

# National Practice Benchmark

## Introduction

Thank you for participating in the National Practice Benchmark. Please complete the questions in this survey using data from calendar year 2008 or your most recently completed 12-month accounting period.

To print a copy of the survey tool please visit [www.oncomet.com](http://www.oncomet.com)

The first 25 complete responses will receive a \$25 American Express gift card; the next 100 will receive a \$10 American Express gift card. All complete entries will also be entered into a drawing for an Apple iPod. In order to assure gift incentives reach you please provide your contact / mailing information at the end of the survey!

Responses from incomplete surveys will be included in the results but respondents will not be eligible to receive a report of the results or an incentive gift.

If you start the survey but cannot complete it in one session, simply click on "Exit the survey" in the top right corner of the screen. Use the same computer to log back into the survey, and you will be taken to your partially completed survey for completion.

If you have any questions please contact Oncology Metrics at 817-333-0142.

## Practice demographics and general information

### 1. Location:

State:

### 2. Practice structure (choose only 1)

Physician-owned practice

Hospital-owned practice

Management company owned practice

Academic practice

Other (please specify)

### 3. What services does your practice offer? (check all that apply)

Closed door/outpatient pharmacy

Gynecologic oncology

Imaging

Medical oncology

Radiation oncology

Surgical oncology

Other (please specify)

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4. What is your role / position in the practice? (choose only 1)

Physician

Practice administrator / Office manager

Non-physician practitioner, i.e., NP or PA

Nurse

Other (please specify)

5. Please provide the number of full service clinics. This is the sum of all clinic locations that provide evaluation and management services AND chemotherapy administration or other ancillary services. (Please report on a FTE basis, e.g. if a clinic is open 3 days per week report as .6)

Number of Clinics, Full Service

6. Please provide the number of clinics, E&M Services only. This is the sum of the number of clinic locations that provide only evaluation and management services and **DO NOT** provide chemotherapy administration or other ancillary services. (Please report on a FTE basis; e.g. if a clinic is open 3 days a week report as .6)

Number of Clinics, Evaluation and Management Services only

7. Please provide the number of chemotherapy chairs in all full service practice locations, calculated on a FTE basis. For example, chairs that are used only one day per week are .2 chairs and a chair that is available for use every day but is put in service on July 1 is .5 chair. Please include all chairs you may use for injection and / or chemotherapy in this category.

Number of Chemotherapy Chairs

## Financial and Operational Data, calendar year 2008

### Revenue

*Revenue* is defined as cash collections. This is all the money that was received by the business entity during the year for any service, regardless of when that service was provided. *Total Revenue* is the same as gross income as reported on a cash basis financial statement. Provide all responses as whole dollars; do not use dollar signs, commas, or periods in your responses.

8. Total Revenue = Cash collection for the period as reported on the practice Profit & Loss Statement

9. E/M Revenue = Revenue for all E & M services

10. Drug Revenue (J & Q codes) = Total drug revenue for practice net of all drug rebates

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11. Drug Administration Revenue = Total drug infusion revenue

12. Imaging Revenue = Total imaging revenue

13. Laboratory Revenue = Revenue for all laboratory services provided by the practice

14. Radiation Oncology Revenue = Revenue for all radiation therapy services provided by the practice

15. Revenue, non-medical = Revenue that was earned for services other than the provision of medical care. Examples include research revenue, medical directorships, interest income, publication revenue, expert witness income.

## Expenses, calendar year 2008

*Expenses* is the same as cash paid as reported on a cash basis financial statement.

*Cost of goods paid for (COGPF)* is the actual amount you have paid for drugs less the actual amount(s) you have received from rebates or other programs that lower the cost of these drugs to you. This is similar to, but not exactly the same as, cost of goods sold (COGS). COGPF is cash basis accounting; COGS is accrual accounting.

16. Total Practice Expense = All cash expenses for the practice for the time period (include all salaries paid, including physician salaries)

17. Cost of goods paid for = The total of all money paid for drugs less the rebates or other cost reductions received in the same period

## Staffing, calendar year 2008

We define a full-time equivalent (FTE) physician as one that spends 4 full days per week in clinic seeing patients, a fifth day on clinic business, i.e. light patient schedule, clinical research, QOPI, and shares weekend call equally with other physicians. For example, if a physician is in clinic three days a week and spends two days on administrative duties, that would be a .6(3/5) FTE medical oncologist. Use this definition as a guide in calculating the number of FTE physicians in your practice.

18. Total FTE physicians

19. FTE hematology / medical oncology physicians

20. FTE radiation oncologists

21. FTE gynecologic oncologists

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## 22. FTE other physicians

A full-time equivalent (FTE) staff person is defined as someone that works 40 hours per week or 2,080 hours per year. The FTE status is calculated by dividing the number of hours worked per week by 40 or the number of hours worked per year by 2,080. For example, someone that works 20 hours per week would be a .5 FTE (20/40) and a 32 hours/week person would be .8 FTE (32/40). A person who works 40 hours per week but began employment at the beginning of the second calendar quarter would be a .75 FTE. FTE counts should also be pro-rated for employees not employed for the full 12 month calendar year.

