiting expenses incurred to attract and hire high-quality staff.

We realize that [REDACTED] is faced with similar challenges, as recent premium increases suggest for many offerings. To ensure that our practice remains financially healthy and may continue to provide a high level of quality care, we request an increase to allow us the privilege of continuing to serve your members. We appreciate that you recognize our level of quality as a Patient Centered Medical Home. We're happy to report that in 2021, we were also awarded the NCQA's Distinction in Behavioral Health Integration for all locations.

We are open to discussing this matter in person, by phone, or by virtual meeting. If these options are satisfactory, please let me know your preference and I will begin working to arrange a date that works for all parties.

We thank you in advance for your attention, and kindly request a response no later than March 1, 2022. We value our relationship with [REDACTED] and look forward to continuing to work together to serve your membership.



PALM BEACH PEDIATRICS, P.A.

██████████ FEE SCHEDULE PROPOSAL
PROPOSED EFFECTIVE DATE JUNE 1, 2022

Primary Fee Source:

██████████ **Fee Schedule**

Proposed Fee Structure	
FEE SCHEDULE	% Primary Fee Source
Schedule A – ██████████	110%
Schedule B – ██████████	105%
Schedule C – ██████████	110%
Schedule D – ██████████	90%

LAB CARVE OUT PROPOSAL

Primary Fee Source:

2022 CMS 22CABLQ1 Fee Schedule

Proposed Fee Structure	
FEE SCHEDULE	% Primary Fee Source
Schedules A, B, and C as named above	100%
Schedule D – BlueSelect	95%

Re: Contract Termination – [REDACTED] Line of Business

Dear Ms. [REDACTED]:

On behalf of Palm Beach Pediatrics, we would like to provide 90-day notice of terminating our [REDACTED] [REDACTED] line of business contract. Our final date of in-network status should be July 28, 2022. Enclosed is a list of providers and locations affiliated with Palm Beach Pediatrics.

While we appreciate your effort and diligence in assisting us in contract renegotiations, unfortunately the level of payment offered by this line of business remains inadequate to cover operational costs. Regrettably, it is not financially stable for Palm Beach Pediatrics to continue to provide care for members at the level of reimbursement [REDACTED] proposes. We highly value our relationship with [REDACTED] and **remain open to continuing servicing your [REDACTED] membership, should an appropriate fee schedule be presented.**

Thank you for your assistance, and we are available to discuss further should [REDACTED] be open to a more suitable reimbursement schedule.

Sincerely,

Shannon Fox-Levine, MD
President, Physician

Kimberly Brennan, MBA, CMPE
Practice Administrator

Dear Patient/Family:

We are very saddened to report that as of **September 1, 2022 Palm Beach Pediatrics will no longer be an in-network provider with [REDACTED] plans.**

Despite our attempts to come a reasonable, financially viable solution with [REDACTED] they have declined to increase contractual reimbursement at a level that covers the basic, simple costs of providing high-quality care to [REDACTED]. We are pediatricians – this is not a lucrative specialty. However, what [REDACTED] has proposed would require that we would have to significantly downgrade the care provided to these members, and we cannot accept this.

Over the past seven years, Palm Beach Pediatrics has not requested rate increases from [REDACTED]. Due to increasing supply, staffing, and overhead costs, we reached out to [REDACTED] to help with this. Unfortunately, [REDACTED] has failed to propose an appropriate agreement for the [REDACTED] lines of business, so we have made the difficult decision to terminate these contracts.

THIS DOES NOT AFFECT [REDACTED] NETWORKS. If you are unsure of the status of your plan, please contact Member Services at [REDACTED] and request that they check our practice on your specific policy.

