

# Deductions Calculator Guide

Axiom Rolling Forecasting

Version 2021.3

The logo for AXIOM, featuring the word "AXIOM" in a bold, white, sans-serif font. The text is enclosed within a thin, light blue rectangular border that is slightly offset from the text, creating a subtle frame effect.

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# Contents

- Chapter 1: Deductions Calculator overview ..... 4
- Chapter 2: Configuring the Deductions Calculator ..... 6
- Chapter 3: Using the Deductions Calculator .....13



# Deductions Calculator overview

The Axiom Rolling Forecasting Deductions Calculator enables you, the Axiom Rolling Forecasting administrator, to forecast reimbursement assumptions using the preferred Net Revenue approach. There are configurable options to include payor-level detail using Inpatient, Outpatient or Physician displays. Additionally, there are forecasting options for Administrative Adjustments, Bad Debt and Charity assumptions.

## ► How the Deductions Calculator works

The Deductions Calculator uses a setup utility to assist with configuring default and exception-based options that control the content displayed in the calculator. The setup utility includes payor-level configuration as well as inpatient and outpatient selections.

Upon opening the Deductions Calculator, a Refresh Variables dialog prompts you to select the RF deductions group and Scenario (within your security permissions). Based on your selections, the Associated Axiom Queries populate the calculator, after which you can begin editing as desired.

When you save your edits, the Deductions Calculator posts all identified content to two sets of tables. The RF\_Deductions\_20xx tables will contain manually entered data such as Patient Days by payor if not in your organization's history. These tables also save user elected changes such as drop-down selections or edits to blue cells.

The Deductions Calculator also saves the results of the deduction values to the RF\_Forecast\_20xx tables using the DType of "DeductionResult." This is the reporting code needed to display deduction content to reports like the Consolidated Summary report.

File Processing is also included beginning with the 2021.3 release. For more information on file processing for the Deductions Calculator, please see that topic in the online help.

## Who can use the calculator and configuration utility

Both the Rolling Forecasting Admin and Rolling Forecasting Analyst roles have configured permissions to both the Deductions Model Configuration Utility and the Deductions Calculator. These permissions allow Save Data Only.

## Accessing the Deductions Calculator

To open the setup utility, from the RF Admin task pane, under **Other Calculators**, double-click **Deductions Model Configuration Utility**. To open the calculator, double-click **Deductions Model**.

**Rolling Forecast Deductions Calculator**  
 KHA Health  
 For the Period Ending January 31, 2020  
 Deductions RFGroup: EMC\_Deductions  
 Drivers RFPlanGroup: EMC

Scenario: Default  
 Save to Database?:   
 Default Forecast Method:

**Data Selection / Forecast Method**

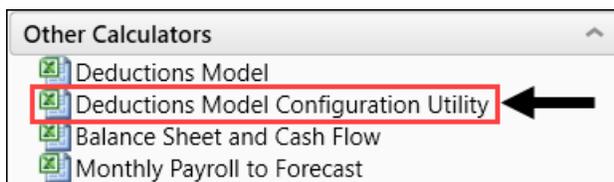
	FY 2020 Dec 2019 Actual	FY 2020 Oct - Dec Qtr2 Actual	Current Period FY 2020 Jan 2020 Actual	FY 2020 Feb 2020 Forecast	FY 2020 Mar 2020 Forecast	FY 2020 Jan - Mar Qtr3 Projected	FY 2020 Apr 2020 Forecast	FY 2020 May 2020 Forecast	FY 2020 Jun 2020 Forecast
<b>Patient Volume</b>									
<b>Inpatient Volume</b>									
Inpatient Volume EMC_K_Discharges	179	553	195	0	0	195	0	0	0
Check Total Discharges by Payor	0	0	0			0			
<b>% Discharges by Payor</b>									
Medicare	0.00%	0.00%	0.00%	100.00%	100.00%	0.00%	100.00%	100.00%	100.00%
Medicaid	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Commercial	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Self Pay	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Blue Cross	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
<b>Total % Discharges by Payor</b>	<b>0.00%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>
<b>Discharges by Payor</b>									
Medicare	0	0	0	0	0	0	0	0	0
Medicaid	0	0	0	0	0	0	0	0	0
Commercial	0	0	0	0	0	0	0	0	0
Self Pay	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0
Blue Cross	0	0	0	0	0	0	0	0	0
<b>Total Discharges by Payor</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

*Deductions Calculator example*

# Configuring the Deductions Calculator

Use the Deductions Model Configurations Utility to configure the Deductions Calculator.

Launch the Deductions Model Configuration Utility from the menu.



The utility opens as read-only but will save as Save Data Only.

## ► About the RF Deductions Setup utility

The configuration utility has two primary sections: the top section, which is used to configure options for each RF deductions group; and the bottom section, which is used to map the RF Payor codes to the FP Payor codes, and for assigning whether or not the payor code is active.

RF Deductions Group		Payor Category	Include/Exclude from Deductions Model								
	Use Discharges or Admissions		Discharges / Admissions	Inpatient Days	Inpatient Revenue	Inpatient Deductions	Outpatient Visits	Outpatient Revenue	Outpatient Deductions	CMI Weighted Discharges	CMI Weights
Global	Discharges		Include	Include	Include	Include	Include	Include	Include	Include	Include
EHS_Deductions	UseGlobal		UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EMA_InternalMedicine	UseGlobal		UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EMC_BalanceSheet	UseGlobal		UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EMC_Deductions	UseGlobal		UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EPG_Clinic	UseGlobal		UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
Test_Deductions	UseGlobal		UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
Administrative Adjustments, Charity, and Bad Debt Setup		Payor Description	Administrative Adjustments	Charity	Bad Debt						
	Payor Code		1096	1097	1098						
Global			Total	Total	Total						
EHS_Deductions			UseGlobal	UseGlobal	UseGlobal						
EMA_InternalMedicine			UseGlobal	UseGlobal	UseGlobal						
EMC_BalanceSheet			UseGlobal	UseGlobal	UseGlobal						
EMC_Deductions			UseGlobal	UseGlobal	UseGlobal						
EPG_Clinic			UseGlobal	UseGlobal	UseGlobal						
Test_Deductions			UseGlobal	UseGlobal	UseGlobal						

Top section

RF Deductions Setup					
Standard Payor Setup					
Payor Description	Payor Code		RF to FP Mapping	Active	Revenue / Payor Grouping
Medicare	1001		1	TRUE	0
Medicaid	1002		2	TRUE	0
Commercial	1003		3	TRUE	0
Self Pay	1004		5	TRUE	0
Other	1005		7	TRUE	0
Blue Cross	1006		6	TRUE	0
Managed Care	1007		4	FALSE	0
Test	1008		8	FALSE	0
Not Configured	1009		9	FALSE	0
Not Configured	1010		10	FALSE	0
Not Configured	1011		11	FALSE	0
Not Configured	1012		12	FALSE	0
Not Configured	1013		13	FALSE	0
Not Configured	1014		14	FALSE	0
Not Configured	1015		15	FALSE	0
Not Configured	1016		16	FALSE	0
Not Configured	1017		17	FALSE	0
Not Configured	1018		18	FALSE	0

Bottom section

► Configuring RF deductions groups

This section of the utility is used to configure the view of the Deductions Calculator when it is opened. This file can be opened simultaneously by more than one user so the configuration of the user's experience can be tailored uniquely if needed.

Note that the first row is labeled Global. This is the default setting for the calculator, so whatever is configured here will be used unless you have set up RF deductions groups.

RF Deductions Setup											
RF Deductions Group	Payor Category Use Discharges or Admissions	Include/Exclude from Deductions Model									
		Discharges / Admissions	Inpatient Days	Inpatient Revenue	Inpatient Deductions	Outpatient Visits	Outpatient Revenue	Outpatient Deductions	CMI Weighted Discharges	CMI Weights	
Global	Discharges	Include	Include	Include	Include	Include	Include	Include	Include	Include	Include
EHS_Deductions	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EMA_InternalMedicine	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EMC_BalanceSheet	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EMC_Deductions	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EPG_Clinic	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
Test_Deductions	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal

Configuration options include the following:

- **Use Discharges/Admissions:** Drop-down options to assign if discharges or admissions will be used. This is used to query the related deductions RfCode in the Deductions Calculator.

RF Deductions Setup			
RF Deductions Group	Payor Category	Include/Exclude from Deductions Model	
	Use Discharges or Admissions	Discharges / Admissions	Inpatient Days
Global	Discharges	Include	Include
EHS_Deductions	UseGlobal	UseGlobal	UseGlobal
EMA_InternalMedicine	UseGlobal	UseGlobal	UseGlobal
EMC_BalanceSheet	UseGlobal	UseGlobal	UseGlobal
EMC_Deductions	UseGlobal	UseGlobal	UseGlobal
EPG_Clinic	UseGlobal	UseGlobal	UseGlobal
Test_Deductions	UseGlobal	UseGlobal	UseGlobal

- In the following rows, each row can be either included or excluded from display in the calculator.

**Example 1:** The administrator elects to exclude CMI Weighted Discharges and CMI Weights from displaying. Setting to Exclude will invoke the hide logic for that section.

