

CASE STUDY

Pediatrics: Primary Care Strengthening Alignment Across the Enterprise

Operating Model Assessment

Variation across practices can quietly erode enterprise performance.
It's important to know what's working and what isn't – and to align your operations accordingly.

A leading children's hospital and medical group recently asked us to evaluate the performance of a hybrid primary care model across 27 different locations.

See how SullivanCotter helped the leadership team clarify operating model choices, quantify financial and staffing opportunities, and prioritize next steps for greater standardization, access, and sustainability.

CHALLENGES

- Concerns about the financial sustainability of a hybrid operating model with a mix of both private and corporate practice clinics
- Physician autonomy presented buy-in and implementation barriers
- Lack of standardization across practices – including billing, compensation, denial management, and use of shared services differed across practices
- Pay disparities between hospital and private-practice settings contributed to retention challenges



APPROACH

- Key stakeholder interviews with hospital and medical group leaders, physicians and administrative stakeholders, practice directors, legal, operations, and finance
- System-wide and practice-level assessments to validate findings at the local level
- Benchmarking and diagnostic analytics across productivity, revenue cycle, coding, compensation, staffing, and support costs
- Validation of provider-based billing reimbursement methodology; development of pro forma financial projections
- Evaluation of shared services and location consolidation opportunities



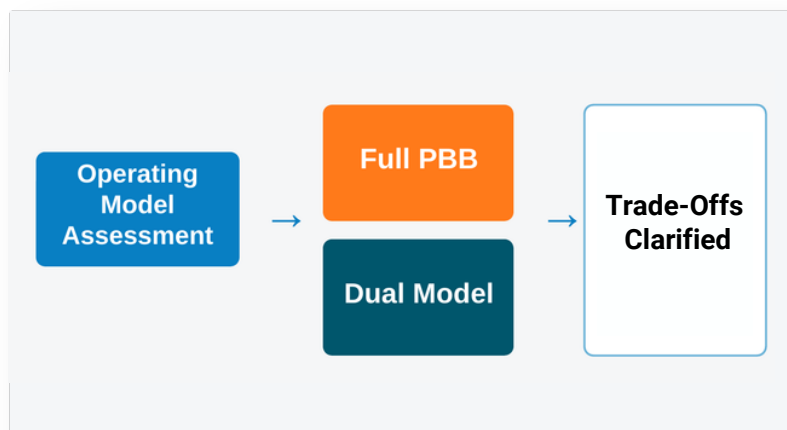
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OUTCOMES

Defined Operating Model Direction

Established two viable paths via full provider-based billing or a dual-model approach.

The assessment helped to clarify trade-offs across financial upside, standardization, physician alignment and compensation. It also gave leadership a clear decision framework for pediatric practice transformation.



Quantified Improvement Opportunities

Projected \$34 million in incremental system impact from provider-based billing alone.

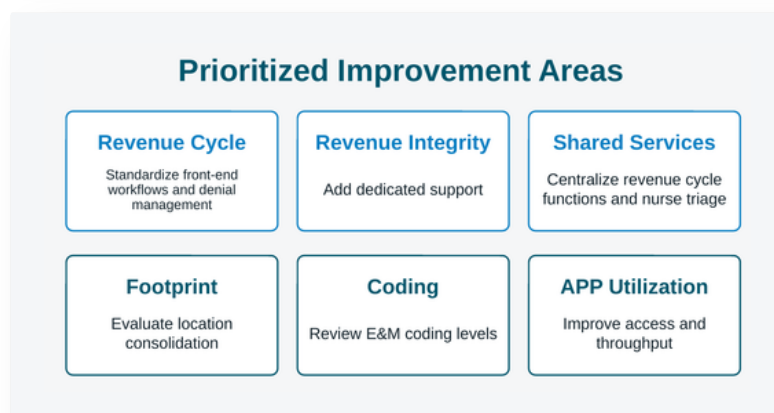
Benchmarking and pro forma analysis helped quantify the scale of opportunity across the system and at the practice level. This also included insight into E&M coding, support staff and denials management.

Improvement Opportunities	LOW	MID	HIGH
E&M Coding	\$0	\$1.05M	\$2.1M
Support Staff	\$2.8M	\$5.5M	\$8.3M
Provider-Based Billing	\$0	\$10.6M	\$34.5M

Established an Implementation Roadmap

Translated findings into priorities across revenue cycle, shared services, location consolidation, coding, and APP utilization.

Next steps included practice-level assessments, corporate compensation plan development, APP optimization, provider needs assessment, and targeted operational review.



Want to see how we can support your organization?



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