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# **Ensuring Quality Cancer Care**

## Components of Community Oncology Care

Produced by the Community Oncology Alliance  
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# Ensuring Quality Cancer Care

## Components of Community Oncology Care

The Community Oncology Alliance (COA) has commissioned Avalere Health, a strategic healthcare advisory firm, to conduct a comprehensive study of the components of delivering modern-day cancer care in community oncology practices. This study will collect detailed qualitative and quantitative data in order to identify and quantify the full range of services performed by community oncology practices.

Certain components of cancer care are reimbursed by Medicare and private insurers under existing payment systems, but many of the services are unrecognized and thus uncompensated by payers. By appropriately identifying and quantifying each of the requisite services delivered in a community oncology practice, payers can then recognize and pay for each of these discrete services. Appropriate payment for each component of care would ensure that community oncologists receive, in aggregate, the compensation needed to deliver optimal care to cancer patients.

A key component of the study is the development of a comprehensive list of services furnished in community oncology practices. The COA Components of Care Subcommittee categorized these services into clinical and operational components of care. Clinical components are services: (1) furnished by a physician, nurse practitioner, or other midlevel provider; and (2) involve direct patient interaction (i.e., “touching the patient”). Other practice activities and overhead not directly related to a patient are considered operational components.

This document provides detailed descriptions of the components of care furnished in community oncology practices, which are organized into the following 12 categories:

<b>Clinical Components of Care</b>	Treatment Management Office and Hospital Care Provision of Therapeutics	Supportive and Palliative Care Telephone Support Clinical Trials
<b>Operational Components of Care</b>	Scheduling Preauthorization and Financial Counseling Pharmacy Operations	Billing and Collections Payer Contracting General Practice Management

In the next phase of the study, community oncologists will be tasked with completing an in-depth survey instrument to provide data regarding the time community oncology staff spend on each component of care. The survey will also request detailed financial information so that the actual capital and expense costs that contribute to the total cost of running a community oncology practice can be quantified.

Detailed descriptions of the capital and expense costs are also captured in this document and are classified under the following eight categories:

<b>Capital and Expense Costs</b>	Employee Benefits Insurance and Other Personnel Expenses Drug Financing and Purchasing Clinical Supplies and Equipment	Office Supplies and Equipment Electronic Medical Record (EMR) System Patient Bad Debt All Other Facility Costs
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# 1 Treatment Management

## Treatment Planning

Developing an action plan to treat the cancer based on the patient's type of cancer, stage, comorbidities, and preferences.

- Assess cancer staging (involves measuring the severity and progression)
- Assess predictive and prognostic markers (certain cancers need to be tested for tumor receptors in order to identify the most effective combination of drugs to be used in treatment)
- Conduct a pathology review and consult with pathologists
- Assess a patient's comorbidities (i.e., other medical conditions such as cardiovascular disease, which will likely impact treatment decisions)
- Research best treatment options for rare or special cases
- Research clinical trials available and assess patient's candidacy in program
- Establish goals for therapy intervention with patient and family members
- Develop specific chemotherapy regimen and administration protocol
- Assess and discuss patient's needs for medical, psychosocial, social, spiritual, and financial support throughout the cancer experience
- Complete original treatment plan

## Treatment Response Assessment and Treatment Modification

Modifying the treatment plan during the course of care based on patient's tolerance and outcomes.

- Assess response and tolerance of treatment
- Continue, discontinue, or modify treatment plan based on assessment
- Review further treatment alternatives
- Change to alternative treatment, other standard therapies, or clinical trial alternatives
- Plan and coordinate appropriate laboratory, medical, and imaging evaluations to assess treatment response and tolerance
- Review and assess clinical, laboratory, and medical imaging data

- Review and assess interval history, catalogue, and grade toxicities and interventions
- Review and assess interval quality of life, disease-related symptoms, and external psychosocial changes
- Transition to survivorship follow-up
- Formulate and discuss supportive care or hospice recommendations

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## **Treatment Counseling**

Working closely with patients and their families to teach them about cancer, its treatment (including the financial impact of oncology drugs and services), and coping with and managing treatment side effects.