RF Deductions Setup										
RF Deductions Group	Payor Category	Include/Exclude from Deductions Model								
	Use Discharges or Admissions	Discharges / Admissions	Inpatient Days	Inpatient Revenue	Inpatient Deductions	Outpatient Visits	Outpatient Revenue	Outpatient Deductions	CMI Weighted Discharges	CMI Weights
Global	Discharges	Include	Include	Include	Include	Include	Include	Include	Exclude	Exclude
EHS_Deductions	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EMA_InternalMedicine	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal
EMC_BalanceSheet	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal

- **Administrative/Charity/BadDebt:** These three sections can be configured to display as separate sections for InPatient and OutPatient or combined into one section as Total.

Administrative Adjustments, Charity, and Bad Debt Setup			
RF Deductions Group	Payor Description	Payor Code	
Global	Administrative Adjustments	1096	1097
	Charity		1098
	Bad Debt		
	Total	Total	Total
EHS_Deductions	Total	Total	Total
EMA_InternalMedicine	IP/OP	IP/OP	IP/OP
EMC_BalanceSheet	Total	Total	Total
EMC_Deductions	Total	Total	Total
EPG_Clinic	UseGlobal	UseGlobal	UseGlobal
Test_Deductions	UseGlobal	UseGlobal	UseGlobal

► **Configuring RF deductions group exceptions**

After you have configured the Global column, the settings for each row can be applied to additional RF deductions groups. If the settings will be identical to Global, then UseGlobal can be assigned, and the Deductions Calculator will open with the global settings.

**NOTE:** Each individual row of an RF deductions group can be configured to use global or assigned an alternate option. This provides the widest array of options for administrators.

RF Deductions Setup						
RF Deductions Group		Include/Exclude from Deductions Model				
	Payor Category Use Discharges or Admissions	Discharges / Admissions	Inpatient Days	Inpatient Revenue	Inpatient Deductions	Outpa Vis
Global	Discharges	Include	Include	Include	Include	Incl
EHS_Deductions	UseGlobal	Include	UseGlobal	UseGlobal	UseGlobal	UseC
EMA_InternalMedicine	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseC
EMC_BalanceSheet	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseC
EMC_Deductions	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseC
EPG_Clinic	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseGlobal	UseC
Test_Deductions	UseGlobal	Exclude	Exclude	Exclude	Exclude	Exc

Administrative Adjustments, Charity, and Bad Debt Setup				
	Payor Description	Administrative Adjustments	Charity	Bad Debt
	Payor Code	1096	1097	1098
Global		Total	Total	Total
EHS_Deductions		Total	Total	Total
EMA_InternalMedicine		IP/OP	IP/OP	IP/OP
EMC_BalanceSheet		Total	Total	Total
EMC_Deductions		Total	Total	Total
EPG_Clinic		UseGlobal	UseGlobal	UseGlobal
Test_Deductions		UseGlobal	UseGlobal	UseGlobal

AQ1 of the setup utility uses a Drillable query to bring in a row for every RF deductions group. However, not all may be used in the Deductions Calculator.

Worksheet Settings for Deductic ? ^

**Axiom Queries** ? v

Query Name: AQ1: Setup [edit] [add] [refresh]

Active  Horizontal  Drillable

Primary Table: RFGROUP [grid]

Sum By: RFGGroup.DeductionsMapping [grid]

Data Filter: RFGGroup.DeductionsMapping NOT IN ('NA') [filter]

Data Sort: RFGGroup.DeductionsMapping [grid]

Sheet Sort: [input]

> Control Rows/Columns

> Refresh Settings

Preview Data

## RF Deductions Setup

RF Deductions Group		Payor Category Use Discharges or Admissions
Global		Discharges
EHS_Deductions		UseGlobal
EMA_InternalMedicine		UseGlobal
EMC_BalanceSheet		UseGlobal
EMC_Deductions		UseGlobal
EPG_Clinic		UseGlobal
Test_Deductions		UseGlobal

**Administrative Adjustments, Charity, and Bad Debt Setup**

	Payor Description

## ► Configuring Standard Payor Setup

Rolling Forecasting shares the Payor dimension with Financial Planning. Where Financial Planning uses the reserved codes from 1 to 99, Rolling Forecasting owns the range from 1000 to 1099. Selected codes are reserved for system use and cannot be modified by administrators. Those codes are as follows:

1000	Unassigned/not applicable
1001	Medicare
1096	Administrative Adjustments
1097	Charity
1098	Bad Debt

1002	Medicaid	Gov
1003	Commercial	Fill in
1004	Self Pay	Fill in
1005	Other	Fill in
1006	Blue Cross	Fill in
1007	Managed Care	Fill in
1008	Test	Fill in
1009	Not Configured	Fill in
1010	Not Configured	Fill in
1011	Not Configured	Fill in

Data Type		Integer	String	String	String	String
String Length			100	25	25	25
Description	Payor	Description	Type			
Delete Row	PAYOR	Description	ENUFF	Type	Revenue	Balance
	207	Health Plan Group 7	Fill In	Fill In	HealthPlan	
	208	Health Plan Group 8	Fill In	Fill In	HealthPlan	
	209	Health Plan Group 9	Fill In	Fill In	HealthPlan	
	210	Health Plan Group 10	Fill In	Fill In	HealthPlan	
	299	Undefined	Undefined	Undefined	HealthPlan	
	1000	Unassigned/not applicable		NA		
	1001	Medicare		Gov		
	1002	Medicaid		Gov		
	1003	Commercial		Fill In		
	1004	Self Pay		Fill In		
	1005	Other		Fill In		
	1006	Blue Cross		Fill In		
	1007	Managed Care		Fill In		
	1008	Test		Fill In		
	1009	Not Configured		Fill In		
	1010	Not Configured		Fill In		

You can define all the other codes using any description by entering the desired text in the editable blue Payor Description field (see following screenshot).

If you plan to integrate to Financial Planning, you can select the folder icon to assign the RF Payor code to the desired Financial Planning payor code (e.g., ...1003 to 3).

The **Active** column is set to True/False by the administrator and is used to inform the related AQs which payors to query into the Deductions Calculator as well and Plan Files. Setting this option to **True** allows the payor data to be queried, while selecting **False** will suppress that data.

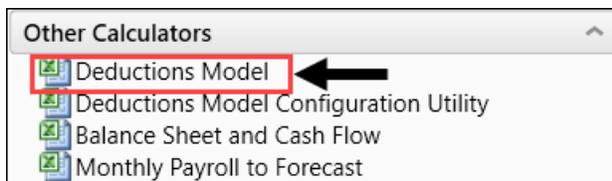
Standard Payor Setup			RF to FP Mapping	Active	Revenue / Payor Grouping
Payor Description	Payor Code				
Medicare	1001		1	TRUE	0
Medicaid	1002		2	TRUE	0
Commercial	1003		3	TRUE	0
Self Pay	1004		5	TRUE	0
Other	1005		7	TRUE	0
Blue Cross	1006		6	TRUE	0
Managed Care	1007		4	FALSE	0
Test	1008		8	FALSE	0
Not Configured	1009		9	FALSE	0
Not Configured	1010		10	FALSE	0
Not Configured	1011		11	FALSE	0
Not Configured	1012		12	FALSE	0

To commit your configurations to the Payor table, click **Save**.

# Using the Deductions Calculator

**IMPORTANT:** If you are an administrator with read/write permissions, take care to use Save only if you intend to save results. Failure to do so will also save the current filtered data in the Deductions Calculator. To test if this has occurred, open the file with Open Without Refresh option to see if filtered data exists. If it does, then contact Syntellis support to have the data within each AQS start/stop tag deleted and the file resaved as Save.

To open the Deductions Calculator, in the **RF Admin** task pane under **Other Calculators**, double-click **Deductions Model**.

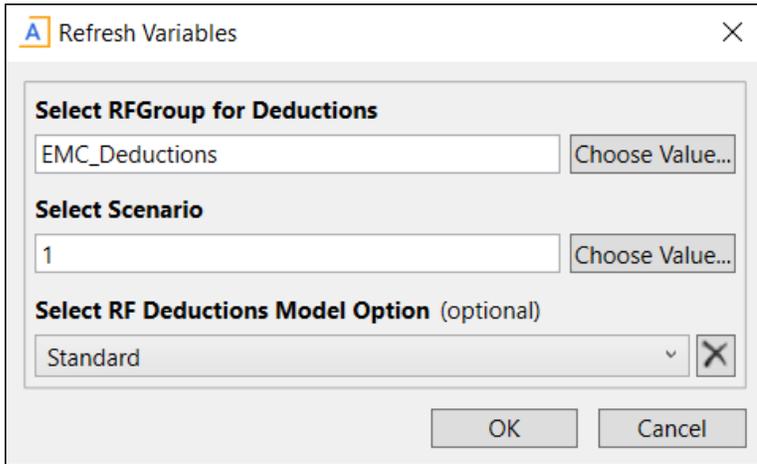


## ► Select Refresh Variables

Upon open, you will be prompted for the following refresh variables:

- **Select RF deductions group:** Select the RF deductions group used to post the deductions to when the data summarization was processed for Actuals. The deductions group is a special RFGROUP that you create in the RFGROUP dimension table. You use the RF deductions group to indicate which RFGROUPs are to be included when processing the Deductions Calculator. You can create as many special RF deductions groups as needed, but only one such group can be used per RFGROUP at the time of processing.
- **Select Scenario:** This populates to the default scenario configured by the administrator. In most cases, the default will be the desired selection.

