Optimizing Your Bottom Line... Migrated Thinking Required

GASCO Administrators Meeting May 4, 2013



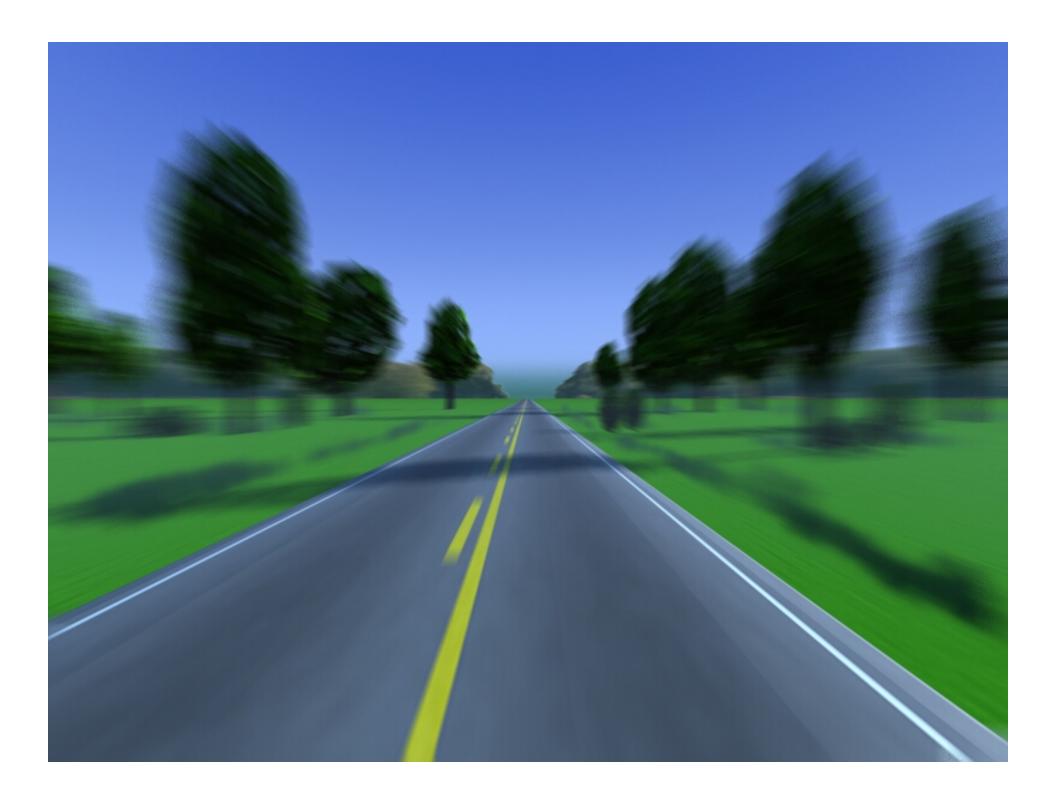
JOHNAKSCIN CONSULING



Objectives

Define Landscape
 Discuss Models
 Engage Solutions
 Actionable Wisdom





The Good News...

Demand for Cancer Care is Increasing



It is estimated that 2,220,692 new cases of cancer will occur in the US in the year 2030 – a 55 percent increase over 2008 numbers.¹



In the past two decades, the overall death rate from cancer decreased by 22.9% in men and 15.3% in women.²



Improvements in cancer screening and advances in treatment have resulted in larger numbers of cancer patients and cancer survivors.



The demand for oncologist services will outstrip the available supply of oncologists by 2020 and the nation will face a shortage of 2,550 to 4,080 oncologists by 2020.³

Sources: ¹American Institute for Cancer Research Press Release, February 1, 2012..²American Cancer Society (ACS; Siegel R et al. CA Cancer J Clin 2012;62:10-29) ³ASCO Study of Workforce for Community Oncologists (excluded surgeons and radiation oncologist) in 2007.

Top 10 Physician Practice Trends



Akscin's 5.5 Brutally Honest Queries ...

1. How many new patients/FTE Oncologist per year? 2. What is your Ave Days in A/R (DSO)? 3. What is your % MC w/o supplemental insurance? 4. What is your ratio of FTE NPPs to FTE Onc's? 5. Do you have any Managed Care contracts? If Yes go to 5.1 5.1: Do you know where they are? 5.2: When did you last review them? 5.3: Do you know the renewal dates? 5.4: Do you know the time limit for changes? 5.5: Have you ever missed this deadline?

