

Department of Dermatology

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Clinical Faculty – 3.7 Residents – 6

Affiliate Faculty – 10 Fellow - 1



Suburban Site Opening November 14, 2016: Approx 30,000 square feet for dermatology

- 24 medical dermatology examination rooms
- Phototherapy center, including Daavlin ML24000 pure UVA 1
- Contact dermatitis laboratory and testing services
- 2 procedural dermatology pods of 4 procedures rooms each
- Histology laboratory
- Dedicated dermatopathology service
- 6 procedural dermatology examination rooms
- 4 room laser suite
- Central sterile on site
- Physician office and administrative space
- Conference space for 50 attendees



More details.....

- Non provider based billing model
- All building overhead and expenses are borne by the practice plan
- All employees work for the practice plan
 - 14 medical dermatology
 - 22 procedural dermatology
 - 4 administrative staff administrator, associate administrator, coordinator, financial analyst
- Moving from a dyad management model to a triad model



Performance Statistics

Payor Mix • BCBS • Indigent • Medicare • Medicare • Other • Self Pay

120,000 100,000 80,000 60,000 40,000 20,000 0 2 3 5 1 4 10/7/2016

Anticipated Visit Growth



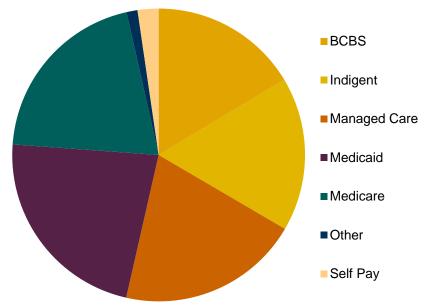
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Downtown Urban Campus





Downtown Richmond Level I Trauma Center on major interstate Safety net hospital with Ambulatory Clinics



Payor Mix

- Provider based billing model
- Staff employed by VCU Health
- Approx 6 employees
- Medical dermatology only
- Inpatient consults
- 3,600 4,000 visits annually
- Transitioning to resident practice



Employment Entities and Models





- Traditional faculty employment model is dual: 1) University and
 MCV Physicians (practice plan).
- 2. Offering practice plan-only employment more frequently for those with only clinical focus.
- 3. Mid levels are employed by the practice plan only.
- 4. Residents are employed by VCU Health.



Productivity Metrics

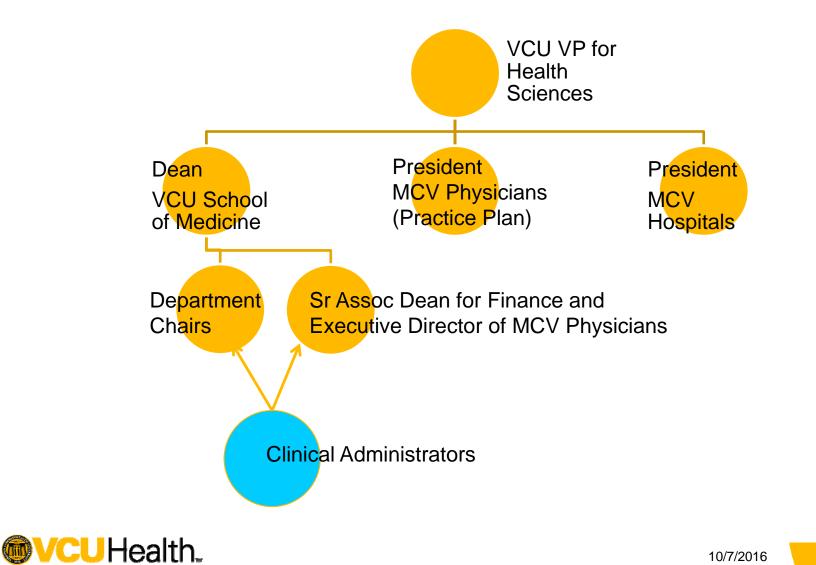
- cFTE = clinical sessions + funded time
- Separate salary funding for administrative roles, UME teaching, research.
- ALL participants in the Compensation Plan have 10% funding for Citizenship, UME teaching (<10hrs) and GME teaching.
- Productivity measured in FPSC work RVUs with annual update FY17 benchmarks:

Medical dermatology 7,202 wRVUs Mohs 14,472 wRVUs

Nurse practitioners are salaried, productive and provide expedient access



Administrative Organizational Structure



Strengths, Opportunities and Threats

Strengths

- Clinical productivity and revenue generation
- Strong Mohs program with fellowship
- Community extension = better payor mix
- Physician compensation plan
- Universal dedication to education
- Minimal administrative expense
- Lack of dependence on alternative funding

Opportunities

- Research
- Faculty recruitment
 - Attracting and retaining millennials
 - Culture shift

Threats

- Retirement
- Reimbursement
- Community competition
- VA competition





