ASCO® Edge

Budgeting

This session covers the topic of budgeting and demonstrates how oncology practices can develop a realistic and well-defined budget, which supports ongoing operations, facilitates future growth through strategic planning, and ensures high quality care is provided to patients. The case studies presented in the videos for this session are available in written format and can be found at the end of this document.

Budget management is an integral component in the complex system of oncology, which ensures oncology practices can grow their services and maintain high quality patient care. A healthy and strong budget is a result of well-defined planning, analysis, and management. Revenue cycle management is a critical piece to a strong budget, as it helps the oncology practice track patient care activities from registration to appointment, including charges being submitted and followed by reimbursement collections.

Oncology practices with strong budget management can focus on their patients and the services they provide without worrying about financial burdens. A strong budget also ensures sustainability by preparing oncology practices—or any healthcare organization—to resist economic changes while simultaneously providing continuous care for their patients.

Budgeting is not just about being able to control expenses and track revenue—it's a strategic tool that shapes the direction of a healthcare organization. Budgeting is part of the financial strategy this is critical to developing strong, responsible financial management. Budgets are a structured plan to help predict costs, evaluate revenue, establish priorities, and ensure the practices remain financially stable.

Oncology practices will use a variety of processes to ensure budget reports are not outdated, as they can no longer afford to look at their budget processes once a year due to the constant changes that occur in real-time. Forecasts continually change, and practices must adapt quickly to those changes. Some of the changes that may occur are reimbursement changes, cyberattacks, or even physicians leaving the practice. If physicians leave a practice and go to work at another organization in the same market area, their patients will often follow them to their new practice; this causes a big decrease in volume and revenue.

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One of the more popular budgeting strategies is using the rolling budget, which focuses on a monthly review rather than an annual review, while still maintaining a 12-month forecast. This model is adaptive to changes that can occur and is able to spread multiple forecasting plans over a year as part of an ongoing process. Essentially, new strategies are added as old ones expire or drop off, allowing budgets to stay nimble and current with actual revenue growth. Past performance is reviewed to help create forecasts for future timelines and projects, and real-time data allows the practice to stay flexible around their strategies, or even reallocate their resources as needed.

Budgets that are well-defined and closely managed allow oncology practices to use their resources more efficiently and ensure successful future operations. An oncology practice that has full understanding of its finances can adjust its spending to stay compliant with state and federal regulations, all while being able to offer emerging technologies, drugs, and clinical trials. Overall, maintaining a strong budget will not only benefit the practice, but also improve patient outcomes.

The following is a list of key questions that can be considered by oncology practices when developing budgets.

Budgeting for Oncology Practices: Key Questions

General Operations:

- **Historical Data:**
  - What were our total operating costs for the past year (broken down by category)?
  - What was our total revenue for the past year (broken down by source)?
  - What are our current staffing levels (physicians, nurses, administrative)?
- **Future Projections:**
  - How many new patients do we expect to see in the coming year?
  - Are there any anticipated changes in insurance reimbursement rates?
  - Are there any upcoming equipment upgrades or replacements planned?
  - What new services do we expect to offer in the coming year?

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- **Cost Analysis:**
  - What are the average salaries and benefits for different staff positions (physicians, nurses, administrators)?
  - What are the average costs for common medical supplies and medications used in our practice?
  - What are the average costs for the common office supplies, furniture, and technology equipment used in our practice?
  - What discounts and rebates are available through group purchasing organizations (GPOs) and manufacturers?
  - What are the current costs for rent, utilities, and other facility-related expenses?

Growth Strategies:

- **Clinical Trials & Research:**
  - What does our practice need to start a clinical trial/research program?
  - What are the types of clinical trials that are best suited for our practice to be successful?
  - We will need physician buy-in and commitment to be principal investigators (PIs) and sub-investigators (sub-Is).

- **Service Line Supportive Services:**
  - What new revenue stream services can we provide?
  - Are we capturing all possible billable events?
  - Should we research new clinic growth/satellite clinics in suburban areas to meet the demand in those areas?
  - What can we bring in-house vs. outsourcing or referring to?

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Advanced Practice Providers (APP):

- **APP (NP or PA) Integration:**
  - How many additional patients can an APP see per day compared to a physician?
  - What are the additional costs associated with onboarding and credentialing a APP?
  - Will hiring an APP free up physician time for more complex cases, potentially increasing revenue?

- **Financial Impact:**
  - Project the potential increase in revenue generated by the additional patient appointments an APP can handle.
  - Compare the projected revenue increase with the costs of hiring and onboarding an APP to determine the financial viability.