Migrated Thinking©

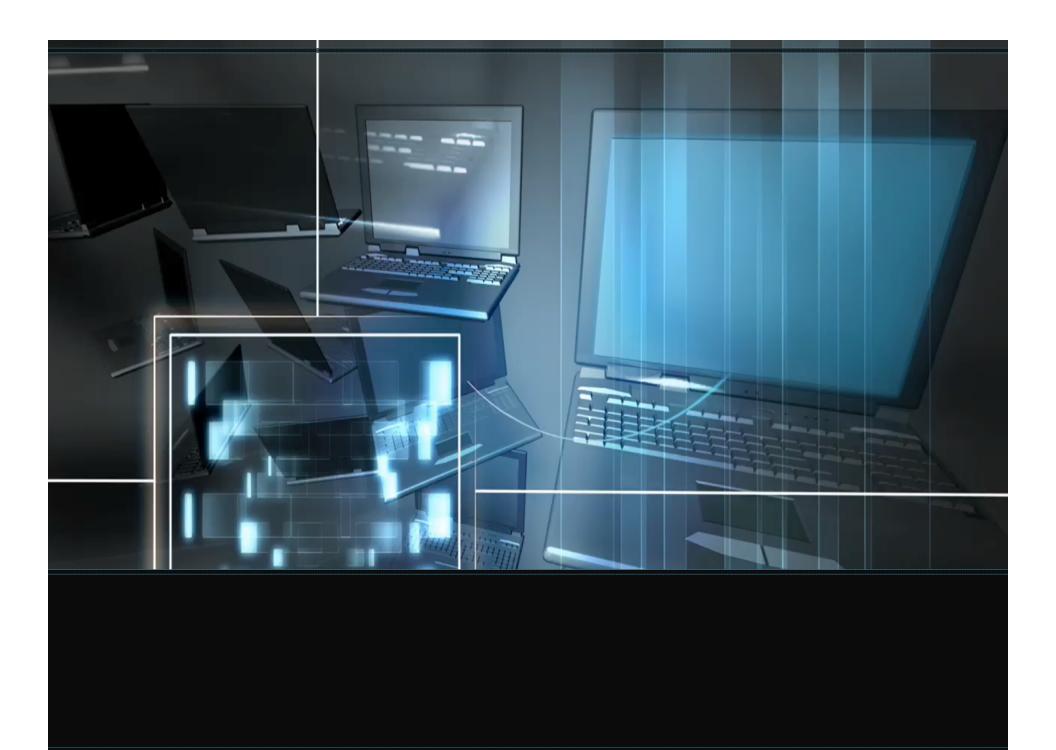
Technology

Focus On

Operations

Efficiency

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Focus on Technology



Are your Technology Solutions the best for today's environment?

How well are your people trained?

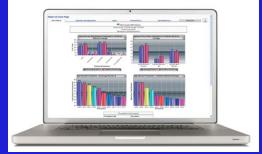
Automate, Automate, Automate

How well do you use the reports function?

Who analyzes the reports?

How do you take action on the information?





Focus on Operations



Midlevel Providers 1:1 2:1

Support?

Total FTE Staff

FTE CTxRN/FTE HemOnc = 1.8

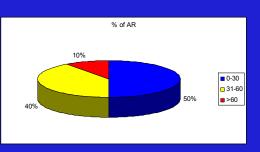
Flex? Cross Training?

Segregate services Infusions Injections Triage **RN** Phone New

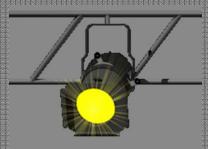
Benchmarks DSO-AR How low can you go? 28 days MC w/o Supplement 13% RN's/FTE Dr. CTx Pt/RN/Day

Yourself Negotiation skills Technology skills **Referee skills**





Focus on What Matters...