- Counsel the patient and family/friend caregivers on the treatment plan
- Evaluate physician's treatment plan in the context of patient's insurance coverage and financial resources
- Discuss clinical trials available to patient
- Provide a formal, face-to-face education session covering drugs, symptoms, side effects, diagnostic tools, and resources available at the practice and in the community
- Discuss, as needed, details of the patient's condition and treatment plan (e.g., test results, chemotherapy regimen including oral therapeutic management, treatment progress, pain management, nutrition, and avenues of support)
- Provide information packages that contain educational materials on topics such as coping with cancer and its side effects, information on the specific disease, treatment protocols, managing treatment-related fatigue, nutrition, choosing alternative therapies, paying for treatment, and available services at the facility and in the community
- Provide a full-service resource library with books, pamphlets, journal articles, videos, and audiotapes that can be used during chemotherapy sessions or taken home
- Recommend websites with information on state and local cancer resources, including patient and caregiver support groups
- Provide Internet access for patients who would like to perform independent research

## Testing and Analysis

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Conducting certain lab testing in-house on the day of drug administration to determine if patient can receive chemotherapy drugs.

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- Order and assess clinical, laboratory, and radiographic tests/studies
  - Complete lab testing (e.g., complete blood count)
  - Complete radiology tests/studies
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## Care Coordination

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Interacting with other physician specialties and facilities to deliver care that is consistent with the nature of the cancer and the patient's needs.

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- Coordinate other treatments, such as radiation
- Monitor supportive care therapy
- Obtain referrals from primary care physicians for office visits and procedures performed at the practice, as well as referrals for office visits and procedures performed by other providers
- Provide diagnosis and treatment documentation to other facilities providing care to patients (e.g., reference labs or radiation oncology facilities)
- Communicate with other service providers (current or former) with whom the patient has contact to discuss developments affecting that patient, answer questions, and incorporate feedback from other providers into the treatment plan
- Make referrals for additional professional intervention if the level and nature of the patient's distress are more complex than can be addressed through support given by facility staff
- Collect pathology, radiology, and clinical records from locations outside the practice

## **Patient Financial Counseling**

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Discussing treatment options with regard to coverage by patient's insurance provider and what the patient can afford to pay for out of pocket since this may affect the treatment plan.

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- Fully evaluate the patient's insurance coverage and available financial resources before initiating therapy
- Educate patients on various aspects of health insurance, such as deductibles, copays, coinsurances, and benefit limitations
- Contact charitable organizations for funding
- Discuss options for treatment by setting of care and financial implications
- Assist patient with financial form completion

## 2 Office and Hospital Care

### Consults

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Conducting office visits to discuss cancer, goals, options, and progress.

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- Conduct initial evaluation and management consultation visits requested by other providers
- Follow-up with patient after physician visits, new patient orientation sessions, and/or general education sessions to ensure proper understanding of information provided

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### Procedures

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Furnishing procedures, other than chemotherapy administration, during the patient's visit to the oncology office.

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- Donation of patient's own blood for later use on self
- Perform bone marrow biopsy
- Aspiration
- Thoracentesis
- Paracentesis
- Apheresis or leukapheresis
- Ommaya reservoirs

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### Discharge

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Conducting a final examination of the patient after drug administration, writing prescriptions for supportive therapy, delivering instructions for side effect management, and completing referral forms.

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- Provide discharge instructions
- Write and review prescriptions
- Provide instruction on administering shots and changing dressings

## Hospital Care

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Managing patient in hospital setting of care.

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- Admit patient
- Evaluate and manage patient's condition
- Conduct follow-up visits to assess progress
- Provide discharge instructions

## 3 Provision of Therapeutics

### **Drug Preparation**

Setting up drugs for administration and completing steps to prepare the patient to receive the drug.

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- Obtain patient consent
  - Administer local anesthesia
  - Access the intravenous line
  - Prepare the drug
  - Place and ready routine tubing and supplies
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### **Drug Administration**

Starting drug infusion, monitoring patients to assess adverse reactions from the medication, and completing infusion.

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- Monitor patient, intra-service supervision of staff, and safety oversight
- Complete the intravenous infusion of chemotherapy
- Flush of the intravenous line at completion
- Direct physician supervision for patient assessment
- Conduct dye study when medical port does not yield blood
- Document infusion information into medical record

## 4 Supportive and Palliative Care

### **Dietician and Nutrition Support**

Evaluating patient's nutritional status, providing information about diet and cancer, helping individual patients develop meal plans to meet their own needs, and helping them manage nutrition therapy.

- Provide nutrition supplements
- Provide access to a nutritionist and/or dietician
- Provide nutrition counseling to help patients maintain a healthy food regimen while on chemotherapy

### **Home Health Setup**

Planning for home care, long-term care, community agency referrals, and other resources.