- **Select RF Deductions Model Option (optional):** This is an alternate configuration to present data in a format more consistent with outpatient reporting. Options are:
  - **Standard:** Displays all sections of the model for Inpatient and Outpatient data.
  - **Physician Only:** Hides and deactivates AQs for Inpatient leaving only Outpatient related sections of the model visible.



► Calculator options by section

This section explains the options in each main section of the calculator.

Model Header

The header information of the report identifies the RF deductions group and the Drivers RFPlanGroup.

Time periods display across the top with Excel expand/collapse features to control the view of the data. While this is a monthly model, you can collapse the columns to a quarterly view to reduce the viewable area.

There are two green selection options within the header:

- **Save to Database?:** Options are **Save** and **Do Not Save**. If you are only validating and testing and not ready to commit records to the datatables, then select **Do Not Save**. When ready to save records, select **Save**.

- Default Forecast Method:** Many rows within the model can use various forecast methods as noted in the image below. Using Default will reference the Forecast Method selected in the header. For example, if the header section is set to **3 Month Avg**, then any row selection set to Default will use **3 Month Avg** forecast method.

Rolling Forecast Deductions Calculator		Current Period									
		FY 2020	FY 2020	FY 2020	FY 2020	FY 2020	FY 2020	FY 2020	FY 2020	FY 2020	FY 2020
		Dec 2019	Oct - Dec 2019	Jan 2020	Feb 2020	Mar 2020	Jan - Mar 2020	Apr 2020	May 2020	Jun 2020	Jul 2020
		Actual	Actual	Actual	Forecast	Forecast	Projected	Forecast	Forecast	Forecast	Forecast
SAVE	Data Selection / Forecast Method										
Last Month											

Patient Volume	
Inpatient Volume	Admissions
Inpatient Volume EMC Health_K_Admissions - per Plan File	K_Admissions_G
<b>% Admissions by Payor</b>	
Medicare	9 Month Avg
Medicare Advantage	LastSaved
Medicaid	6 Month Avg
Contracts and Commercial	Default
Health Network	Default
Health Plans	Default
Self Pay	Default
Others	Default
<b>Total % Admissions by Payor</b>	
<b>Admissions by Payor</b>	S_Admits

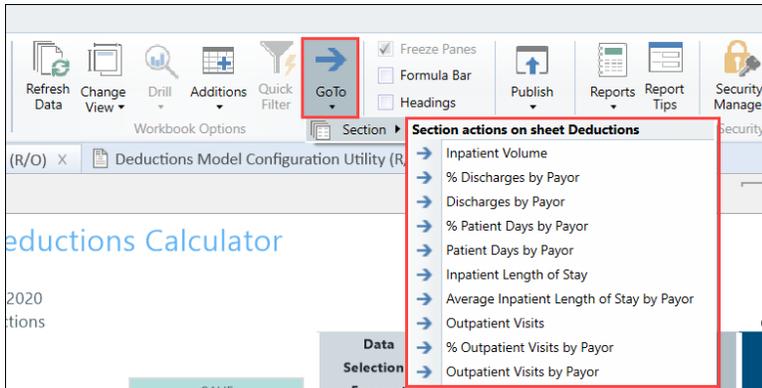
The Deduction Calculator is organized into sections from statistics to gross charges to deductions. There are also summary sections of gross charges as well as the detailed blocks for payor-level deductions. To quickly get to the desired section, use the Main ribbon tab's GoTo navigation feature: in the Main ribbon tab's **Workbook Options** section, click **GoTo** and then select the desired section.

The screenshot shows the 'MAIN' ribbon tab with the 'Workbook Options' section expanded. The 'GoTo' button is highlighted with a red box. A dropdown menu is open, listing various sections of the model. The sections listed include:

- Inpatient Volume
- % Discharges by Payor
- Discharges by Payor
- % Patient Days by Payor
- Patient Days by Payor
- Inpatient Length of Stay
- Average Inpatient Length of Stay by Payor
- Outpatient Visits
- % Outpatient Visits by Payor
- Outpatient Visits by Payor
- Equivalent Patient Days (EQPD)
- Summary - Patient Revenue
- Inpatient Gross Revenue by Payor
- Outpatient Gross Revenue by Payor
- Inpatient Deductions by Payor
- Outpatient Deductions by Payor
- Medicare
- Medicaid
- Commercial
- Self Pay
- Other
- Blue Cross
- Administrative and Other Adjustments
- Charity Care
- Bad Debt
- CMI Discharges by Payor
- CMI Weights by Payor

## Statistics

This section contains main statistics by payor that are leveraged in the model to calculate gross and net metrics within the detailed deduction calculation methods blocks.



- **Admissions/Dischargers:** From the green drop-down, select the RfCode used to post admission/discharge to the RF\_Forecast\_20xx data tables for Actuals. The green drop-down is populated from the RfCode dimension using a data filter that includes any RfCode that has %DISCH% in the name. The total admissions will come in on the top line.
- If Actuals are posted at the payor level, the payor detail is displayed in the Admissions by Payor section and percentages by payor calculated from historical data. In this case, the Data Selection will be set to **History**.

Rolling Forecast Deductions Calculator				Current Period					
KHA Health For the Period Ending January 31, 2020 Deductions RfGroup: EMC_Deductions Drivers RfPlanGroup: EMC Scenario: Default Save to Database? <input type="checkbox"/> <span>SAVE</span> Default Forecast Method: <span>Last Month</span>				FY 2020 Dec 2019 Actual	FY 2020 Oct - Dec Qtr2 Actual	FY 2020 Jan 2020 Actual	FY 2020 Feb 2020 Forecast	FY 2020 Mar 2020 Forecast	FY 2020 Jan - Mar Qtr3 Projected
<b>Patient Volume</b>									
<b>Inpatient Volume</b>		<b>Discharges</b>							
Inpatient Volume EMC_K_Discharges		K_Discharges		179	553	195	0	0	15
Check Total Discharges by Payor				0	0	0			
<b>% Discharges by Payor</b>									
Medicare				0.00%	0.00%	0.00%	100.00%	100.00%	0.00%
Medicaid		9 Month Avg		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Commercial		Last Saved		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Self Pay		6 Month Avg		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other		Default		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Blue Cross		Default		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
<b>Total % Discharges by Payor</b>				0.00%	0.00%	0.00%	100.00%	100.00%	0.00%
<b>Discharges by Payor</b>									
Medicare		\$_Disch		0	0	0	0	0	0
Medicaid				0	0	0	0	0	0
Commercial				0	0	0	0	0	0
Self Pay				0	0	0	0	0	0
Other				0	0	0	0	0	0
Blue Cross				0	0	0	0	0	0

- If Actuals are posted to a single RFCode for admissions, then you can use the blue input cells to enter admissions by payor. This is useful so that the detailed deduction calculation methods can use payor data.

**IMPORTANT:** If entering payor data manually, change the Data Selection from **History** to **Last Saved**. This saves the manually entered payor data to the RF\_Deductions\_20xx tables so that these values can be retrieved and you do not lose your work.

Patient Volume			
Inpatient Volume		Admissions	
Inpatient Volume EMC Health_K_Admissions - per Plan File	K_Admissions_G	1,177	1,107
<b>% Admissions by Payor</b>			
Medicare		15.63%	18.16%
Medicare Advantage	9 Month Avg	9.18%	10.21%
Medicaid	LastSaved	21.16%	22.22%
Contracts and Commercial	6 Month Avg	36.02%	33.88%
Health Network	Default	5.86%	6.96%
Health Plans	Default	1.44%	1.17%
Self Pay	Default	3.91%	3.25%
Others	Default	6.80%	4.16%
<b>Total % Admissions by Payor</b>		<b>100.00%</b>	<b>100.00%</b>
<b>Admissions by Payor</b>			
	S_Admits		
Medicare		184	201
Medicare Advantage		108	113
Medicaid		249	246
Contracts and Commercial		424	375
Health Network		69	77
Health Plans		17	13
Self Pay		46	36
Others		80	46

What was described above for Admissions/Discharges is the same for the **Patient Day** and **Visits/Registration** sections of the model.