New Offices:

- **Market Research:**
  - What are the demographics and cancer incidence rates in the targeted area?
  - What existing oncology practices are already operating in the chosen location?
  - Is there sufficient patient demand in the area to support a new office?
  - Who are the referring providers / specialties in the market area?

- **Financial Considerations:**
  - What are the estimated costs for rent, renovation, and equipment for the new office?
  - What additional staff will be needed at the new location (physicians, nurses, administrators)?
  - How long will it take for the new office to become profitable?

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- **Operational Planning:**
  - How will the electronic health record (EHR) system be integrated between the central and new office?
  - What strategies will be used to communicate effectively with patients about the new location?
  - What is the staffing model for the clinic site(s)?
  - Will satellite clinics start with clinic only patients, and add infusion services at a later time?

Additional Considerations:

  - What are the potential costs and benefits of adopting new technologies like telehealth or advanced diagnostic tools?
  - How much should be allocated to marketing and advertising efforts to attract new patients?
    - Consider using newspaper, radio, social media, and TV.
  - Is there a cushion built into the budget to account for unforeseen circumstances?

By carefully considering these questions and conducting thorough research, oncology practices can develop a realistic and well-defined budget that supports their ongoing operations and facilitates future growth through strategic initiatives.

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Glossary of Terms

The authors have identified terms from this session's content and other terms thought to be beneficial for reference.

Patient Throughput: The efficiency and speed with which patients move through or flow through various stages of their appointment or care within a healthcare practice, clinic or facility.

Onboarding: The comprehensive process of integrating a new individual into an organization, its culture, and their specific role.

Feasibility Analysis: A systematic and comprehensive evaluation performed to determine the practicality, viability, and potential success of a proposed financial investment, project, or new service line.

Practice Management System (PMS): A specialized software solution designed to handle the administrative and business operations of the clinic.

Electronic Health Records (EHR): A digital version of a patient's medical chart, designed specifically to house and manage clinical information.

Clearinghouses: Third-party entities that act as intermediaries between a practice, clinic or facility and insurance payers (like Medicare, private health insurance companies, etc.) with the primary role of facilitating the electronic exchange of medical claims data.

Market Research: The systematic process of gathering, analyzing, and interpreting data about or within a specific landscape.

Cost-benefit analysis: A systematic economic evaluation method that compares total expected costs of a proposed project, decision, or investment with the total expected benefits typically expressed in monetary terms.

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Principal Investigators (PIs): The lead researcher responsible for the overall conduct and oversight of a clinical trial or a scientific research study at a specific site.

Sub-Investigators (Sub-Is): A qualified member of the research team who is delegated specific, significant study-related tasks and responsibilities by the Principal Investigator (PI) at a particular trial site.

Group Purchasing Organizations (GPOs): An entity that leverages the collective buying power of its members to negotiate discounted prices and favorable terms with manufacturers, distributors, and other vendors for a wide range of products and services.

Current Procedural Terminology (CPT®): A coding system developed by the American Medical Association (AMA) that assigns unique five-digit codes to specific medical services and procedures.

International Classification of Diseases (ICD-10): A coding system published by the World Health Organization (WHO) used to diagnose and classify diseases and conditions.

Healthcare Common Procedure Coding System (HCPCS): A standardized system used to identify medical services, supplies, and equipment. It includes codes from CPT® (Level I) and additional codes for non-physician services (Level II).

Place of Service (POS): A code that identifies the location where a medical service was provided (e.g., hospital outpatient department, physician's office).

Diagnosis Code: A code from ICD-10 that specifies the patient's medical condition(s).

Modifier: A code appended to a CPT® code to provide additional information about the service performed (e.g., unusual procedural service, repeat procedure).

Chargemaster: A hospital's list of standard charges for all services and items provided.

Claim: A formal request for payment from an insurance company for services rendered to a patient.

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Adjudication: The process by which an insurance company reviews a medical claim to determine if it will be paid, denied, or partially paid.

Denial: A decision by an insurance company to not pay for a medical service, procedure, or drug.

Co-payment: A fixed amount a patient pays for a covered service at the time of service.

Coinsurance: A percentage of the covered charges that a patient owes after the deductible is met.

Deductible: The amount a patient must pay out-of-pocket before the insurance company starts to pay for covered services.

Accounts Receivable (AR): The money owed to a healthcare provider by patients and insurance companies for services rendered.

Aging: The process of categorizing unpaid claims based on how long they have been outstanding.

Appeal: A formal request to an insurance company to reconsider a denied claim.

Collection: The process of obtaining payment from patients or insurance companies for outstanding medical bills.

Write-off: The amount of money a healthcare provider considers uncollectable and removes from its accounts receivable.