1 Pricing & Value

Variance .25%-.5%

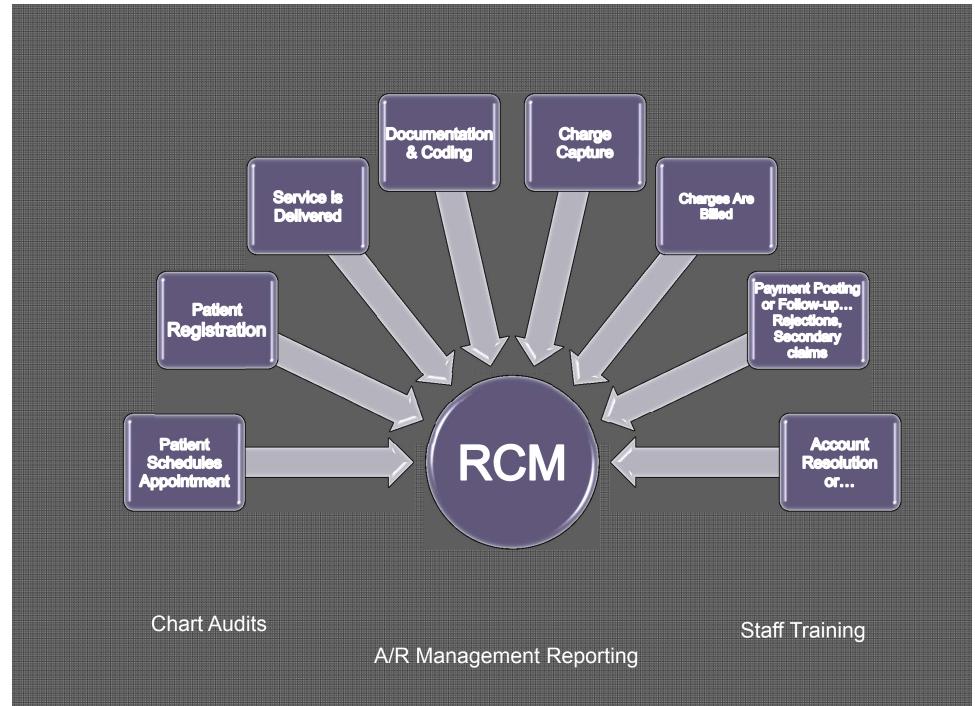
#2 Charge Capture & Inventory Variance 3% - 6%