### Rolling Forecast Deductions Calculator

KHA Health  
 For the Period Ending January 31, 2020  
 Deductions RFGGroup: EMC\_Deductions  
 Drivers RFPPlanGroup: EMC  
 Scenario: Default  
 Save to Database?   
 Default Forecast Method:

			Current Period		
			FY 2020 Dec 2019 Actual	FY 2020 Oct - Dec Actual	FY 2020 Jan 2020 Actual
<b>Total Discharges by Payor</b>			0	0	0
<b>Patient Days</b>	<b>PatientDays</b>	<b>Calculation Driver:</b>			
Patient Days EMC_K_PatientDays	<input type="button" value="K_PatientDays"/>	<input type="button" value="PatientDays"/>	7,217	22,537	8,006
<b>Check Total Patient Days by Payor</b>			0	0	0
<b>% Patient Days by Payor</b>					
Medicare		<input type="button" value="Default"/>	0.00%	0.00%	0.00%
Medicaid		<input type="button" value="Default"/>	0.00%	0.00%	0.00%
Commercial		<input type="button" value="Default"/>	0.00%	0.00%	0.00%
Self Pay		<input type="button" value="Default"/>	0.00%	0.00%	0.00%
Other		<input type="button" value="Default"/>	0.00%	0.00%	0.00%
Blue Cross		<input type="button" value="Default"/>	0.00%	0.00%	0.00%
<b>Total % Patient Days by Payor</b>			0.00%	0.00%	0.00%
<b>Patient Days by Payor</b>					
	<b>S_IPPD</b>				
Medicare		<input type="button" value="History"/>	0	0	0
Medicaid		<input type="button" value="History"/>	0	0	0
Commercial		<input type="button" value="History"/>	0	0	0
Self Pay		<input type="button" value="History"/>	0	0	0
Other		<input type="button" value="History"/>	0	0	0
Blue Cross		<input type="button" value="History"/>	0	0	0

Patient Days

### Rolling Forecast Deductions Calculator

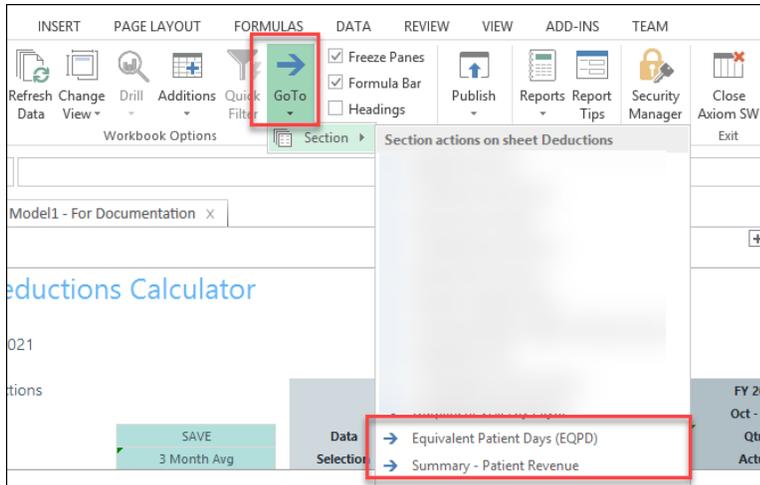
KHA Health  
 For the Period Ending January 31, 2020  
 Deductions RFGGroup: EMC\_Deductions  
 Drivers RFPPlanGroup: EMC  
 Scenario: Default  
 Save to Database?   
 Default Forecast Method:

			Current Period					
			FY 2020 Dec 2019 Actual	FY 2020 Oct - Dec Qtr2 Actual	FY 2020 Jan 2020 Actual	FY 2020 Feb 2020 Forecast	FY 2020 Mar 2020 Forecast	FY 2020 Jan - Mar Qtr3 Projected
<b>Outpatient Visits</b>	<b>OPVisits</b>							
Outpatient Visits EMC_K_Visits	<input type="button" value="K_Visits"/>		406	1,255	443	443	443	1,329
<b>Check Total Outpatient Visits by Payor</b>			0	0	0			886
<b>% Outpatient Visits by Payor</b>								
Medicare		<input type="button" value="Default"/>	0.00%	0.00%	0.00%	100.00%	100.00%	100.00%
Medicaid		<input type="button" value="Default"/>	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Commercial		<input type="button" value="Default"/>	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Self Pay		<input type="button" value="Default"/>	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other		<input type="button" value="Default"/>	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Blue Cross		<input type="button" value="Default"/>	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
<b>Total % Outpatient Visits by Payor</b>			0.00%	0.00%	0.00%	100.00%	100.00%	100.00%
<b>Outpatient Visits by Payor</b>								
	<b>S_OPVisits</b>							
Medicare		<input type="button" value="History"/>	0	0	0	443	443	886
Medicaid		<input type="button" value="History"/>	0	0	0	0	0	0
Commercial		<input type="button" value="History"/>	0	0	0	0	0	0
Self Pay		<input type="button" value="History"/>	0	0	0	0	0	0
Other		<input type="button" value="History"/>	0	0	0	0	0	0
Blue Cross		<input type="button" value="History"/>	0	0	0	0	0	0

Visits/Registrations

## Equivalent Patient Days and Summary Patient Revenue

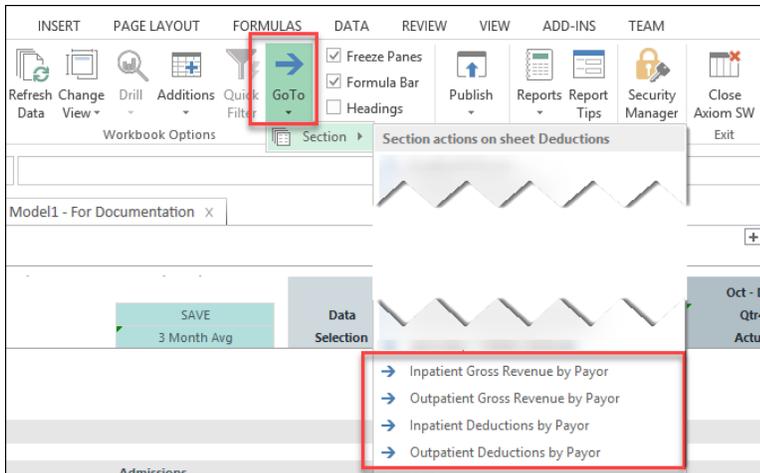
These two sections contain summary information and common metric calculations. These values are useful for data validation and are also used when computing selected contractual values.



Rolling Forecast Deductions Calculator		FY 2020		FY 2020		FY 2021		FY 2021		Current Period		FY 2021		FY 2021	
		December	Oct - Dec	January	February	March	Jan - Mar	April	Forecast			Actual	Forecast		
		2020	2020	2021	2021	2021	2021	2021	2021			2021	2021		
<b>Total Outpatient Visits by Payor</b>		9,936	29,330	9,717	9,221	10,983	29,921	6,588							
<b>Equivalent Patient Days (EQPD)</b>															
Equivalent Patient Day Factor		0.68	0.67	0.69	0.71	0.71	0.70	0.87							
Patient Days		4,950	13,591	4,903	4,221	4,788	13,012	24,901							
Outpatient EQPD		6,751	18,900	6,666	6,546	7,795	21,058	5,703							
Total Equivalent Patient Days		11,701	33,181	11,469	10,767	12,583	34,870	30,503							
Total Adjusted Admissions		2,522	7,495	2,340	2,388	2,859	7,584	1,144							
<b>Summary - Patient Revenue</b>															
<b>Inpatient Revenue</b>		76,184,152	206,797,909	66,396,738	64,247,695	71,501,505	202,145,938	276,833,141							
Inpatient Rate Increase from Driver table								0.00%							
Average Charge per Admissions		71,400	67,361	67,752	68,641	65,718	67,292	297,670							
Average Charge per Patient Day		15,391	15,216	13,824	15,221	14,933	14,636	11,162							
<b>Inpatient Reimbursement</b>		21,246,391	55,962,157	15,899,324	15,325,261	18,019,166	49,242,751	21,776,706							
Average Net per Admissions		19,912	18,239	16,223	16,373	16,562	18,392	23,416							
Average Net per Patient Day		4,292	4,118	3,310	3,631	3,763	3,565	878							
<b>Outpatient Revenue</b>		103,910,395	298,078,807	92,152,544	99,632,856	116,405,632	308,191,032	63,652,994							
Outpatient Rate Increase from Driver table								0.00%							
Average Charge per Visit		10,458	10,163	9,484	10,805	10,599	10,300	9,662							
<b>Outpatient Reimbursement</b>		23,909,073	68,465,173	21,669,991	23,782,035	26,326,411	71,770,437	15,681,353							
Average Net per Visit		2,406	2,234	2,230	2,179	2,297	2,399	2,411							
Net Reimbursement		45,155,464	124,427,331	37,568,315	39,107,296	44,345,577	121,021,188	37,658,059							
Net Reimbursement % of Gross Revenue		25.07%	24.65%	23.70%	23.66%	23.60%	23.71%	11.06%							

## Gross Revenue by Payor – Inpatient and Outpatient

These two are similar to the statistics section where the gross revenue by payor can be brought in via query from the forecast data tables if Actuals were posted by payor.



If gross revenue is not by payor, then use the blue input fields to manually enter by payor.

**IMPORTANT:** If entering payor data manually, change the Data Selection from **History** to **Last Saved**. This will save the manually entered payor data to the RF\_Deductions\_20xx tables so that these values can be retrieved and you so that you do not lose your work.