- Coordinate and help patients plan for home health services and extended care placements
- Identify and coordinate community-based resources that can provide assistance with transportation, housing, personal care, cleaning, shopping, and nutrition needs
- Provide access to loaned medical equipment such as hospital beds and wheelchairs
- Review and sign orders related to home health plan
- Order approval and care modification

### **Social Work and Other Supportive Care Services**

Furnishing psychosocial support, including activities such as informal counseling sessions, support groups, and grief counseling. Transportation assistance also is provided for patients who need help getting to and from treatment facilities.

- Order supportive care therapy
- Provide emotional support and formal and informal counseling sessions in which patients

are encouraged to talk freely about the social difficulties and emotional anxieties that may arise during the care process

- Provide advice and information on local and national cancer support groups that are available within the community, including support groups for children and grief recovery programs designed for those who have lost loved ones
- Conduct “whole person” assessments to determine support services required by patients and their families
- Provide access to prayer lists, spiritual support groups, and religious caregivers of various denominations and faiths for patients and families who request spiritual guidance and support
- Facilitate patient-driven support groups for patients and their families
- Provide special classes for patients such as “Journaling Group” and “Mind-Body Skills Group”
- Respond to patient requests for information on complementary services, such as herbal therapies, including an evaluation of the pros and cons of therapies being considered
- Provide complementary services, including massage therapy, yoga therapy, and art therapy
- Meet with families to provide counseling with patient present or independently

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### **Hospice and End-of-Life Care/Symptom Relief**

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[Planning for hospice care, working with a patient with an advanced stage cancer or one that has not responded to treatments to ensure patient is free of pain and other symptoms.](#)

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- Assess and discuss patient's needs for physical, psychosocial, and spiritual support
- Establish a palliative care program focused on pain and symptom management
- Coordinate and help patients plan for hospice services
- Review and sign orders related to hospice care
- Communicate with multi-disciplinary team and other service providers involved in patient care

## 5 Telephone Support

### Side Effect Management

Monitoring, informing, and aiding patients post-treatment for any side effects.

- Monitor treatment side effects
- Discuss side effects of chemotherapy and management of these conditions
- Follow-up via telephone with patients to discuss any side effects or adverse reactions
- Discuss and educate family members on management of patient's side effects
- Evaluate and manage physical and emotional symptoms associated with the disease and its treatment, both in-person and by telephone
- Evaluate, monitor, and ease patient's pain

### Telephone Triage

Responding to patient and provider inquiries between in-person visits, by telephone, for any issues that the patient may encounter.

- Provide a telephone number that patients can call at any time with questions or to report symptoms
- Triage phone calls from patients and their families regarding medication changes, prescription refills, symptom management, lab results, and other concerns
- Follow-up with patients using oral chemotherapy treatments

## 6 Clinical Trials

### Clinical Trials

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Enrolling, documenting, and complying with clinical trial procedures.

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- Train physician and staff regarding clinical trial
- Screen patients for enrollment
- Obtain informed consent
- Obtain initial and annual renewal of institutional review board (IRB) regulatory approval
- Coordinate patient visits
- Schedule scans, visits (including post-visit follow-up appointments), and administration of study drug
- Complete all case report forms (CRFs) and related documentation
- Monitor visits
- Communicate with sponsor and respond to queries
- Attend sponsor meetings and study conference calls

## 7 Scheduling

### **Patient Registration and Scheduling**

Registering new patients, verifying insurance coverage, and scheduling appointments for office visits for all services furnished within the practice, including diagnostic/imaging services, laboratory tests, and chemotherapy treatments.

- Schedule appointment for new patient
- Confirm referral is received from primary care physician (PCP)
- Complete new patient registration
- Verify insurance in practice management system for new and established patients
- Schedule appointment for established patient
- Schedule patient appointment for treatment, diagnostic/imaging service, or laboratory test
- Confirm appointments with patients
- Reschedule missed or cancelled appointments
- Collect patient copays and deductibles from patients
- Obtain records and scans from other providers prior to initial visit

### **Other Scheduling**

Scheduling all appointments external to the practice for office visits with other physician providers, diagnostic/imaging services, laboratory tests, and any other services furnished outside of the practice. Other scheduling also includes hospital scheduling.