#4 MCO Contracting

Variance 5% - 10%

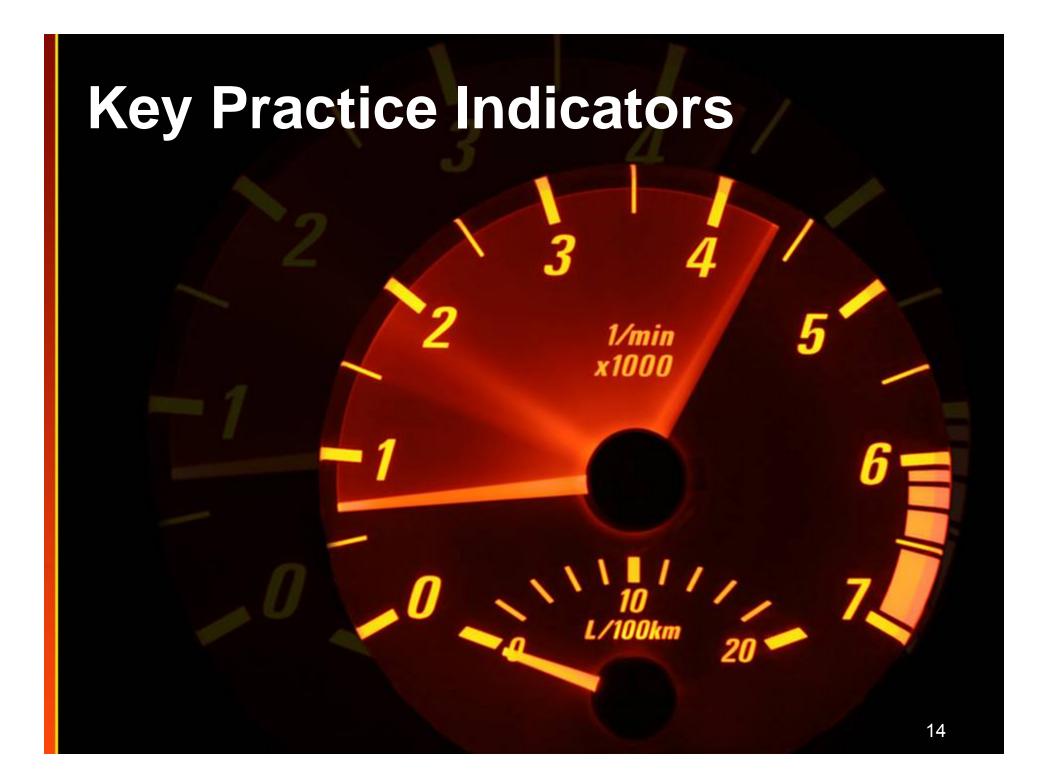
#3 RCM

Variance 4% - 8%



RCM Self Audit

- Process for returned claims and statements?
- How are zero contractual adjustments posted?
 - Transfers to the patient?
- How are denied claims posted and tracked?
 - Transfers to the patient?
- Process for underpayments?
 - Get the patient involved?
- How are rejections tracked and resolved?
 - Transferred to the patient?
- Process for credit balances?
 - Refunds timely?
- Review of bad debt, write-offs, etc?
- Small balance billing? Write-off?



KPI's, Key Practice Indicators Chart of Averages

KPI	Result '09/'10
Ave # of new patients per FTE Hem-Onc	378 - 349
Ave Days in A/R (DSO) CY	36.5 - 32.3
Ave FTE NPPs per FTE Hem-Onc	0.60 - 0.57
Ave # of established patient OVs per FTE Hem-Onc	3490 - 3728
Total FTE Staff per FTE Hem-Onc	8.4 - 8.1
FTE CTx RN per FTE Hem-Onc	1.8 - 1.9
Total PE per FTE Hem-Onc per yr (in millions) <no dr's=""></no>	\$3.125 - \$3.175
*CODPF per FTE Hem-Onc per year (in millions)	\$2.337 - \$2.575
*Total Rev per FTE Hem-Onc per year (in millions)	~\$4.650 - \$4.525
Drug Rev per FTE Hem-Onc per year as %	68% - 63%
Drug Admin Rev per FTE Hem-Onc per year as %	12% - 13%
E&M Rev per FTE Hem-Onc per year as %	12% - 12%
Data Extracted from 2010 and 2011 Oncology Metrics Annual Bench	marks Survey

KPI's, Key Practice Indicators Chart of Averages

KPI	Result '09/'10
Ave Payor Mix by Billed Charges	
Medicare (Traditional FFS and MC HMO)	47% - NA
Medicaid	3% - NA
Managed Care (Pure HMO and Discounted FFS)	36% - NA
Indemnity	14% - NA
Ave Revenue Mix	
Drugs	69% - 65%
RTx	6% - 8%
Infusion	8% - 8%
E & M	8% - 8%
Imaging	4% - 5%
All Other (Lab, In-Office Rx, Non-Medical	~ 5% - 6%
Data Extracted from 2010 and 2011 Oncology Metrics Annual Be	nchmarks Survey

Your Report Card...

KPI	KPI Better Performers				
% of A/R > 90 days	16.69%	%			
Days gross FFS charges in A/R aka DSO Days Sales Outstanding	29.40				
Adjusted FFS collection %	100.00%	%			
Patient accounting support staff/FTE physician*	.87				
Total revenue per FTE Hem Onc	\$4,525,000	\$			
% of claims submitted electronically	95%	%			
% of claims denied on first submission	4%	%			
*Includes coding, charge entry,	cashiering.	17			

Ten things every oncology group should be doing... YOUR CHECKLIST FOR SUCCESS



Develop Practice Dashboard



98.5%

Payments /

Charges 45.4%

 Decide on data to be measured

- Develop tool

Days in AR

- Monthly reporting
- Explain variances

Days in AR	24 G	ross Collection	49.4%	Net Co	ollection %	98.
5		otal 12 Month Collections: 22,183,183.53		Total 12 Month Adjustm \$22,073,901.57		ents:
Total 12 Month Charges \$44,911,828.77						
Total Full Time Equivalent	s 216	Monthly Payor Mix				
Physicians 21.5 NP_PA 14.0		Payor	Percer of Tot	ntage al Chgs	Percentage of Total Pmnts	Pa Ch
Admin 7.0 Staff 149.0		Blue Cross Blue Caro Medicare		.7% .3%	36.5% 24.8%	