Rolling Forecast Deductions Calculator				Current Period							
EMC Health For the Period Ending March 31, 2021 RFPGroup: EMC Health Deductions RFGGroup: EMC_Deductions Scenario: Baseline Save to Database? Default Forecast Method:				FY 2020	FY 2020	FY 2021	FY 2021	FY 2021	FY 2021	FY 2021	FY 2021
SAVE 3 Month Avg Data Selection Forecast Method				December 2020 Actual	Oct - Dec Qtr4 Actual	January 2021 Actual	February 2021 Actual	March 2021 Actual	Jan - Mar Qtr1 Actual	April 2021 Forecast	
<b>Outpatient Reimbursement</b>				23,909,073	68,465,173	21,669,991	23,782,035	26,326,411	71,778,437	15,881,353	
Average Net per Visit				2,406	2,334	2,230	2,579	2,397	2,399	2,411	
Net Reimbursement				45,155,464	124,427,331	37,568,315	39,107,296	44,345,577	121,021,188	37,658,059	
Net Reimbursement % of Gross Revenue				25.07%	24.65%	23.70%	23.86%	23.60%	23.71%	11.06%	
<b>Inpatient Gross Revenue by Payor</b> R_PTRev_IP				Compute							
Medicare	History	19,506,936	43,961,495	14,554,758	13,835,989	15,881,144	44,271,891	57,456,301			
Medicare Advantage	History	10,086,756	30,873,894	10,257,364	9,935,656	13,008,929	33,199,948	46,375,928			
Medicaid	History	9,624,316	28,732,901	12,212,860	10,300,493	10,231,961	32,745,314	52,904,650			
Contracts and Commercial	History	27,472,262	71,781,710	19,859,093	20,105,258	21,675,939	61,640,290	78,182,358			
Health Network	History	2,359,129	7,729,071	2,063,585	1,767,054	2,565,032	6,395,671	9,084,872			
Health Plans	History	3,394,383	9,206,977	2,701,363	3,594,438	1,503,296	7,999,097	10,182,246			
Self Pay	History	523,879	3,171,691	1,114,840	986,176	849,388	2,950,403	5,395,985			
Others	History	3,216,502	11,340,171	3,632,875	3,722,632	5,787,816	13,143,324	17,250,802			
<b>Total Inpatient Gross Revenue by Payor</b>				76,184,152	206,797,909	66,396,738	64,247,695	71,501,505	202,145,938	276,833,141	
<b>Outpatient Gross Revenue by Payor</b> R_PTRev_OP				Compute							
Medicare	History	24,690,307	70,005,279	22,688,641	24,663,928	29,349,626	76,702,194	15,127,405			
Medicare Advantage	History	15,418,715	43,320,288	14,528,458	15,326,167	19,368,664	49,223,289	9,606,606			
Medicaid	History	11,840,321	34,406,787	10,935,422	12,465,675	13,203,139	36,602,237	8,072,805			
Contracts and Commercial	History	34,848,360	96,918,013	27,676,076	30,646,387	36,251,190	94,573,654	19,770,139			
Health Network	History	5,026,569	15,403,865	4,264,990	4,424,108	5,025,570	13,714,667	3,194,390			
Health Plans	History	2,064,435	6,491,318	1,793,711	2,473,383	2,526,576	6,793,670	1,494,040			
Self Pay	History	1,225,775	3,205,672	1,549,488	1,100,917	996,764	3,647,168	1,268,507			
Others	History	8,795,913	28,327,586	8,715,798	8,534,291	9,784,104	27,034,153	5,118,302			
<b>Total Outpatient Gross Revenue by Payor</b>				103,910,395	298,078,807	92,152,544	99,632,856	116,405,632	308,191,032	63,652,994	

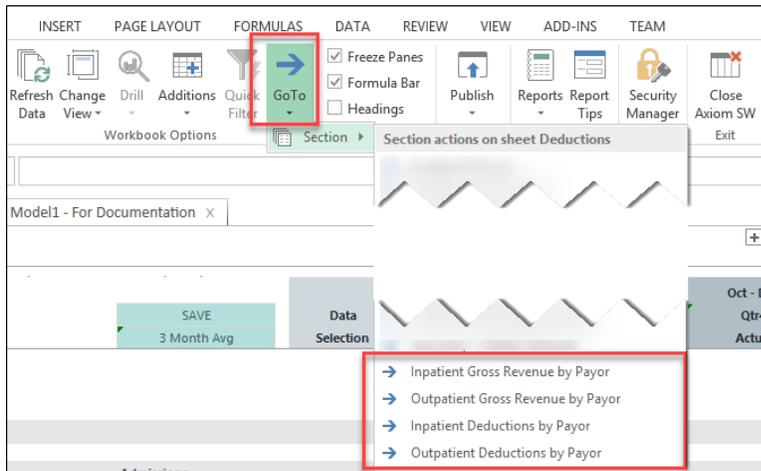
**Using the Compute or Forecast selection:** Located at the top line of the Inpatient and Outpatient revenue sections is a green dropdown box under the Forecast Method column. This option is used for the values in the Forecast columns on gross revenue. The two choices are **Compute** and **Forecast**.

- **Compute:** This is the most common option selected. When used for Inpatient, the forecasted gross charge will be a calculation of Total Gross Charge per Patient Day multiplied by the payor patient days. For example, if the average charge per patient day is \$11,162 and the forecasted patient days for Medicare is 5,147, then  $\$11,162 \times 5,147 = \$57,456,301$  Medicare gross charge for the forecasted month.
- **Forecast:** If set to **Forecast**, then the AQ will query the RF\_Forecast\_20xx tables to return the gross charges by payor from all related plan files.

**NOTE:** This option would expect that plan files were built using the payor dimension and that all gross charges in the plan files contain the payor level forecast. Most clients are not using this approach, which is why the more common setting is Compute.

### Deductions by Payor – Inpatient and Outpatient

These two are similar to the gross revenue section where the deductions by payor can be queried in from the forecast data tables if Actuals were posted by payor.



If deductions are not by payor, then you can use the blue input fields to manually enter by payor.

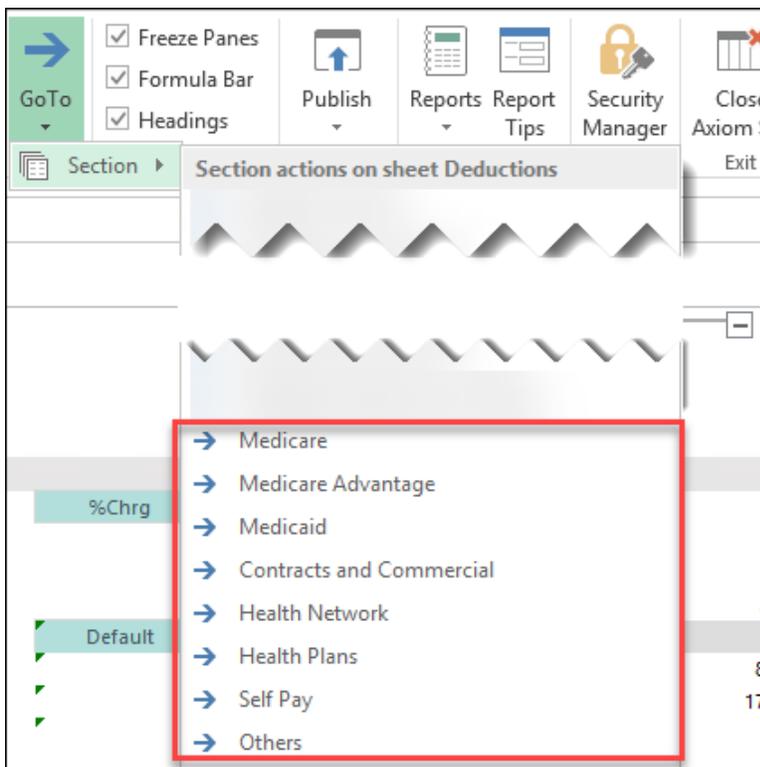
**IMPORTANT:** If entering payor data manually, change the Data Selection from **History** to **Last Saved**. This will save the manually entered payor data to the RF\_Deductions\_20xx tables so that these values can be retrieved and so that you do not lose your work.

