

# AMERICAN COLLEGE of CARDIOLOGY

## GENERAL QUESTIONS TO EXPECT WHEN STARTING A NEW PROGRAM

### 1. What is the current market and what will be the effect of the new program on the existing market?

- a. What is the payer mix?
- b. How will you be able to convince other providers to refer patients to you?

#### 2. How necessary is this new program?

- a. Are you introducing a service/brand to disrupt the market and gain patients or are you introducing a service/brand to keep pace with the market so as not to lose patients?
  - i. If you gain patients, will the majority come from other practices/systems or will you draw patients away from other areas of your practice/system?

## 3. Is this a new service or a "re-brand" that is an addition to current practice/clinic?

- a. New services will require evaluation and consideration of all start-up costs.
- b. Implementing a new program in a current practice will require internal evaluation of positive, neutral or potential negative changes to the practice.
- c. Recommend collaboration with your practice administrator/operational leader to complete a business case/proforma.

#### 4. How much cost will be involved?

- a. Start-up: Will you need to hire new providers, buy new equipment and find new space or can you reapportion existing resources?
  - i. Will you market?
- b. Annual/maintenance: Salaries, rent, marketing, etc.

#### 5. How are you going to cover any costs?

- a. Will this new endeavor be a part of someone else's/another division's cost center or are you now responsible?
- b. Are you generating new revenue streams?

#### 6. How much profit and growth do you anticipate in year one? Year five?

- a. Can you generate enough revenue to cover some or all expenses?
- b. What do you base these projections on and how can you justify them?
  - i. Figures from other programs in your practice/system.
  - ii. A sense of growth from other programs in the same market.



# WOMEN'S CLINIC OUTLINE



## BUILDING A BUSINESS CASE: ITEMS TO CONSIDER AND POTENTIALLY INCLUDE

#### • Current market landscape and future growth potential

- → Is there enough volume to cover start-up and ongoing cost?
- → Perform market assessment.

#### • New volume or shift in current patient volume?

- → Additional revenue or maintain current revenue capture.
- → Potential for animosity in clinician group if shifting current patients to new clinician.
- → Current staffing capacity or expansion of staff needed to support volume.
- → Current space utilization or need for additional space/equipment/supplies.

#### • New service requiring additional equipment?

→ Cost of equipment, service contracts, maintenance, depreciation.

#### • EHR/IT updates or integration costs?

- → Is an EHR build needed?
- → Will new equipment need to be integrated?

#### New space/lease needed?

- → Furniture for space (IT, hardware, exam room, waiting room, offices).
- → Equipment for all services including service contracts.
- → Utilities/costs for operation.
- Staffing (hiring/training/retention)
- Evaluation of in-house expertise, partnership agreements or referral sources for additional services/expertise (dietitian, wellness programs, behavioral health, etc.)

#### • Training/education

→ Continuous medical education and patient education programs.

#### Insurance

→ New or ongoing malpractice insurance, tail coverage, adding new services to current insurance plan.

#### • Revenue cycle build: New codes, expertise, update billing practices/processes

- → Including compliance reviews and updating needed items to meet standards.
- → Payer updates.
- → Review of ancillary billing potential.

#### Marketing

→ Cost to market specialty service or new clinic (outreach/community events, flyers, website, social media campaign, video production, visits to area practices, lunch and learns, etc.).

#### Safety

→ Updating policies, processes, accreditation materials.

#### Quality

→ New or change to measures being evaluated?



# WOMEN'S CLINIC OUTLINE



#### **FINANCIAL EVALUATION**

- Anticipated Volume (kept appointments and wRVUs)
  - → Can consider calculation of current volume per day or wRVU per kept appointment and utilize market assessment for growth projection/additional volume.
- Anticipated Revenue (gross revenue and net revenue)
  - → Can calculate utilizing current revenue/wRVU with projected volume increase or benchmark projection for new service.
  - → Ensure updating collections to match your current payer mix.
- Expected Operating Expense and Overhead
  - → Utilization of consideration list and/or current expense per wRVU with projected volume increase.
- Net Income Projections

#### **OUTLINE OF WOMEN'S HEART CENTER PROFORMA COMPONENTS**

#### Revenue Streams

- 1. Patient Visits
- 2. Stress Testing
- 3. Echocardiograms
- 4. Nuclear Stress Testing
- 5. Cardiac CT scans
- 6. Cardiac Catheterization
- 7. Cardiac PET myocardial blood flow measurements

#### Costs

- 1. Office Space
  - Real Estate Rental/Lease
  - Utilities

#### 2. Personnel

- Physicians: new hires?
  - → APPs
  - → Nurses
- Medical Assistants
- Psychologist
- Nutritionist

## 3. Medical Equipment and Supplies

- Stress Testing Equipment
- Echo Machines
- Nuclear Imaging Equipment
- Cardiac PET/CT Scanners
- Cardiac Catheterization Lab Supplies

#### 4. Administrative Costs

- Office Supplies
- Billing and Coding Services
- Insurance

#### **5. Training and Education**

- Continuous Medical Education for Staff
- Patient Education Programs

#### 6. Marketing and Outreach

- Promotional Materials
- Community Outreach Events

#### 7. Financial Projections

- Projected Patient Visits per Month/Year
- Anticipated Revenue per Service
- Expected Operating Expenses and Overheads
- Net Income Projections

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<sup>\*</sup>Refer to Excel document for actual estimations for proforma completion.