What This Means for You

Since [REDACTED] failed to agree to the reasonable terms, after August 31, 2022, PBP will not be considered an in-network provider for [REDACTED]. You may contact the member services line at [REDACTED] for a list of in-network providers, however your child has likely already been assigned to another pediatrician. **On September 1, 2022 [REDACTED] will no longer cover services at Palm Beach Pediatrics at your in network rates if your plan is in the [REDACTED] networks.**

If you are unsure if your plan is [REDACTED] please contact [REDACTED] or send us a portal message - Select Messages - Compose Message - choose "Billing and payments" message type, and we will check your policy and respond as soon as possible.

Can my child still come to Palm Beach Pediatrics for care?

We are happy to continue seeing your child, however you would be charged self-pay rates for all care provided including visit fees, vaccines, lab testing services, etc. at the time of your appointment. **Please remember, the most cost-effective way to receive medical care utilizing your insurance is to use a contracted, in-network provider.** Your specific policy may offer you some reimbursement for out-of-network services, however this is plan-specific

and may not apply to you. Palm Beach Pediatrics will NOT be participating in [REDACTED] network as of September 1, 2022.

Can you see my child prior to September 1st?

Yes, you may still use your in-network insurance benefits for services provided by our offices *through* August 31, 2022. After that date, services would be charged at the self-pay rate. Unfortunately, [REDACTED] has in recent months refused to allow families to select Palm Beach Pediatrics as their child's primary care provider. Much to our dismay, our staff is not able to make these changes for you. For complaints regarding this, please contact [REDACTED] directly.

How do I begin care with another pediatrician?

While we hate to see your family leave our practice, we understand the importance of using your health coverage to pay for medical care. If you choose to transfer care to another pediatrician, please contact our medical records department to arrange a transfer of your child's medical record. You should do this prior to your first visit. We do not want to see your child leave our practice, however we are here to help with your transition of care if needed.

Sincerely,

Kimberly Brennan, MBA, CMPE

Practice Administrator

[https://docs.google.com/spreadsheets/d/1X7WIRBuXOcRdke33Byh2-LlbN5xD2anmR7MQnqnOGVU/edit?usp=drive link](https://docs.google.com/spreadsheets/d/1X7WIRBuXOcRdke33Byh2-LlbN5xD2anmR7MQnqnOGVU/edit?usp=drive_link)

PAYOR CONTRACT MASTER									
LAST UPDATED		9/1/2023							
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				4/28/1776			0		
				4/28/1776			0		
				4/28/1776			0		
				4/28/1776			0		

- **Save a copy!** - This step is what allows you to edit and enter your own data
- Only enter blank fields - Others will auto-populate, including color-coded due dates
 - Red = Notice due in less than 30 days
 - Yellow = Notice due between 31-90 days
 - Green = Notice due in 91+ days

1. Gather all your contracts and construct a spreadsheet that has renewal dates for all of your participating payers
2. Identify your lowest payer and estimate the impact to your practice if you dropped them
3. Identify who in your practice is going to be responsible for doing a CPT comparison of payments quarterly and meet with them to begin the work
4. Recognize and use the power you have to negotiate your worth!

For more information on this subject, see the following publications:

<https://www.resolve.com/pricing/american-academy-of-pediatrics>

RVU/Fee Schedule Calculators:

- <https://chipsblog.pcc.com/free-2023-rvu-calculator>
- <https://chipsblog.pcc.com/free-2022-rvu-calculator>
- <https://chipsblog.pcc.com/free-2021-rvu-calculator>
- <https://chipsblog.pcc.com/free-and-legal-2020-rvu-rbrvs-calculator>
- <https://chipsblog.pcc.com/free-and-legal-2019-rvu/rbrvs-calculator>

For more information on this subject, see the following publications:

Success stories:

- <https://chipsblog.pcc.com/insurance-negotiation-story-175>
- <https://chipsblog.pcc.com/insurance-negotiation-continues>
 - <https://chipsblog.pcc.com/hello-world-3>
- <https://chipsblog.pcc.com/trench-stories-i-or-harnessing-mom-power>
 - <https://chipsblog.pcc.com/trench-stories-ii-or-do-the-math>