**Rolling Forecast Deductions Calculator**  
 EMC Health  
 For the Period Ending March 31, 2021  
 RFPPlanGroup: EMC Health  
 Deductions RFGGroup: EMC\_Deductions  
 Scenario: Baseline  
 Save to Database?  
 Default Forecast Method: 3 Month Avg

	FY 2020 December 2020 Actual	FY 2020 Oct - Dec Qtr4 Actual	FY 2021 January 2021 Actual	FY 2021 February 2021 Actual	Current Period FY 2021 March 2021 Actual	FY 2021 Jan - Mar Qtr1 Actual	FY 2021 April 2021 Forecast
<b>Total Gross Revenue</b>	180,094,546	504,876,716	158,549,282	163,880,550	187,907,137	510,336,970	340,486,135
<b>Inpatient Deductions by Payor</b> D_IP							
Medicare	16,156,683	36,271,943	12,527,829	11,714,402	13,706,314	37,948,545	49,223,617
Medicare Advantage	8,468,083	25,625,142	8,506,542	8,196,839	11,021,978	27,725,360	44,819,750
Medicaid	7,407,490	24,236,888	10,476,452	9,329,591	8,795,838	28,601,881	51,568,728
Contracts and Commercial	15,804,479	41,519,026	11,789,654	11,055,762	12,326,912	35,172,338	69,617,404
Health Network	1,806,317	6,164,737	1,786,438	1,963,812	1,770,191	5,520,440	8,824,939
Health Plans	3,089,851	8,095,890	2,381,363	3,471,921	1,213,849	7,067,132	9,954,630
Self Pay	11,001	665,327	89,394	348,795	186,704	624,893	4,675,111
Others	2,193,865	8,256,800	2,940,743	2,841,312	4,460,554	10,242,609	16,372,256
<b>Total Inpatient Deductions by Payor</b>	54,937,760	150,835,752	50,498,415	48,922,434	53,482,339	152,903,187	255,056,435
<b>Outpatient Deductions by Payor</b> D_OP							
Medicare	20,772,400	58,991,551	18,940,190	20,558,910	24,771,032	64,270,133	12,352,203
Medicare Advantage	13,223,233	37,021,350	12,137,505	12,797,388	16,398,182	41,333,075	7,825,265
Medicaid	10,179,667	29,576,934	10,045,115	10,741,737	11,299,840	32,086,692	7,087,013
Contracts and Commercial	22,937,648	62,446,653	17,230,144	18,961,861	23,057,952	59,249,956	11,985,363
Health Network	4,140,233	12,769,607	3,448,339	3,598,711	4,167,398	11,214,448	2,641,939
Health Plans	1,669,706	5,517,006	1,854,483	2,195,812	2,145,487	6,195,782	1,373,029
Self Pay	59,620	(123,753)	(70,955)	(23,554)	(81,135)	(175,644)	451,646
Others	7,018,815	23,414,286	6,897,731	7,019,956	8,320,466	22,238,153	4,055,184
<b>Total Outpatient Deductions by Payor</b>	80,001,322	229,613,634	70,482,553	75,850,821	90,079,221	236,412,595	47,771,641

## Deductions by Payor

The rest of the GoTo menu is for all the detailed deduction payor blocks:



There are four calculation methods that are repeated for each occurrence of a payor. Two are specific to Medicare (Medicare Inpatient and Medicare Outpatient) and two are for all other payors.

**Medicare Inpatient:** This deduction block is the most expansive and complex. As this is often a subject matter topic commonly involving an organization’s Reimbursement experts, we will only highlight this calculation method. But this calculation method will contain most all the needed component calculations to forecast expected Medicare reimbursement, such as % of charge, or case, or DRG options. DRG Reimbursement section for DRG Base Rate, Case Mix Index, Outlier payments, DSH Payments, Capital Payments, IME Payments and more.

Rolling Forecast Deductions Calculator				FY 2020	FY 2020	FY 2021	FY 2021	Current Period		FY 2021	FY 2021
EMC Health For the Period Ending March 31, 2021 RFPlanGroup: EMC Health Deductions RFGroup: EMC_Deductions Scenario: Baseline Save to Database? Default Forecast Method:				December 2020	Oct - Dec Qtr4	January 2021	February 2021	March 2021	Jan - Mar Qtr1	April 2021	Forecast
SAVE 3 Month Avg				Actual	Actual	Actual	Actual	Actual	Actual	Actual	Forecast
<b>Medicare Reimbursement</b>											
<b>Inpatient - Medicare</b>											
%Chrg											
Admissions				162	439	168	148	165	481	137	
Patient Days				1,203	2,819	1,041	882	943	2,866	5,147	
Charge per Admissions				\$ 120,413	\$ 297,337	\$ 86,635	\$ 93,486	\$ 96,249	\$ 276,371	\$ 418,481	
% of Charges				17.17%	17.49%	13.93%	15.33%	13.69%	14.28%	14.32%	
Per Diem				\$ 2,784.91	\$ 8,136.83	\$ 1,947.10	\$ 2,405.43	\$ 2,306.29	\$ 6,658.81	\$ 2,219.60	
Per Case				20,680.51	17,516.06	12,065.05	14,335.05	13,180.79	13,146.25	13,193.63	
Case Mix Index (req'd for Per Case)				1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
<b>DRG Reimbursement</b>											
DRG Base Rate				\$20,681	\$17,516	\$12,065	\$14,335	\$13,181	\$13,146	\$13,181	
CMS Adjustment							0.00%	0.00%		0.00%	
Case Mix Index				1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
CMI Weighted DRG Rate				\$20,680.51	\$17,516.06	\$12,065.05	\$14,335.05	\$13,180.79	\$13,146.25	\$0	
% of Outlier Payments (& Other)				0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Outlier Payment per Discharge				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Outlier Reimbursement (\$000s)				\$0	\$0	\$0	\$0	\$0	\$0	\$0	
DRG Rate with Outliers				\$20,681	\$51,914	\$12,065	\$14,335	\$13,181	\$39,581	\$0	
DSH Payment (Total)				\$0	\$0	\$0	\$0	\$0	\$0	\$0	
DSH Payment %				0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
DRG Reimbursement (\$000s)				\$3,350,243	\$7,689,552	\$2,026,928	\$2,121,587	\$2,174,830	\$6,323,346	\$0	
Capital Payments (Total)				\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Capital Payment Rate per Discharge				\$0	\$0	\$0	\$0	\$0	\$0	\$0	

Once all reimbursement assumptions are entered, there is a subtotal section for Medicare Inpatient that summarizes Gross Charges, Deductions, Net Revenue, and Net Revenue %.

Capital Payment Rate per Discharge				\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Indirect Medical Education Payments				0	0	0	0	0	0	0	
Resident FTEs (for IME calculations)				0	0	0	0	0	0	0	
Medicare Available Beds				0	0	0	0	0	0	0	
Preliminary Residents per Bed Calculation				0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	
Resident Cap				0	0	0	0	0	0	0	
Residents per Bed Cap				0	0	0	0	0	0	0	
Reduction Due to Resident Cap				0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	
Net Residents per Bed				0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	
IME Adjustment Factor				1.890	1.890	1.890	1.890	1.890	1.890	1.890	
Base IME Payment (\$000s)				0	0	0	0	0	0	0	
% Reduction in IME Payments				0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Adjusted IME Reimbursement (\$000s)				\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Bad Debt Reimbursement				0	0	0	0	0	0	0	1,000
Other IP Medicare Payment				0	0	0	0	0	0	0	2,000
IP Net Revenue Adjustment				0	0	0	0	0	0	0	3,000
<b>Reimbursement</b>											
% of Charges				3,350,243	7,689,552	2,026,928	2,121,587	2,174,830	6,323,346	8,226,684	
Per Case (CMI Adj)				0	0	0	0	0	0	0	
Per Diem				0	0	0	0	0	0	0	
DRG Reimbursement				0	0	0	0	0	0	0	
<b>IP Gross Revenue - Medicare</b>											
IP Deductions - Medicare				19,506,926	43,961,495	14,554,758	13,835,989	15,881,144	44,271,891	57,456,301	
IP Net Revenue - Medicare				16,156,683	36,271,943	12,527,829	11,714,402	13,706,314	37,948,545	49,223,617	
IP Net Revenue - Medicare				3,350,243	7,689,552	2,026,928	2,121,587	2,174,830	6,323,346	8,232,684	
IP % of IP Gross Revenue				17.17%	17.49%	13.93%	15.33%	13.69%	14.28%	14.32%	

**Medicare Outpatient:** This deduction calculation method is less detailed yet contains options to select the net reimbursement method based on % of Charge or Visit. All deduction calculation method blocks contain adjustment fields to modify the final outcomes as needed.

Note that in the following image, there is a summary section for Medicare Outpatient gross charges, deductions, and net revenue, as well as a final section total for combined Medicare Inpatient and Outpatient.

Rolling Forecast Deductions Calculator				Current Period						
EMC Health For the Period Ending March 31, 2021 RFPlanGroup: EMC Health Deductions RFGROUP: EMC_Deductions Scenario: Baseline Save to Database? Default Forecast Method: 3 Month Avg				FY 2020 December 2020 Actual	FY 2020 Oct - Dec Qtr4 Actual	FY 2021 January 2021 Actual	FY 2021 February 2021 Actual	FY 2021 March 2021 Actual	FY 2021 Jan - Mar Qtr1 Actual	FY 2021 April 2021 Forecast
IP Gross Revenue - Medicare				19,506,926	43,961,495	14,554,758	13,835,989	15,881,144	44,271,891	57,456,301
IP Deductions - Medicare				16,156,683	36,271,943	12,527,829	11,714,402	13,706,314	37,948,545	49,223,617
IP Net Revenue - Medicare				3,350,243	7,689,552	2,026,928	2,121,587	2,174,830	6,323,346	8,232,684
IP % of IP Gross Revenue				17.17%	17.49%	13.93%	15.33%	13.69%	14.28%	14.33%
<b>Outpatient - Medicare</b>										
Visits				2,353	6,692	2,318	2,169	2,627	7,114	1,566
% of Charges				15.87%	47.17%	16.52%	16.64%	15.60%	48.77%	16.26%
Per Visit				1,800.00	5,345.07	1,800.00	1,800.00	1,800.00	5,400.00	1,772.54
OP Net Revenue Adjustment				0	0	0	0	0	0	0
Reimbursement				0	0	0	0	0	0	0
% of Charges				0	0	0	0	0	0	0
Per Visit				3,917.907	11,013,728	3,748,450	4,105,017	4,578,594	12,432,062	2,775,202
OP Gross Revenue - Medicare				24,690,307	70,005,279	22,688,641	24,663,928	29,349,635	76,702,194	15,127,405
OP Deductions - Medicare				20,772,400	58,991,551	18,940,190	20,558,910	24,771,032	64,270,133	12,352,203
OP Net Revenue - Medicare				3,917,907	11,013,728	3,748,450	4,105,017	4,578,594	12,432,062	2,775,202
OP % of OP Gross Revenue				15.87%	15.73%	16.52%	16.64%	15.60%	16.21%	18.35%
<b>Total - Medicare</b>										
Gross Revenue				44,197,233	113,966,774	37,243,398	38,499,917	45,230,770	120,974,085	72,583,706
Deductions				36,929,084	95,263,494	31,468,020	32,273,312	38,477,346	102,218,678	61,575,820
Net Revenue				7,268,149	18,703,280	5,775,379	6,226,605	6,752,424	18,755,407	11,007,886
% of Gross Revenue				16.44%	16.41%	15.51%	16.17%	14.93%	15.50%	15.17%