Autor 1.0				
Staff 149.0	Medicare	32.3%	24.8%	36.0%
	United Healthcare	7.1%	6.4%	42.8%
PT 18.0	Cigna	6.9%	7.4%	50.3%
Fulcrum 6.5	Medicaid	6.4%	4.8%	35.1%
	Aetna	4.0%	4.3%	50.9%
	Other	2.3%	2.7%	55.7%
	Medcost	1.6%	1.0%	30.0%
	Private Pay	0.9%	11.5%	580.0%
	Wellpath Coventry	0.9%	0.6%	32.6%

 Tickets Billed
 8519

 Monthly Billed
 \$4,282,695.10

 Monthly Collected
 \$1,948,393.72

 Monthly Adjusted
 \$2,184,170.92

YTD Payroll Total Payroll \$4,654,761.19 Employee Payroll \$2,630,504.79 Physician Payroll \$2,024,256.40 Overhead Percentage Overhead 73.6%

2,024,256.40
1,875,469.33

 Total Patients Seen

 Office
 New
 1290

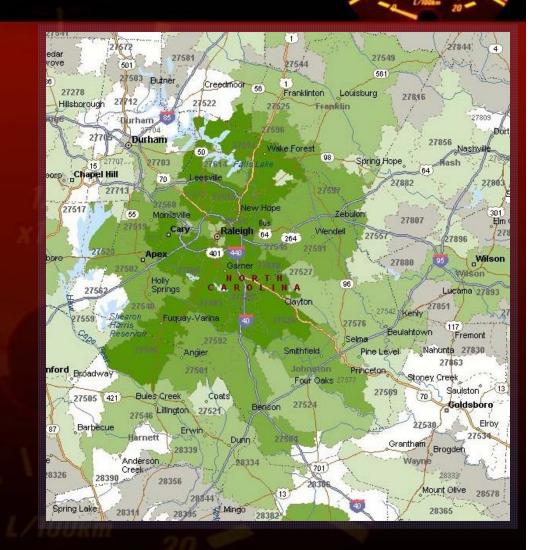
 Office
 Established
 3853

 Hospital
 New
 308

,		Hospital Established 619					
JUNE 2010	JUNE 2009	VAR	YTD 2010	YTD 2009	VAR		
33.5	35.0	(1.5)	36.5	34.0	2.5		

Market Evaluation

- What is your market coverage?
- Where do your patients come from?
- Where are your competitors?
- Where should you move next?



Budgets



G&A Expense Budget

Your Company, Inc. For Period Ending April 30, 2010

		This Month			Year to Date		
	Budget	Actual	Variance	Budget	Actual	Variance	
FIXED							
Exec salaries	\$3,200	\$1,900	(\$1,300)	\$31,100	\$46,600	\$15,500	
Office salaries	1,300	8,700	7,400	36,400	45,100	8,700	
Employee benefits	22,900	19,800	(3,100)	222,660	259,000	36,340	
Payroll taxes	14,200	7,500	(6,700)	28,900	41,800	12,900	
Travel and entertainment	4,100	5,100	1,000	15,100	20,000	4,900	
Directors' fees and expenses	38,400	36,100	(2,300)	187,300	167,800	(19,500)	
Insurance	18,600	10,000	(8,600)	64,100	58,200	(5,900)	
Rent	47,500	49,700	2,200	377,500	333,300	(44,200)	
Depreciation	46,600	30,200	(16,400)	334,000	201,400	(132,600)	
Taxes	40,400	59,900	19,500	415,900	404,600	(11,300)	
Legal	28,200	31,200	3,000	214,800	193,900	(20,900)	
Audit	10,600	11,800	1,200	87,200	104,100	16,900	
Telephone	15,500	10,300	(5,200)	15,200	21,400	6,200	
Utilities	31,000	39,300	8,300	68,000	97,400	29,400	
Contributions	36,500	43,700	7,200	87,900	92,100	4,200	
Postage	27,300	30,500	3,200	130,400	161,900	31,500	
Dues	21,300	30,800	9,500	142,100	180,700	38,600	
Miscellaneous	14,800	20,300	5,500	91,000	97,800	6,800	
VARIABLE							
Office salaries	23,000	32,400	9,400	53,000	29,500	(23,500)	
Employee benefits	29,800	27,800	(2,000)	292,600	170,200	(122,400)	
Payroll taxes	4,700	3,300	(1,400)	14,400	17,100	2,700	
Travel and entertainment	36,100	53,400	17,300	111,400	108,900	(2,500)	
Telephone and telegraph	4,600	6,300	1,700	47,500	44,300	(3,200)	
Stationary and office supplies	6,600	8,100	1,500	15,100	13,400	(1,700)	
Bad debts	11,600	10,700	(900)	57,700	80,700	23,000	
Postage	18,700	20,400	1,700	131,400	70,900	(60,500)	
Contributions	47,900	47,500	(400)	316,800	212,300	(104,500)	
Miscellaneous	42,100	34,900	(7,200)	232,700	331,900	99,200	
TOTAL	\$647,500	\$691,600	\$44,100	\$3,822,160	\$3,606,300	(\$215,860)	

