

**CALIFORNIA MEDICAL BILLING**  
**\*COMPARATIVE COST ANALYSIS WORKSHEET\***  
 "Solo Practice"

| SOLO PRACTICE<br>INDIVIDUAL PROVIDER   | MONTHLY<br>IN-HOUSE<br>COST                                 | CALIFORNIA<br>MEDICAL<br>BILLING                           |
|--|---|--|
| <p><b><u>Employee Salary (per employee)</u></b></p> <p>\$24.00 per hour x 40 hours per week = \$960.00<br/>                     \$49,920. ÷ 12 months<br/>                     \$4,160.00 = one-month gross pay</p>  | \$4,160.00  | 8% on Average of<br>\$60,000.00<br>Monthly Net Receivables |
| <p><b><u>Medical, Dental &amp; Vision Benefits</u></b></p> <p>Average Medical PPO plan \$440.00 (26-36 yrs. of age)<br/>                     CA Min Requirement (50% Employer's portion of dues)<br/> <b>Full Time Employee (30 -40 hrs. per week)</b></p> | \$220.00 Medical<br>\$70.00 Dental                          | INCLUDED   |
| <p><b><u>Sick Leave</u></b></p> <p>Based on mandatory California 24 hrs. days per year</p>   | ✓ Paid Sick<br>✓ Delayed Revenues<br>✓ Provide Coverage     | INCLUDED   |
| <p><b><u>Vacation Leave</u></b></p> <p>Based on a one-week paid Vacation per year</p>  | ✓ Paid Vacation<br>✓ Delayed Revenues<br>✓ Provide Coverage | INCLUDED   |
| <p><b><u>Retirement Plan 401K Safe Harbor</u></b></p> <p>Based on a 3% Employer Contribution per month</p>   | \$124.80  | INCLUDED   |
| <p><b><u>Workers Compensation</u></b></p> <p>Based on \$0.95 per \$100.00 on payroll<br/>                     California policy minimum \$500.00</p>   | \$39.52   | INCLUDED   |
| <p><b><u>Payroll Taxes (estimated of gross wages)</u></b></p> <p>10% Employer Tax Liability<br/>                     Social Security, Medicare, State Unemployment</p>   | \$416.00  | INCLUDED   |
| <p><b><u>EMR Software</u></b></p> <p>Average cost for monthly Basic EHR model<br/>                     \$300.00 per provider per month</p>   | \$300.00  | \$110 - \$135.00 (optional)                                |
| <p><b><u>Electronic Claims/ERA Submission Fee</u></b></p> <p>@ \$0.34 per claim line<br/>                     Based on 80% of the total monthly claims (est. 400 claims/ERA)</p>   | \$0.00  | Approx. \$157.50   |
| <p><b><u>Paper Claims (Cost of Supplies &amp; Postage)</u></b></p> <p>@ \$0.85 per claim<br/>                     Based on 20% of the total monthly claims (est. 400 claims)</p>   | \$68.00   | INCLUDED   |
| <p><b><u>Patient Statements (Cost of Supplies &amp; Postage)</u></b></p> <p>@ \$0.78 per statement<br/>                     Estimate 50 per month</p>  | \$39.00   | \$39.00  |
| <b><u>TOTAL COST PER MONTH</u></b>   | <b>\$5,437.32</b>   | <b>\$4,996.50</b>  |

**EMPLOYEE SALARY INCREASE, BENEFITS & YEARLY BONUS-  
 THIS COULD ADD UP TO THOUSANDS!!**