**All Other Payors:** The two other deduction calculation method blocks are used for all other payors. Like the Medicare blocks, there is an Inpatient and Outpatient calculation method. Both will combine into one contiguous section by payor displaying Inpatient, Outpatient, and Combined totals for gross charges, deductions, and net revenue and % reimbursement.

Rolling Forecast Deductions Calculator				Current Period						
EMC Health For the Period Ending March 31, 2021 RFPlanGroup: EMC Health Deductions RFGROUP: EMC_Deductions Scenario: Baseline Save to Database? Default Forecast Method: 3 Month Avg				FY 2020 December 2020 Actual	FY 2020 Oct - Dec Qtr4 Actual	FY 2021 January 2021 Actual	FY 2021 February 2021 Actual	FY 2021 March 2021 Actual	FY 2021 Jan - Mar Qtr1 Actual	FY 2021 April 2021 Forecast
% of Gross Revenue				18.06%	14.77%	11.35%	11.83%	14.25%	12.49%	3.81%
<b>Contracts and Commercial Reimbursement</b>										
<b>Inpatient - Contracts and Commercial</b>										
Admissions				431	1,205	350	337	400	1,087	351
Patient Days				1,673	4,420	1,359	1,153	1,394	3,906	7,004
Charge per Admissions				\$ 63,741	\$ 59,570	\$ 56,740	\$ 59,660	\$ 54,190	\$ 56,707	\$ 222,974
% of Charges				42.47%	42.56%	40.63%	45.01%	43.13%	42.86%	42.92%
Per Case				27,071.42	25,106.22	23,055.54	26,853.10	23,372.57	24,346.20	24,427.07
Case Mix Index (req'd for Per Case)				1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Per Diem				6,974.17	6,841.83	5,937.78	7,848.65	6,706.62	6,797.09	6,831.02
Number of Members				0	0	0	0	0	0	0
Per Member Per Month				0	0	0	0	0	0	0
Use Rate (Days/1000)				0	0	0	0	0	0	0
IP Net Revenue Adjustment				0	0	0	0	0	0	0
Reimbursement				0	0	0	0	0	0	0
% of Charges				0	0	0	0	0	0	0
Per Case (CMI Adj)				11,667,783	30,262,684	8,069,440	9,049,496	9,349,027	26,467,962	8,564,954
Capitated				0	0	0	0	0	0	0
IP Gross Revenue - Contracts and Commercial				27,472,262	71,781,710	19,859,093	20,105,258	21,675,939	61,640,290	78,182,358
IP Deductions - Contracts and Commercial				15,804,479	41,519,026	11,789,654	11,055,762	12,326,912	35,172,328	69,617,404
IP Net Revenue - Contracts and Commercial				11,667,783	30,262,684	8,069,440	9,049,496	9,349,027	26,467,962	8,564,954
IP % of IP Gross Revenue				42.47%	42.16%	40.63%	45.01%	43.13%	42.94%	10.96%

Commercial Inpatient reimbursement block example

Outpatient - Contracts and Commercial		Visit							
Visits			3,333	9,599	3,020	2,822	3,459	9,301	2,046
% of Charges			34.10%	35.60%	37.74%	38.13%	36.39%	37.40%	37.42%
Per Visit	Default		3,573.57	3,590.78	3,458.92	4,140.51	3,814.18	3,793.34	3,804.54
Number of Members			0	0	0	0	0	0	0
Per Member Per Month			0	0	0	0	0	0	0
Use Rate (Visits/1000)	3 Month Avg		0	0	0	0	0	0	0
OP Net Revenue Adjustment	Default		0	0	0	0	0	0	0
Reimbursement									
% of Charges			0	0	0	0	0	0	0
Per Visit			11,910,712	11,501,203	10,445,932	11,684,527	13,193,238	11,777,567	7,784,777
Capitation			0	0	0	0	0	0	0
OP Gross Revenue - Contracts and Commercial			34,848,360	96,918,013	27,676,076	30,646,387	36,251,190	94,573,654	19,770,139
OP Deductions - Contracts and Commercial			22,937,648	62,446,653	17,230,144	18,961,861	23,057,952	59,249,956	11,985,363
OP Net Revenue - Contracts and Commercial			11,910,712	34,471,360	10,445,932	11,684,527	13,193,238	35,323,697	7,784,777
OP % of OP Gross Revenue			34.18%	35.57%	37.74%	38.13%	36.39%	37.35%	39.38%
Total - Contracts and Commercial									
Gross Revenue			62,320,622	168,699,723	47,535,169	50,751,645	57,927,129	156,213,943	97,952,497
Deductions			38,742,127	103,965,679	29,019,798	30,017,622	35,384,864	94,422,284	81,602,767
Net Revenue			23,578,495	64,734,044	18,515,372	20,734,022	22,542,265	61,791,659	16,349,731
% of Gross Revenue			37.83%	38.37%	38.95%	40.85%	38.91%	39.56%	16.69%

Commercial Outpatient reimbursement block example

The primary reimbursement calculation options for Inpatient include:

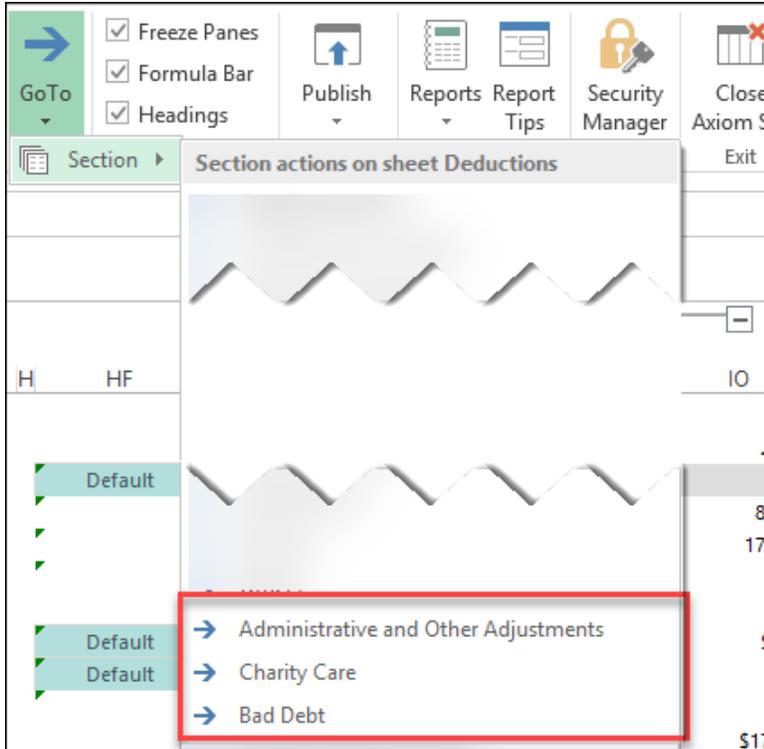
- **% of Charges** – Reimbursement percent to payor gross charges
- **Case** – Net revenue per payor admission
- **Diem** – Net revenue per payor patient day for
- **MPPM** – Net revenue per member per month