Monthly

- YTD
- Year over year
- By location
- By service

Five-Year Financial Projection

- Expenses and revenues
- Tool for "what if" scenarios
- Tool for "make/buy" decisions
- Must tie to budget

	CURRENT	2010	2011	2012	2013	2014
Revenue	\$5,407,000	\$5,395,210	\$5,383,420	\$5,371,630	\$5,359,840	\$5,348,050
Non-MD Cost	\$4,007,000	\$4,127,210	\$4,247,420	\$4,367,630	\$4,487,840	\$4,608,050
Total Available for MD Compensation	\$1,400,000	\$1,268,000	\$1,136,000	\$1,004,000	\$872,000	\$740,000
Average Compensation Per MD	\$200,000	\$181,143	\$162,286	\$143,429	\$124,571	\$105,714
Total Change from Previous 12 months		(\$132,000)	(\$132,000)	(\$132,000)	(\$132,000)	(\$132,000)
				Lee V		



Strategic Plan

5

- Five-year plan for strategic direction
- Growth
- Location expansion
- Facility
- Service expansion
- Mergers

- New services
- Joint ventures
- New technology
- Procedures
- Partnerships
- ROI analysis

Providing Cost-Effective Care



- Established clinical guidelines
- Standardized CTx orders
- Tools for regimen comparisons
- Tools for compliance
- Plans for EOL and Supportive Care

Marketing



- Develop a plan
- Understand the various customers
- Budget
- Execute

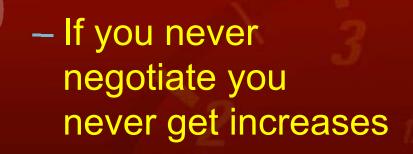
Customer	 Referral physicians
Message	 Quality Services What can we do to get better
Delivery	 Drop-by visits Survey Follow up on problems



Fee Schedule Verification

- Verify all payer schedules prospectively
- Process for following up on discrepancies
- Process for automatic fee schedule increases
 Process for identifying "silent PPOs"

Negotiate Managed Care Contracts



- Don't take "no" for an answer
- Negotiation is all about leverage
- Follow the negotiation process





Thinning the Herd

- Understand your payer contracts and the rates by payer
- Understand the concept of fixed capacity
- Negotiate or terminate your lowest payer
- Increase your average payment per service

EXAMPLE – BEFORE				EXAMPL	E – AFTER				
	Number of		Revenue per			Number of		Revenue per	
Payer	Procedures	% of Total	procedure	Total Revenue	Payer	Procedures	% of Total	procedure	Total Revenue
Medicare	1,000	40.4%	\$350	\$350,000	Medicare	1,087	43.9%	\$350	\$380,450
Medicaid	450	18.2%	\$325	\$146,250	Medicaid	489	19.8%	\$325	\$158,925
BCBS	300	12.1%	\$500	\$150,000	BCBS	327	13.2%	\$500	\$163,500
UHC	200	8.1%	\$375	\$75,000	UHC	0	0.0%	\$375	\$0
CIGNA	200	8.1%	\$650	\$130,000	CIGNA	220	8.9%	\$650	\$143,000
Aetna	150	6.1%	\$600	\$90,000	Aetna	163	6.6%	\$600	\$97,800
Humana	100	4.0%	\$550	\$55,000	Humana	108	4.4%	\$550	\$59,400
Coventry	75	3.0%	\$750	\$56,250	Coventry	81	3.3%	\$750	\$60,750
Total	2,475		\$425	\$1,052,500	Total	2,475		\$430	\$1,063,825