- Schedule patient appointment for diagnostic/imaging service
- Schedule patient appointment for laboratory test
- Schedule patient appointment for other procedures
- Supply preauthorization numbers to providers external to the practice
- Obtain documentation (e.g., clinical notes, test results) from providers external to the practice

## **Disability Letters and Form Completion**

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Filling out forms that patients need to submit to federal and state government agencies, insurers, and employers.

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- Complete form for Social Security benefits
- Complete form for Medicare coverage
- Complete form for handicap license plate or placard
- Complete letter for patient's employer regarding missed work
- Complete form for disability insurance
- Complete Family and Medical Leave Act (FMLA) forms

## 8 **Preauthorization and Financial Counseling**

### **Preauthorization for Practice-Provided Diagnostic Services**

Obtaining prior authorization from payers for all diagnostic services furnished within the practice, including time spent on hold waiting for preauthorization.

- Call primary payer for preauthorization for diagnostic/imaging test
- Call secondary payer for preauthorization for diagnostic/imaging test
- Obtain preauthorization for imaging test from radiology management vendors
- Coordinate preauthorization with clinical staff

### **Preauthorization for Practice-Provided Treatment Services**

Obtaining prior authorization from payers for all treatments furnished within the practice.

- Call payer for preauthorization for chemotherapy treatment
- Call payer for preauthorization for other treatment/medical procedure
- Call payer for preauthorization for supportive care
- Call payer for any other service needing preauthorization
- Coordinate preauthorization with clinical staff
- Enroll patients in reimbursement assurance programs for off-label uses

### **Preauthorization for External-Provided Diagnostics and Treatment Services**

Obtaining prior authorization from payers for all diagnostic and treatment services completed outside of the practice.

- Call primary payer for preauthorization for diagnostic/imaging test
- Call secondary payer for preauthorization for diagnostic/imaging test
- Obtain preauthorization for imaging test from radiology management vendors
- Call payer for preauthorization for laboratory test

- Call payer for preauthorization for chemotherapy treatment
- Call payer for preauthorization for supportive care
- Call payer for any other service needing preauthorization
- Coordinate preauthorization with clinical staff

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### **Patient Financial Counseling**

Discussing services covered by a patient's insurance plan, including potential deductibles or other out-of-pocket costs. Discussions can include services the payer will not cover and the method of collecting payment from patient by the practice.

- Fully evaluate patient's insurance coverage and available financial resources
- Educate patients on various aspects of health insurance, such as deductibles, copays, coinsurance, and benefit limitations
- Educate patients on method of payment or payment schedule for practice
- Develop customized payment plans for individual patients

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### **Patient Advocacy and Assistance**

Advocating for the patient with the payer to acquire coverage for treatment, or identifying other methods of payment by patient assistance programs (PAPs), free drug programs, or copay relief.

- Advocate with payer to gain coverage for patient's treatment
- Maintain records of PAPs available to patients
- Maintain records of free drug programs
- Maintain records of copay relief agencies
- Contact PAPs on behalf of patient to assist with payment for treatment
- Contact free drug program on behalf of patient to assist with payment for treatment
- Contact copay relief agencies on behalf of patient to assist with payment for treatment

## 9 Pharmacy Operations

### **Pharmacy (Non-Retail) Facility Management**

Maintaining pharmacy facility (non-retail), including components such as drug mixing, ordering, and billing. Pharmacy facilities do not include retail pharmacy facilities that may also be within the practice.

- Calculate drug order from physician
- Prepare and mix drugs
- Document drug order
- Capture charges in billing system to bill payer for drug
- Process drug waste
- Comply with USP 797 (hood certifications, personnel compound validation, closed system transfer devices)
- Maintain stock of drugs in appropriate area (just-in-time (JIT) management for chemotherapy drugs, intravenous fluids, and infusion-related supplies in appropriate area)
- Oversee pharmacy personnel
- Repackage and return defective drugs

### **Drug Purchasing, Contracting, Negotiation, Price Monitoring, and Ordering**

Monitoring of prices and contacting pharmaceutical representatives and specialty pharmacy providers to obtain the best price for the drugs used in the practice. Maintaining accurate records of drugs used to achieve any targets required by contract.