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Case Scenarios

Case Study #1: Expanding Oncology Care with a New Nurse Practitioner – Sunshine Oncology

Sunshine Oncology is a mid-sized oncology practice located in Austin, Texas. They currently have two medical oncologists overseeing a team of nurses, medical assistants, and administrative staff. Due to a recent surge in patient referrals and an aging population, the practice is experiencing longer waiting times for appointments and increased physician workload. To address these challenges, Sunshine Oncology is considering hiring a nurse practitioner (NP) to expand their capacity and improve patient access to care.

As the practice begins to plan for a budget to hire an NP, there are challenges that must be considered. There are several factors that will provide justification and strategy to overcome those challenges. The first of the challenges is an increase in patient demand. Patient referrals have grown by 20% in the past year, which has led to longer wait times for new patients to get an appointment with the medical oncologist. This may lead to patients looking for other cancer centers in the area that can see patients sooner. A second challenge is physician burnout. The current workload for the two oncologists at this practice is unsustainable, which raises concerns about potential burnout and the impact it may have on the quality of care. Another challenge the practice will face is referrals, in which case the practice needs to offer more appointments to meet patient demand and improve access to timely care.

The next factor to consider is the potential benefits of hiring an NP. Increased patient throughput can occur when the NP can handle routine appointments, manage chronic conditions, and order medications, thereby freeing up the physicians for complex cases and new consultations. Shorter wait times, increased access to care, and improved communication between the NP and patients are pivotal for patient satisfaction. Many oncology NPs can provide specific details about treatment, answer questions about infusions, and streamline some aspects of care—potentially improving the overall efficiency of the practice. Overall, the addition of an NP can improve patient outcomes that are related to quality of life, continuity of care, and because NPs generally have more availability, they will also address barriers to care.

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There are risks and benefits to hiring an NP regarding revenue and budget. The biggest risk of hiring an NP is receiving referrals from the medical oncologists and outside referral sources. Medical oncologists may keep the referrals and associated revenue for themselves, which puts the practice at risk by paying the salary of a provider who is not generating revenue. In a community-based oncology practice, the NP may be hired as a contract provider, with the guarantee they will receive referrals from outside sources. In a private practice setting, however, there are many instances where the NP's salary is paid directly by the hiring physician. This usually only happens in states where the NP directly works with the medical oncologist by seeing many of the existing patients, allowing the physician to see more new patients in a timely manner. Therefore, the benefit of hiring an NP is that they have their own patient schedule, allowing the practice to schedule new patients faster. Additionally, this can help eliminate overbooking appointments, as well as reducing patient wait times. In turn, revenue for the practice increases, allowing more throughput of patients, resulting in heightened patient satisfaction. Increased patient satisfaction also impacts the ratings of the practice, which improves its reputation, referral patterns, and volume of patients. These lead to more revenue opportunities, and within a hospital-system, has the opportunity to drive patients to other specialty services such as surgery, radiology, and other oncology-related disciplines.

Next, data gathering and analysis must be carried out to ensure Sunshine Oncology has the information needed to develop and support their budget. They will need to gather historical patient data to help analyze appointment volumes, patient demographics, and diagnoses over the past year to project future needs. Sunshine Oncology will also need to research national benchmarks for NP productivity in oncology settings to estimate the number of patients an NP can see per day. Billing rates are another data point to research, and this can be done by obtaining reimbursement rates for common NP services from Medicare and private insurance companies.

The next step for Sunshine Oncology is the development of a comprehensive budget to determine the feasibility of hiring an NP. Some of the key cost considerations are:

- Salary and benefits: The practice will need to research the average salaries and benefits for NPs in the Austin area, including base salary, signing and/or relocation bonus, health insurance, malpractice insurance, and continuing education funds.

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- Recruitment costs: Sunshine Oncology should factor in advertising expenses, agency fees, and interview travel and meal costs.
- Onboarding costs: An estimation of time and costs for training, credentialing, and setting up the NP's workspace must be prepared; the cost of an additional computer set up, phone, and any other equipment for the NP must be factored in.
- Potential revenue increase: The potential increase in revenue generated by the additional patient appointments the NP can handle need to be projected by considering billing rates for NP services and estimated patient volume. The list of services an NP can bill for has expanded over the last few years, providing more opportunities to fully utilize the clinical expertise of an NP. Adding necessary support staff for an NP, such as a medical assistant, should also be considered in the budget. Questions such as “Are there enough exam rooms for another provider, which may reduce the current number of rooms the physicians are using?” and “Will the NP need an office, or just a workspace when not seeing patients?” must be addressed, as well as whether the addition of the NP will increase the volume of patients seen.

