

Physician Services

Practice Assessments

A successful practice requires not only excellent clinical capabilities, but the technical expertise to ensure that the practice optimizes its reimbursement while maintaining efficiency and compliance. Our comprehensive assessment from the patient and physician perspective includes an analysis of revenue-related data and metrics, and current processes and systems, to identify risks and areas of improvement for all aspects of the revenue cycle. By eliminating inefficiencies, improving controls, and shortening cycle times, we'll help improve the financial performance of your practice.

Due Diligence

Our consultants work on both the buy- and sell-side, adding an additional level of confidence to your transactions through sound risk analysis of all reimbursement opportunities to ensure nothing is overlooked to protect your revenue integrity. Our analysis includes the assessments of compliant coding and billing based on documentation, payor contracts, payor vouchers, and profitability by provider or service line.

Documentation and Coding Audits

The financial wellness of your practice is ensured by compliant and accurate documentation, coding and billing. We offer a comprehensive audit, reinforced with education for providers, management and staff.

Our consultants are either AHIMA or AAPC credentialed and have years of operational, coding, and multi-specialty auditing experience, giving your practice peace of mind in working with our team.



Coding/Billing Vendor Audits

If your practice is currently utilizing a third-party to perform coding or billing functions, an annual audit is recommended to ensure that your coding is compliant and reimbursement is optimal.

Denials Reduction

Many practices experience a substantial amount of unpaid or delayed revenue due to inefficient processes coupled with trouble interpreting the coding and billing requirements of various payors. Our denials reduction program offers detailed insight into the components affecting your revenue, working to determine root causes, patterns, and process breakdowns responsible for the denials. We'll develop effective techniques specific to your practice to streamline processes and establish corrective steps to prevent future revenue loss or delay and ensure that you are receiving optimal payment.

RVU Analysis & Assessments

It's critical to validate your RVU allocations as physicians are frequently reimbursed based on RVUs for either their salary as a whole or for bonuses. Our team can provide a comprehensive assessment to ensure that your reimbursement is reflective of the work you or your providers have performed.

Payor Negotiation & Contract Optimization

The payor-specific fee schedules for any practice are a crucial component affecting profitability and revenue. It's important to negotiate fee schedules comparable to the market and at an optimal rate based on your specialty, in order to secure profits and avoid long-term losses.

Our consultants can provide fee schedule and market analysis along with an assessment of your high-volume services to negotiate scheduling contracts that help you optimize revenue for increased profitability.

Additional Physician Practice Services

- Practice Valuation
- Charge Validation Process Design & Implementation
- Compliance Plan Development & Reviews
- Litigation Support
- Provider Compensation Analysis
- Rural Health Strategies



Do you have an urgent question?
Ask The Rybar Group!

For over 30 years, The Rybar Group has been the trusted source for healthcare providers seeking to optimize their financial viability. Our exclusive focus on the healthcare industry means we understand the challenges of balancing efficient business operations with patient care. Healthcare organizations must make effective use of reimbursements, navigate federal and third-party strategies, and maintain compliance in an ever increasingly complex landscape.

The Rybar Group brings in-depth industry knowledge to help our clients create robust strategies and solutions that work in tandem with their organization's goals. Our team leverages decades of regulatory and financial healthcare expertise coupled with the experience serving healthcare organizations of all designations and sizes across the United States. We believe it is this combination of experience, financial and industry knowledge that provides a unique perspective and know-how that provides the greatest benefits to our clients.