- Discuss drug pricing with pharmaceutical representative/group purchasing organization (GPO)
- Call distributors to discuss pricing and contract terms
- Negotiate and monitor individual and GPO contracts for compliance
- Monitor prices of other sources for drugs
- Maintain records for all drugs
- Procure drugs that are on national backorder (e.g., vinblastine, leucovorin)

- Track drug replacement from manufacturer for select patients
- Reconcile drug purchases and utilization monthly
- Review drug charges to ensure drug charge capture
- Review single dose vial billing
- Compare targets for drug use with contracts
- Conduct quarterly meetings with distributors

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### **Oral Therapeutics**

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Writing prescriptions for oral oncolytics and supportive therapy, ordering and maintaining supplies of oral therapeutics, and completing specialty pharmacy forms.

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- Write prescriptions for oral oncolytics and supportive therapy
- Order and maintain adequate supply of oral therapeutics
- Complete specialty pharmacy forms
- Interview prospective specialty pharmacies (dictated by payer)
- Manage between specialty pharmacies

## 10 **Billing and Collections**

### **Coding, Documentation, and Billing (Including Payer Denial Management)**

Completing all billing, coding, and documentation procedures to ensure proper payment from payers. In order to facilitate this process, staff must be educated about pertinent coding changes, claims requirements, and practice management system functionality.

- Maintain and update an accurate and responsive billing department
- Maintain day-to-day operability of practice management computer system
- Input demographic, insurance, and patient encounter data into practice management system
- Train end users and super users of practice management system
- Educate staff about coding changes (particularly J and G codes)
- Submit initial claims to payers
- Post remittance advice from payers
- Post payments from payers
- Submit claims to secondary payers
- Supervise denials management process by resubmitting claims to primary and secondary payers
- Coordinate claims appeal process with clinical staff and payers
- Transcribe clinical notes for patient medical record and documentation for claims submission
- Maintain state and federal regulatory compliance (Health Insurance Portability and Accountability Act (HIPAA), ePrescribing, Physician Quality Reporting Initiative (PQRI) and other quality reporting)

### **Collections and Patient Bad Debt Issues/Resolution**

Following-up with patient, collection agency or other entity for reimbursement in situations where full payment is not received for services rendered.

- Follow-up and maintenance of payment collection process from patients
- Manage payment plans with patients
- Maintain relationship and refer accounts to collection agency

## 11 Payer Contracting

### **Payer Contracting**

Negotiating with payers to secure fair and reasonable reimbursement terms for services rendered and drugs administered to patients.

- Negotiate favorable terms with private payers for professional services
- Negotiate single case agreements with non-contracted payers
- Secure separate payment terms for drugs
- Remain educated about quarterly average selling price changes and other drug pricing issues

## 12 **General Practice Management**

### **Human Resources Management – Operational**

Performing key functions such as hiring, training, career development, employee relations, and payroll for all administrative, information technology (IT), and building staff. Also involves monitoring efficiencies in the practice, as well as problems with patient flow.

- Supervise day-to day activities for administrative, IT, maintenance, and other operational staff
- Manage all hiring, employee benefits, annual reviews, disciplinary, or other human resources activities for operational staff
- Monitor practice efficiency and patient flow using patient satisfaction surveys
- Mediate clinical staff conflicts

### **Human Resources Management – Clinical**

Performing key functions such as hiring, training, career development, employee relations, and payroll for all clinical staff. Also involves monitoring efficiencies in the practice, as well as problems with patient flow.

- Supervise day-to day activities of clinical staff
- Manage all hiring, employee benefits, annual reviews, disciplinary actions, or other HR activities for clinical staff
- Monitor practice efficiency and patient flow using patient satisfaction surveys
- Mediate clinical staff conflicts

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### **Facilities Management (Excludes Pharmacy)**

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Maintaining overall operations of the facility by ensuring that the building is cleaned properly, monitoring the performance of contractors, and responding to maintenance issues.

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- Manage overall building maintenance and upkeep
- Coordinate office cleaning and appropriate disposal of waste

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### **Electronic Medical Record (EMR) Management**

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Training staff on the EMR system to maximize functionality and value of EMR system, entering clinical information into the system, remaining abreast of EMR updates, and providing IT support to ensure system is properly working.

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- Maintain day-to-day operability of EMR system
- Input patient information into the EMR system
- Train end users and super users of EMR system
- Maintain IT support for EMR system
- Scan hard copy documents into the EMR system from labs and other outside materials
- Conduct chart audits

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### **General Financial Management**

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General management of an oncology practice that includes financial reporting and practice leadership meetings.