It is time for Sunshine Oncology to make the long-awaited decision. By comparing the projected revenue increase from additional patient appointments with the costs of hiring and onboarding an NP, the financial viability of this option can be determined. Additionally, they should consider the intangible benefits of improved patient access to care, reduced physician workload, and the potential for practice growth.

In conclusion, hiring a Nurse Practitioner can be a strategic decision for Sunshine Oncology to address their capacity challenges and improve patient care. With a carefully developed budget that considers both costs and potential revenue increases, they can make an informed decision that ensures the financial sustainability of the practice while fulfilling their mission of providing high-quality oncology care.

Case Study #2: Expanding Cancer Care Accessibility – Hopewell Oncology Associates

Hopewell Oncology Associates is a well-established oncology practice located in the heart of a major metropolitan city. They boast a team of renowned oncologists and provide excellent cancer care to a loyal patient base.

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However, their central location presents a growing challenge with many patients struggling with long commutes due to increasing traffic congestion and limited parking options.

Hopewell Oncology Associates is facing challenges regarding accessibility that need to be addressed. The central location is becoming less convenient for many patients, particularly those living in the growing suburbs, which is creating accessibility issues. In their current facility, they have limited growth potential due to limited space for expansion, hindering the practice's ability to accommodate new patients or add new services. Retention and recruitment pose as another set of challenges, as accessibility issues discourage potential patients from choosing Hopewell Oncology Associates and make it difficult to attract new oncologists seeking practices with growth opportunities. First, the practice should look at the potential benefits of opening a satellite clinic in a suburban area to meet the patients where they live. A suburban satellite location would be more convenient for patients residing outside the city center—reducing travel time and stress—and would improve patient access. The suburbs offer a growing population with a potential demand for oncology services, allowing Hopewell to expand their patient base. Enhanced recruitment opportunities would benefit from a new, modern facility that could be attractive to qualified oncologists seeking to join a growing practice. Recruitment would also improve, as living closer to the satellite suburban clinic can provide a better work-life balance for staff if they spend less time commuting to and from work. There would also be potential for specialized services with a new space, allowing Hopewell to offer specialized oncology services that may be unavailable at the central location.

Hopewell Oncology Associates will need to conduct a thorough feasibility analysis before opening a new office. One of the key considerations they will want to explore is doing market research, including analyzing demographics and cancer incidence rates in the targeted suburban areas to assess patient demand. The practice will also want to meet with city and county planners to learn about future growth in the area/region. Some of the topics to discuss in these meetings should revolve around whether there are any new businesses moving into the area in the next five years, as this would increase housing development and population growth. This growth would also add other new businesses to the area to accommodate the population growth, such as grocery stores, schools, restaurants, and possibly other healthcare providers. The location of the new clinic will be important to locate in order to identify a suitable site with good access to major roads, public transportation, and ample parking. Next, they will need to develop detailed financial projections concerning rent, insurance, renovation costs, staffing needs, marketing costs, equipment and furniture acquisitions, and potential revenue from the new location.

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As part of their analysis of the area, Hopewell will need to look at any existing oncology practices in the vicinity to understand the competitors' services, market share, and overall practice make-up.

What are the operational considerations to look at? The practice will want to determine staffing needs for the new office, including physicians, nurses, medical assistants, pharmacy staff, and administrative personnel. The staffing model will be determined by these factors: the expected patient volume for new location, which will determine the size of the office, as well as the number of infusion chairs, exam rooms, and providers needed. Much of this will be determined by the feasibility study and meeting with city and county planners. Safety and compliance play a role in the staffing of RNs for infusion spaces to assure each is achieved based on the acuity of the patients. Marketing must also create a strategy focused on informing existing patients about the new location and its services.

When reviewing the technology infrastructure, Hopewell Oncology Associates must ensure seamless integration of Electronic Health Records (EHR), Practice Management Systems (PMS), phone systems, clearinghouses, pharmacy systems, and other platform systems between the central and suburban offices.

The next step is making the final decision by carefully considering the market research, financial projections, and operational needs. With this information, Hopewell can now make an informed decision about opening a suburban office. Expanding their reach will require significant planning and investment, and the potential benefits in terms of improved patient access, increased patient population, and enhanced recruitment opportunities make it a strategic consideration for Hopewell's future growth. Based on the research and forecasts, another option the practice can explore is the possibility of either consolidating all their services into the new suburban location or expanding new services into one or both locations. Consolidation into the new suburban location may provide Hopewell with an opportunity to grow their patient volumes and market share by meeting the patients closer to home. Patients in suburban and rural areas will be more likely to establish care closer to home, eliminating the stress and anxiety of going into the big city. There are many options to explore through careful research and strategy planning.