Rolling Forecast Deductions Calculator											
EMC Health											
For the Period Ending March 31, 2021											
RFPPlanGroup: EMC Health											
Deductions RFGroup: EMC_Deductions											
Scenario: Baseline											
Save to Database?											
Default Forecast Method:		SAVE	Data Selection	Forecast Method	FY 2020 December 2020 Actual	FY 2020 Oct - Dec Qtr4 Actual	FY 2021 January 2021 Actual	FY 2021 February 2021 Actual	Current Period FY 2021 March 2021 Actual	FY 2021 Jan - Mar Qtr1 Actual	FY 2021 April 2021 Forecast
Contracts and Commercial Reimbursement											
Inpatient - Contracts and Commercial											
Admissions	Case		431	1,205	350	337	400	1,087	351		
Patient Days	%Chrg		1,673	4,420	1,359	1,153	1,394	3,906	7,004		
Charge per Admissions	Case		\$ 63,741	\$ 59,570	\$ 56,740	\$ 59,660	\$ 54,190	\$ 56,707	\$ 222,974		
% of Charges	Case		42.47%	42.56%	40.63%	45.01%	43.13%	42.86%	42.92%		
Per Case	Default		27,071.42	25,106.22	23,055.54	26,853.10	23,372.57	24,346.20	24,427.07		
Case Mix Index (req'd for Per Case)	Default		1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000		
Per Diem			6,974.17	6,841.83	5,937.78	7,848.65	6,706.62	6,797.09	6,831.02		
Number of Members			0	0	0	0	0	0	0		
Per Member Per Month			0	0	0	0	0	0	0		

The primary reimbursement calculation options for Outpatient include:

- **% of Charges** – Reimbursement percent to payor gross charges
- **Visit** – Reimbursement amount per payor visit





Rolling Forecast Deductions Calculator				Current Period											
EMC Health For the Period Ending March 31, 2021 RFPanGroup: EMC Health Deductions RFGGroup: EMC_Deductions Scenario: Baseline Save to Database? Default Forecast Method:				FY 2020 December 2020 Actual	FY 2020 Oct - Dec Qtr4 Actual	FY 2021 January 2021 Actual	FY 2021 February 2021 Actual	FY 2021 March 2021 Actual	FY 2021 Jan - Mar Qtr1 Actual	FY 2021 April 2021 Forecast	FY 2021 May 2021 Forecast	FY 2021 June 2021 Forecast	FY 2021 July 2021 Forecast		
Administrative and Other Adjustments Percentage of Total Charges															
Total Admin Adj 1	D_Admin	Default		0.00%	0.00%	0.15%	0.16%	0.13%	0.15%	0.15%	0.15%	0.14%	0.14%		
Total Admin Adj 2		Default		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		
Total Admin Adj 3		Default		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		
Total Admin Adj 4		Default		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		
Total Admin Adj 5		Default		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		
Total %				0.00%	0.00%	0.15%	0.16%	0.13%	0.15%	0.15%	0.15%	0.14%	0.14%		
Total	D_Admin	ListSaved		0	0	100,000	100,110	95,000	295,110	405,370	636,509	431,499	431,499		
Total Admin Adj 1		History		0	0	0	0	0	0	0	0	0	0		
Total Admin Adj 2		History		0	0	0	0	0	0	0	0	0	0		
Total Admin Adj 3		History		0	0	0	0	0	0	0	0	0	0		
Total Admin Adj 4		History		0	0	0	0	0	0	0	0	0	0		
Total Admin Adj 5		History		0	0	0	0	0	0	0	0	0	0		
Total:				0	0	100,000	100,110	95,000	295,110	405,370	636,509	431,499	431,499		

Administrative Adjustments example

**Charity and BadDebt:** The calculation methods are the same for these two write-off categories and use a historical % to gross charges. If Actual data exists for the related RFCodes in the RF\_Forecast\_20xx data tables, these can be queried in to establish the historical % and can be modified for forecast periods.

**NOTE:** Remember that the display of Inpatient, Outpatient or Total is configured in the Deductions Model Configuration Utility.

### Rolling Forecast Deductions Calculator

EMC Health  
For the Period Ending March 31, 2021  
RFPanGroup: EMC Health  
Deductions RFGROUP: EMC\_Deductions  
Scenario: Baseline  
Save to Database?  
Default Forecast Method: 3 Month Avg

			FY 2020 December 2020 Actual	FY 2020 Oct - Dec Qtr4 Actual	FY 2021 January 2021 Actual	FY 2021 February 2021 Actual	Current Period FY 2021 March 2021 Actual	FY 2021 Jan - Mar Qtr1 Actual	FY 2021 April 2021 Forecast
<b>Charity Care</b>									
Charity Care % of Gross Revenue			1.38%	1.36%	0.45%	1.16%	0.77%	0.80%	0.26%
IP Charity Care % of IP Gross Revenue		Default	1.62%	1.50%	(0.24%)	0.45%	0.23%	0.20%	0.15%
OP Charity Care % of OP Gross Revenue		Default	1.21%	1.27%	0.95%	0.71%	0.54%	0.60%	0.73%
<b>Total - Charity Care</b>	RFCode		2,488,274	6,884,685	716,121	1,899,928	1,447,543	4,063,592	877,624
Inpatient	D_IP_Charity	History	1,232,032	3,103,556	(156,214)	735,422	437,792	1,017,000	411,987
Outpatient	D_OP_Charity	History	1,256,242	3,781,129	872,335	1,164,506	1,009,751	3,046,592	465,636
<b>Total</b>		History	0	0	0	0	0	0	877,624
<b>Bad Debt</b>									
Bad Debt % of Gross Revenue			(0.31%)	0.03%	0.95%	0.36%	0.48%	0.59%	0.42%
IP Bad Debt % of IP Gross Revenue		Default	(0.66%)	0.26%	1.39%	(0.28%)	0.06%	0.11%	0.39%
OP Bad Debt % of OP Gross Revenue		Default	(0.05%)	(0.13%)	0.63%	0.65%	0.42%	0.48%	0.57%
<b>Total - Bad Debt</b>	RFCode		(557,661)	168,266	1,505,150	594,771	907,014	3,006,935	1,439,991
Inpatient	D_IP_BadDebt	History	(505,725)	543,639	922,770	(463,874)	119,418	578,314	1,079,906
Outpatient	D_OP_BadDebt	History	(51,936)	(375,373)	582,379	1,058,646	787,596	2,428,621	360,085
<b>Total</b>		History	0	0	0	0	0	0	1,439,991

*Charity and Bad Debt example*

A Summary tab in the Deductions Calculator presents Gross Revenue, Net Revenue, and Reimbursement Percent in a four-quarter comparison table for Inpatient and Outpatient:

### Net Revenue - EMC Health

4 Quarter History vs 4 Quarter Forecast

	Gross Revenue		Net Revenue		Net % of Gross		Impact
	Mar 2020 - Mar 2021	Mar 2021 - Mar 2022	Mar 2020 - Mar 2021	Mar 2021 - Mar 2022	Mar 2020 - Mar 2021	Mar 2021 - Mar 2022	Mar 2021 - Mar 2022
<b>Medicare Advantage</b>	118,397,104	548,049,526	18,090,801	22,247,778	15.28%	4.06%	(2,496,272)
<b>Medicaid</b>	133,459,574	603,704,644	19,351,897	16,992,586	14.50%	2.81%	(1,985,665)
<b>Contracts and Commercial</b>	261,097,933	912,518,767	108,883,798	395,504,135	41.70%	43.34%	6,485,258
<b>Health Network</b>	35,061,573	109,593,259	6,152,760	4,423,715	17.55%	4.04%	(597,730)
<b>Health Plans</b>	25,783,320	111,706,002	2,941,577	3,003,373	11.41%	2.69%	(261,900)
<b>Self Pay</b>	10,924,296	61,842,743	8,645,169	9,009,556	79.14%	14.57%	(5,817,343)
<b>Others</b>	52,122,644	212,638,313	10,650,746	13,096,791	20.43%	6.16%	(1,869,544)
<b>Administrative Adjustments</b>			295,110	4,628,445	0.00%	0.00%	0
<b>Charity</b>			7,645,843	7,263,602	0.00%	0.00%	0
<b>Bad Debt</b>			1,884,252	5,629,314	0.00%	0.00%	0
<b>TOTAL Inpatient</b>	816,071,220	3,218,191,399	192,277,184	540,870,483	23.56%	16.81%	(7,465,539)
<b>Outpatient</b>							
<b>Medicare</b>	291,117,420	274,782,731	46,902,134	47,138,160	16.11%	17.15%	491,949
<b>Medicare Advantage</b>	163,080,982	174,745,740	23,511,030	29,935,953	14.42%	17.13%	812,571
<b>Medicaid</b>	142,266,556	147,003,259	17,761,359	18,036,662	12.48%	12.27%	(38,778)
<b>Contracts and Commercial</b>	380,581,339	359,720,074	136,252,201	132,863,277	35.80%	36.94%	1,506,820
<b>Health Network</b>	74,204,811	57,334,113	12,411,063	9,164,655	16.73%	15.98%	(67,889)
<b>Health Plans</b>	27,471,139	27,729,333	3,275,638	2,807,427	11.92%	10.12%	(50,520)
<b>Self Pay</b>	13,217,019	22,120,829	13,992,491	12,374,618	105.87%	55.94%	(6,178,177)
<b>Others</b>	115,159,054	92,358,903	20,391,531	16,906,245	17.71%	18.30%	101,043
<b>Charity</b>			14,476,900	7,697,341	0.00%	0.00%	0
<b>Bad Debt</b>			4,694,342	6,149,824	0.00%	0.00%	0
<b>TOTAL Outpatient</b>	1,207,098,320	1,155,794,984	255,326,204	255,379,832	21.15%	22.10%	(3,422,981)

Summary Deductions