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## Using relative value units for staff pay

By Keith C. Borglum, CHBC

**Q:** Which job should pay more: receptionist or medical assistant?

**A:** It often is difficult to determine how much to pay a particular staff person—and how much to pay him or her in relation to other staff in the office. Many factors can compound this decision.

Practices in high cost-of-living and urban locations often need to pay more to attract quality staff than do practices in suburban locations. Practices in rural locations may pay more or less depending on the availability of staff. In some rural locations, a commuting population may accept less pay for a local job, whereas in other rural locations, a practice may need to pay more to attract staff from urban or suburban centers due to a lack of local qualified staff. Local or regional unemployment can be a big factor in any setting, as can a hospital closure.

Individual skills also can affect compensation. Of course, licensure has an effect (for instance, with RN, LPN, and medical assistant [MA] positions), but so do experience and on-the-job skills. Longevity in the practice also has some impact, even though it often shouldn't, because slowly declining job performance rarely results in a pay cut.

JOB DESCRIPTION	RVU
File clerk	.5
Data entry clerk	.8
Receptionist, phones, cashier	.8
Medical assistant	1
Biller	1
Collector	1
Certified lab assistant	1
Medical assistant scribe	1.1
Transcriptionist	1.1
LPN	1.2
Bookkeeper	1.4
Radiology practical technician	1.5
Triage nurse	1.5
Office manager	1.5
RN	1.7
Ultrasound tech	1.7

I recently completed a study on developing a relative value unit (RVU) system for staff pay similar to the RVU system used to compensate physicians. The results detailed in the accompanying table should be considered a baseline on which to apply variants for location, experience, longevity, or other factors applicable to your situation. Obviously, every job has a pay range. This RVU system provides perspective on the relative comparison of pay for different jobs within the same office for a broad population of practices. I found that the pay for individual practices commonly varied up to 20 percent in either direction, up or down.

For this study, I reviewed data from several reports representing a wide variety of practice sizes, locations, years, and specialties of medicine. All jobs were in outpatient settings. I created a baseline, using "1" for a medical assistant to compare with the other jobs. Several free resources online, such as salary.com, can help determine the dollar amount of "1" in your community. Some of the medical-specialist CPA firms that have members who belong to the National Society of Certified Healthcare Business Consultants (nshbc.org) perform annual local studies in their communities that they make available to clients or for a fee. TheHealthCareGroup.com also sells a staff salary report.

I don't necessarily agree with some of the findings of my study. For example, I think receptionists are at least as important as MAs, but the table below represents the reported data.

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