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In summary, Hopewell Oncology Associates faces a growing need for improved patient accessibility. A strategic expansion into the suburbs holds the potential to enhance patient care, attract new patients and talent, and solidify Hopewell's position as a leading provider of oncology services in the region. By meticulously planning and analyzing the feasibility of a new office, Hopewell can unlock significant opportunities for growth and ensure continued success in delivering high-quality cancer care, and meeting the needs of the community, closer to the patient's homes.

Case Study #3: Building a Sustainable Future - Evergreen Oncology Clinic

Evergreen Oncology Clinic is a thriving oncology practice with a reputation for compassionate care. Their team of dedicated professionals provide comprehensive cancer treatment services. However, without a well-defined annual budget, Evergreen struggles to allocate resources effectively, hindering their ability to plan for growth and optimize operational efficiency.

The lack of a proper budget poses many problems for Evergreen Oncology, as it would for any business. Some of the challenges here include limited financial visibility, tracking expenses, and projecting future financial needs—especially unexpected operating expenses when equipment fails and must be replaced. Inefficient resource allocation might be reactive rather than strategic, potentially leading to underinvestment in critical areas, and thereby causing disruption in the operations of the practice. An undefined budget creates growth constraints, which hinders the ability to plan future investments necessary for practice expansion, upgrading equipment, and even recruitment of providers and staff.

What are some of the benefits of a well-defined annual budget? A budget provides a framework for tracking income and expenses, allowing for proactive financial management and control. Budgeting allows for strategic allocation of resources based on patient needs and practice goals, as well as data-driven, informed decision-making regarding staffing, equipment, and service offerings. Also, a strong budget can be used to project future financial needs and enhance long-term growth strategies.

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The first step is to develop an annual budget following a well-defined, comprehensive approach. Here are many of the key factors to consider for the budget:

- Revenue projections: Evergreen Oncology must estimate income from patient visits, insurance reimbursements, potential grants, potential clinical trials, and other sources. They need to utilize historical data, patient trends, and national, industry benchmarks for accurate projections.
- Cost categorization: Evergreen must group expenses into major categories such as:
    - Personnel costs: Salaries, benefits, payroll taxes, and training for all staff.
    - Facility costs: Rent, utilities, maintenance, property taxes, and landscaping care.
    - Medical supplies & equipment: Lab testing equipment (analyzers & centrifuges), imaging supplies (radioactive sources), equipment lease/purchase, exam room and infusion room supplies, and furniture.
    - Pharmacy costs: Medications, equipment, medical supplies (syringes, needles, closed-system devices), regulatory upgrades, biological cabinet certification fees, workstations, drug cabinets, refrigerators, freezer, storage shelving, printers, electronic monitoring & notification of temperature changes.
    - Marketing & technology: Advertising, website maintenance, EHR & PMS system fees, phone systems, notification systems for freezers/refrigerators, computers, printers, and monitors.
    - Administrative costs: Office supplies, insurance, accounting fees, and outsourcing fees.
- Evergreen must have a detailed cost analysis, using historical data and industry benchmarks to estimate costs in each expense category.
- A cost-benefit analysis is used when considering new expenses, to analyze the potential benefits (e.g., increased revenue and improved efficiency) against the costs.

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- Scenario planning helps develop different budget scenarios to account for fluctuations in revenue or unexpected expenses that are critical to the operations of the practice. Evergreen must create a budget that allows them to create a positive cash flow and build a reserve in the event of an emergency. The size of the reserve will be dependent on their monthly expenses, which includes salaries/benefits, overhead, costs of drugs and supplies, etc.

One very important aspect of creating and implementing a well-defined budget is to continuously monitor it; monthly vigilance is key to staying successful and achieving the goals of the practice. Evergreen needs a system to track actual expenses throughout the year and compare them to the budgeted figures. This process allows Evergreen Oncology to identify cost deviations by regularly monitoring expenses and pinpointing areas where spending exceeds allocated amounts. Overspending can be addressed immediately, which allows Evergreen to determine if they underestimated figures or if something was missing while developing their budget. This then leads to budget adjustments. If deviations are significant, Evergreen can adjust the budget or implement cost-saving measures. Finally, Evergreen will need to look at their own performance analysis by comparing actual results to the budget, which helps assess the overall financial health of the practice.

In conclusion, developing and implementing an annual budget is a critical step for Evergreen's long-term success. A well-defined budget provides financial clarity, enables strategic resource allocation, and facilitates data-driven decision making. By actively managing their finances, Evergreen can ensure the stability and growth of their practice while delivering exceptional oncological care to their patients.

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