Report all full-time equivalents rounded to the nearest two decimal places, e.g. 4.75. Some staff positions may need to be counted in more than one category. For example, if a senior manager spends 1/3 of their time on drug purchasing, .33 should be included in the "Chemotherapy Administration" category and the remaining .67 would be reported as "Executive/Sr. Management". Do not count any staff position more than once.

## 23. FTE non-physician practitioners (NPs, PAs)

## 24. FTE chemotherapy administration staff

(Includes drug purchasing, management, mixing, and delivery to patients. Include percentage of time all staff spend on these activities.)

## 25. Count of all FTE clinical staff not included above

(Includes imaging, radiation oncology, laboratory, nursing not involved with chemotherapy, medical assistants, etc.)

## 26. FTE Executive/Sr. Management staff

(Includes all executive and senior management staff. Include all staff that report to the physician executive or the Board; also include the physician executive. Do not include department-level supervisors. Report on a FTE basis. Example: if the physician executive spends 20% of his/her time on management and 80% on patient care, report 20% as "Executive Staff" and 80% in the appropriate physician category.)

## 27. FTE Billing/Collections staff

(All staff involved in the billing and collecting process in the practice. Include financial counselors, coders, charge integrity staff (scrubbers) and all others involved in the billing and collecting process. Report on a FTE basis.)

## 28. Count of all FTE staff not included above

## Services

Provide count of services (sum of all units billed in 2008) and collected revenue (for cash collected in 2008 regardless of when the service was provided and billed) from your practice management system in each of the following categories. Report all service counts as whole numbers. Round all revenue responses to the nearest dollar. Do not use dollar signs, commas or periods in your response.

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## 29. CONSULTATIONS AND NEW PATIENTS, Office (99201-99205, 99241-99245)

Count

Revenue

## 30. CONSULTATIONS, Hospital (99251-99255)

Count

Revenue

## 31. ESTABLISHED PATIENTS, Office (99211-99215)

Count

Revenue

## 32. ESTABLISHED PATIENTS, Hospital (99217-99220, 99221-99223, 99231-99233, 99234-99236, 99238-99239)

Count

Revenue

## 33. INFUSIONS, Initial (90760, 90765, 90769, 90774, 96409, 96413)

Count

Revenue

## 34. INFUSIONS, Other (90761, 90766-90768, 90770-90773, 90775-90776, 96401-96406, 96411, 96415-96542)

Count

Revenue

## 35. RADIATION PATIENTS, Total patients on beam (77401 - 77416, 77418)

Count

Revenue

## 36. RADIATION PATIENTS, IMRT patients (77432)

Count

Revenue

Information Systems

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37. Which practice management system (PMS) does your practice use?

A4

Allscripts

Centricity

Cerner

Epic

IDX

IMPAC

Intergy

McKesson

Medical Manager / Emdeon

Medinformatix

Medisoft

Meditech

Misys (AllscriptsMisys)

NextGen

None

Not sure

Sage

Varian

Other (please specify)

38. Do you have plans to change your current practice management system?

No, we will keep our current PMS

Yes, we are planning to change to a new PMS within the next 12 months

Yes, we are planning to change to a new PMS within the next 13 - 24 months

Other (please specify)

39. Does your practice use an electronic medical record system (EMR)?

Yes

No

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40. If you do not use an EMR, do you plan to implement one in the next 12-18 months?

YES

NO

## EMR Systems

41. Which electronic medical record system (EMR) does your practice use?

Allscripts

Altos/OncoEMR

OTN/LynxEMR

Cembex/ChemoSAFE

Centricity

Cerner

EPIC

iKnowMed

IMPAC

Intergy / Sage

IntrinsicQ/Intellidose

Medinformatix

Meditech

NextGen

Rabbit Healthcare Systems

Touchworks

Varian / ARIA

Other (please specify)

## Systems

42. Who is your primary drug distributor?

Mckesson Specialty (OTN)

Amerisource Bergen (Oncology Supply)

US Oncology

Other (please specify)

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43. What service do you use for claims benchmarking?

- RemitData
- P-Biz
- Total View
- None
- Other (please specify)

44. Has your practice added new lines of business in the past 12 months?

- No
- Medical Oncology
- Radiation Oncology
- Pharmacy Services
- CyberKnife
- Other (please specify)

45. Which guidelines do the physicians in your practice reference when looking to develop internal practice standards?

- NCCN
- ASCO
- None
- Other (please specify)

46. Have you heard about the CMS ruling on ePrescribing?

- Yes
- No

47. Do you have a system that is capable of ePrescribing?

- Yes
- No
- We are in the process of evaluating / installing such a system

48. Please check the box below, if you are interested in receiving benchmarking data on a regular basis.

- Yes

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49. Would you like to participate in our 2009 Electronic Medical Record Use and Satisfaction Survey?

Yes, please send an email invitation

Thank you for participating. The results of the National Practice Benchmark will provide important and meaningful data for both your practice and our industry as a whole. Please complete the following information so we can send survey results and the applicable incentive gift.

50. Please complete the following information. (Applicable gift card incentives will be mailed via USPS)

Name:	<input type="text"/>
Address:	<input type="text"/>
City/Town:	<input type="text"/>
State:	<input type="text"/>
ZIP:	<input type="text"/>
Email Address:	<input type="text"/>
Phone Number:	<input type="text"/>