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- Complete and analyze financial statements and other financial reports
- Validate all reports used for tax and other business-related activities
- Coordinate meetings with practice leadership and/or partners

## **Business and Strategic Planning**

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Projecting expansion, exploring opportunities, and conducting market analysis, referral networks, and clinic design.

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- Perform market analysis of regional oncology environment
- Coordinate expansions with hospital executives and other representatives
- Develop new physician referral network
- Plan new clinic design and logistics to move to new space

**Capital  
and  
Expense  
Costs**

**Employee Benefits  
Insurance and Other Personnel Expenses**  
Drug Financing and Purchasing  
Clinical Supplies and Equipment

Office Supplies and Equipment  
EMR System  
Patient Bad Debt  
All Other Facility Costs

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## Capital and Expense Costs

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### Employee Benefits

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Staff expenses (excluding salaries) for health insurance, dental insurance, etc.

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- Health insurance
  - Dental insurance
  - Disability insurance
  - Life insurance
  - Retirement plan / 401k
  - Professional development / continuing medical education
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### Insurance and Other Personnel Expenses

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Insurance costs paid by the practice and all other personnel expenses not included in employee benefits.

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- General business insurance
- Liability (malpractice) insurance
- Workman's compensation
- Payroll service expenses
- State and federal payroll taxes
- All other personnel expenses (e.g., car, travel, meals, lodging)

**Capital  
and  
Expense  
Costs**

Employee Benefits  
Insurance and Other Personnel Expenses  
**Drug Financing and Purchasing**  
**Clinical Supplies and Equipment**

Office Supplies and Equipment  
EMR System  
Patient Bad Debt  
All Other Facility Costs

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**Drug Financing and Purchasing**

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All outlays related to the purchase of drugs, including the actual drug acquisition cost.

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- Drug purchase costs
- Line of credit fees associated with drug purchases (include interest expense)
- Drug storage and mixing equipment costs, including hoods and closed system transfer devices

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**Clinical Supplies and Equipment**

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All costs related to clinical equipment and supplies used in direct patient care.

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- Medical supplies used for diagnostics and treatment
- Medical instruments
- Clinical equipment leases and interest
- Clinical equipment maintenance and repairs
- Clinical equipment inspection fees
- Sanitary linens
- Drug waste disposal

**Capital and Expense Costs**

Employee Benefits  
Insurance and Other Personnel Expenses  
Drug Financing and Purchasing  
Clinical Supplies and Equipment

**Office Supplies and Equipment  
EMR System**  
Patient Bad Debt  
All Other Facility Costs

**Office Supplies and Equipment**

Expenditures associated with other office supply expenses that do not “touch” a patient, including outlays for electronic equipment, maintenance, and user fees.

- Non-clinical office supplies
- Answering service
- Non-clinical equipment leases and interest
- Non-clinical equipment maintenance and repairs
- Magazine subscriptions and other entertainment items for patients
- Computers and computer-related equipment (excluding EMR)
- Practice management and other software (excluding EMR)
- Renewal license fees for software (excluding EMR)
- IT hardware and software support (excluding EMR)
- Internet service fees
- Telephone service fees
- Electronic claims fee
- Postage and postage machine
- Uniforms
- Advertising / marketing
- Pagers / cell phones

**Electronic Medical Record (EMR) System**

Costs related to the purchase and maintenance of an EMR system.

- EMR hardware and software
- Employee training fees
- Maintenance agreement fee (including interest expense)
- Renewal license fees for EMR

**Capital  
and  
Expense  
Costs**

Employee Benefits  
Insurance and Other Personnel Expenses  
Drug Financing and Purchasing  
Clinical Supplies and Equipment

Office Supplies and Equipment  
EMR System  
**Patient Bad Debt**  
**All Other Facility Costs**

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**Patient Bad Debt**

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Unpaid claims that are the responsibility of the patient but are written off by the practice (does not include contractual adjustments for terms negotiated with payers or other miscellaneous write-offs).

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- Unpaid patient copays
- Unpaid claims from uninsured or underinsured patients
- Bank and credit card charges
- Collection agency fees

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**All Other Facility Costs**

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All remaining capital costs and expenses related to maintaining a community oncology practice.

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- Rent
- Utilities (e.g., gas, water, electric)
- Building management fees
- Maintenance and repairs of building
- Office cleaning
- Taxes
- Legal and accounting expenses
- Management fees
- Accreditation and/or license fees
- Courier service
- Floral and gifts





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