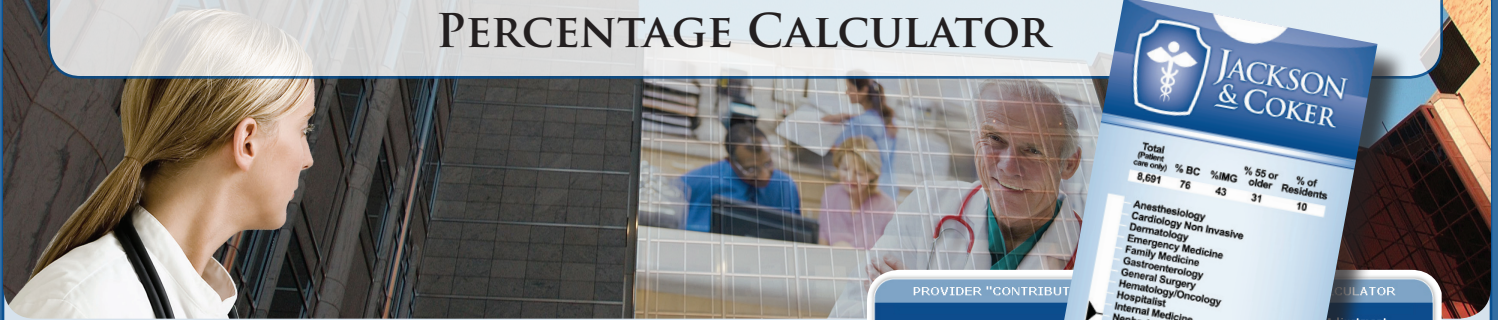


2010-2011 PROVIDER "CONTRIBUTION TO OPERATIONS" PERCENTAGE CALCULATOR



- ▶ HOURLY & ANNUAL COMPENSATION
- ▶ GROSS AND NET REVENUE
- ▶ PHYSICIAN POPULATION COUNT
- ▶ PROVIDER CONTRIBUTION TO OPERATIONS

Alpharetta, GA — Jackson & Coker has produced for the medical community an enhanced online tool enabling hospital administrators and group practice managers to calculate the revenue contribution of their physician staff in different service lines.

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Total (Patient care only)	% BC	%MG	% 55 or older	% of Residents
8,691	76	43	31	10

PROVIDER "CONTRIBUTION TO OPERATIONS" PERCENTAGE CALCULATOR

Provider Specialty:

Providers in Jackson & Coker:

Providers Listed in United States:

ANNUAL Ave. Comp for Full-Time Provider	Total Average Compensation	National Average Annual Compensation	Net Revenue	Annual Revenue
\$246,049	\$246,049	\$1,683,333		

Average Physician Compensation: \$246,049

Average Inpatient/Outpatient Revenue: \$1,683,333

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PHYSICIAN STAFFING SLIDE RULE

Hospital administrators have been utilizing the Jackson & Coker slide rule style "Physician Return on Investment" calculator for years. This tool was historically used to calculate the revenue generated by a particular physician specialty against the average compensation for that specialty. This new online tool was just released with 2010-2011 data and additional features.

As Sandy Garrett, President, Jackson & Coker, explained, "These new features allow hospital CEOs and administrators to input their own contractual adjustment percentages and immediately view the customized contribution results for their particular facility. Additionally, as a quick reference, there is a category noting the total number of physicians working in the US for any given specialty."

Another consideration when measuring anticipated revenue concerns the 'cascading effect' of revenue generation based upon related departments, noted Edward McEachern, Vice President of Marketing.

"For instance, when a hospital's emergency department is adequately staffed, those physicians refer some patients to the operating room for surgery; the surgeons in turn request anesthesiology and pharmacy services and so on. If any of the links in that chain restrict the patient flow, all of the following revenue centers will be adversely impacted. Therefore, the value of an individual physician must be viewed as part of a total revenue stream and not as a single billing entity."

When asked about future physician hiring trends, Mr. McEachern added, "There is an interesting staffing situation developing. The current recession has reduced the rate of expansion for many hospitals and healthcare facilities, while delaying the retirement of many physicians in all specialties. As the market begins to recover, the same positive economic force that will stimulate the hospitals to begin their service line expansions will also allow many of the physicians wanting to retire to do so. This situation is forecast to lead to a dramatic increase in demand for the physicians' services, and a dramatic decrease in the supply of physicians to fill those needs." He continued, "We have been advising the Jackson & Coker hospital partners to begin their permanent recruitment process earlier and prepare for short-term staffing adjustments by fully utilizing the locum tenens (temporary) physician staffing model. Our projections show that those facilities with adequate staffing will be in the strongest position post-recession."

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The Jackson & Coker 2010-2011 Provider "Contribution to Operations" Percentage Calculator can be accessed at www.jacksoncoker.com.



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