

A3 Plan Value Sheet

PRACTICE _____

DATE _____

In the last column, write A for an assumption, C for a count or F for a formula.

PART 1 Each segment, line by line

LINE	REGULAR	OCCASIONAL	SLIPPING	WHERE IT CAME FROM	A / C / F
Patients in the pool				A1	A / C / F
Paid in the baseline year, per patient				A2	A / C / F
Share who join					A / C / F
Member visits					A / C / F
Members				Patients × share	A / C / F
Member fee				Plan design	A / C / F
Other treatment × 1 - member discount				A2, plan design	A / C / F
Processing + front-desk time per member				Processing rate × fee + minutes ÷ 60 × hourly cost	A / C / F
Change per member				Fee + discounted treatment – baseline – costs	
Year-one change				Members × change	

PART 2 The plan floor

TOTALS	PLAN	WHERE IT CAME FROM
Change before setup		Sum of the segments
Setup hours × hourly cost + outside review		Chapter 8; the review is a quote or a placeholder
Plan floor, year one		Change – setup
Per member		Floor ÷ members
Already-regular share		Regular members ÷ all members
Left out	Renewals, new patients drawn by the plan, treatment found at extra visits, family members, patients kept from the inactive line	Named, not counted

This is what they already pay us.

Counts and totals only: no patient names on this sheet.