Akscin's Pearls of Wisdom

Collaborate

Engage

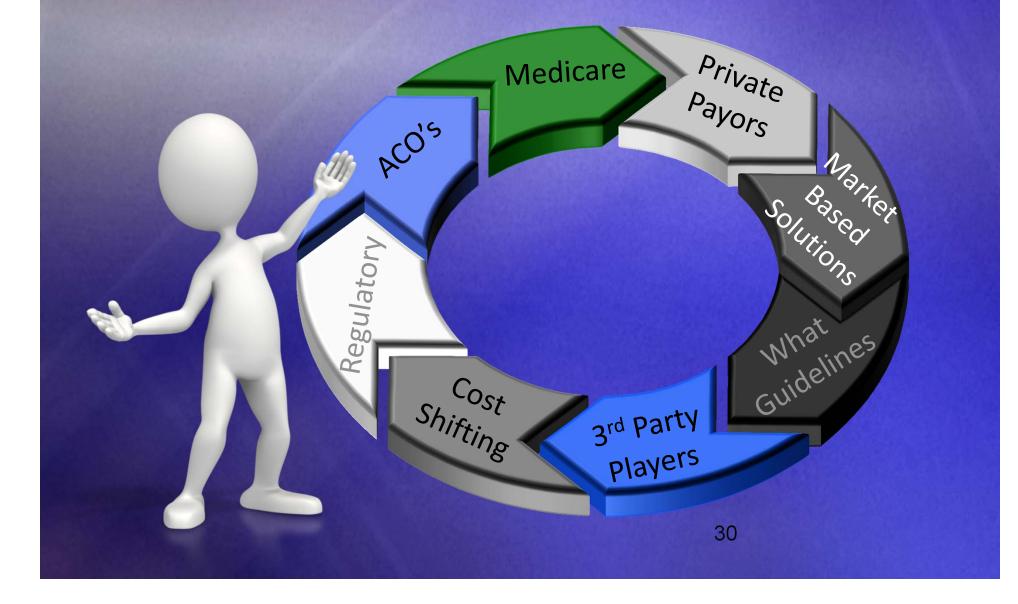
• Focus

Develop

Measure

Celebrate

Your Circle of Success...



Manage The Business

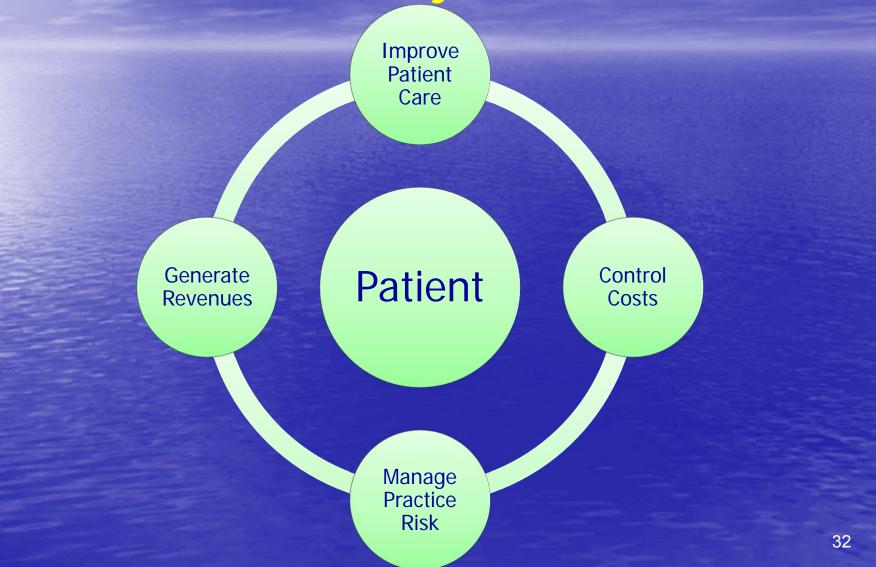


Look at "Best Practices" Think Out of the Box

Consolidate Where It Makes Sense

Are The Right People in the Right Job?

Solutions Must Be Directly Linked to Your Objectives



Akscin's Pearls of Wisdom

If you don't have a seat at the table, you may end up on the menu...

Thank you for the opportunity to provide this information.

And...Thank you for caring of cancer patients and their care-givers.

JohnAkscinConsulting

Committed to Exceeding Your Expectations

John Akscin

Principal Consultant

Phone: 314.591.7799 Email: John@johnakscinconsulting.com www.johnakscinconsulting.com