





Making the Case for Patient Navigation
Business Case Toolkit

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# **Making the Case for Patient Navigation**

# **Business Case Toolkit**

Welcome to the Making the Case for Navigation: Business Case Toolkit, first developed as part of the ACS LION and AONN+ Building the Case for Navigation Bootcamp series, with critical feedback then incorporated from the ACS National Navigation Roundtable and ACS Navigation Capacity-Building Initiative Grantees. This toolkit is designed to guide you through the essential components of a compelling business case, ensuring that you articulate a clear, evidence-based argument for the adoption and integration of patient navigation services.

Recognizing that organizations may have their own expectations and templates for business case development, this toolkit focuses on a comprehensive planning process. It addresses patient care challenges, competitive factors, program scope, and alignment with organizational values, while also offering guidance to assess return on investment.

This toolkit also provides tools and resources to assist in different phases of developing a business case for sustainable navigation, helping organizations meet complex patient needs, improve outcomes, and support a cost-effective healthcare model.

We hope you find this toolkit to be a valuable and user-friendly resource for developing and enhancing your patient navigation program business case.

# With support from:



## **Preparing to Use this Toolkit**

The goal of this toolkit is to provide a template, guidance, and resources to effectively build a business case for navigation.

**Key steps** in preparation for using this toolkit include:

- Familiarize yourself with your organization's review and approval process as well as its key decision-makers and stakeholders.
- Learn how to integrate this toolkit with your organization's processes and templates.
- Identify the operational leaders with whom to engage (e.g., cancer center administrator, director of operations, business manager).
- Identify the appropriate leaders to consult for cost, revenue, and return on investment aspects.

#### Figure 1 | Flowchart for Making a Business Case

Follow each step sequentially in the flowchart below to build an effective navigation business case. Each step is linked to the corresponding pages in the toolkit, providing detailed instructions and resources for further guidance. This structured approach will help you address all critical components, from outlining program goals to evaluating ROI.

# Step 1

#### **Background and Rationale**

- 1.1 Background: Provide the context and need for the program.
- 1.2 Rationale: Explain why the program is necessary.
- 1.3 Organizational Assessment: Evaluate the organization's readiness for implementation.

# Step 2

#### **Program Description**

- <u>Defining Benefits: Identify key benefits for patients, providers, and the organization.</u>
- Program Objectives: Outline clear goals aligned with organizational needs.
- Program Outcomes: Define measurable outcomes and performance metrics.

# Step 3

#### **Program Design and Scope**

- Program Services: Detail the services the program will offer.
- Program Staffing: Specify staffing needs and roles.

# Step 4

#### Costs and Return on Investment (ROI)

- <u>Direct Costs: Outline the program's direct costs, including start-up and operational expenses.</u>
- Program Investment and ROI: Summarize the required investment and anticipated ROI.

## **Executive Summary**

#### **Purpose:**

Provide a concise summary that describes the patient navigation program objectives, key benefits of implementing a patient navigation program, and recommendations based on the business case assessments.

#### **Helpful Tips:**

Write this section last, keeping it under 2 pages. Prepare a PowerPoint (see example in Appendix 6) and elevator pitch to summarize key points for group reviews.

#### **Key Elements:**

To create an effective Executive Summary, briefly cover each of the key elements. Each element is linked to the corresponding pages in the toolkit for detailed instructions and resources.

Background & Rationale	Briefly state the program's purpose and the problem it addresses.
Organizational Assessment	Summarize the organization's readiness to implement the navigation program.
<u>Program Description</u>	Provide a concise overview of the program's goals and scope.
<u>Defining Benefits</u>	Highlight key benefits for patients, providers, and the organization.
<u>Program Objectives</u>	Outline the program's objectives and how they align with organizational goals.
<u>Program Outcomes</u>	List the measurable outcomes and performance metrics.
Program Design & Scope	Define the program's scope, design, and staffing approach.
<u>Program Services</u>	Compile a list of services the program will offer.
<u>Program Staffing</u>	Specify staffing needs and key roles.
<u>Direct Costs</u>	Outline the program's direct costs.
Program Investment & ROI	Summarize the required investment and anticipated return on investment.

- Toolkit Appendix 5: Executive Summary Template
- How to write a business case: Tips, resources and examples (James Cook University, Australia)
- How to write an executive summary, with examples (asana)

### Section 1.0 | Background and Rationale

#### **Purpose:**

The purpose of this section is to align the patient navigation program with the organization's strategic goals, assess the impact of inefficiencies due to the lack of navigation, and demonstrate the urgency of addressing gaps in patient care coordination through a structured needs assessment.

#### **Helpful Tips:**

When aligning the navigation program with strategic goals, directly tie the program's benefits to the organization's mission and any existing initiatives around quality care, growth, and patient experience. Highlight specific operational inefficiencies and risks, such as patient care gaps, using quantitative data or case studies to emphasize the need for immediate action.

#### Section 1.1 - Background

The Background section should explain the importance of patient navigation, citing key evidence from the literature that demonstrates how it reduces barriers to care, improves access to timely treatment, and addresses health disparities. Use studies and reports to support the need for a navigation program in healthcare systems.

#### Section 1.2 - Rationale



#### **Strategic Alignment**

Align the navigation program with the organization's vision, mission, and strategic goals, addressing gaps in quality, growth, health equity, and initiatives.



#### **Needs Assessment**

A thorough <u>Community Needs Assessment</u> (CNA) or <u>Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis</u> helps ensure the patient navigation program addresses care gaps and supports organizational goals.

#### Example language for the C-suite:

"Our patient navigation program streamlines care, improving patient outcomes and satisfaction while reducing no-show rates by 20%. This drives growth for our oncology service line and increases patient loyalty. Through patient navigation, we can enhances health equity, reducing disparities in care access and outcomes. We can also deliver better care more efficiently, supporting both growth and operational savings."

# Key components include:

- Data Collection: Use patient demographics and feedback to identify navigation needs.
- Stakeholder Engagement: Engage patients, healthcare providers, and community members to uncover barriers to care and offer potential solutions.
- Health Disparities & SDOH: Assess social factors like income and access to care that affect patient outcomes and highlight areas where navigation can improve health equity.
- Prioritization: Identify and prioritize the most critical gaps in care to improve patient access and outcomes.



#### Impact on operations

Identify inefficient business processes due to the absence of navigation, focusing on patient care coordination, billing, and workflow management.

Impact of not addressing the problem

Highlight risks such as decreased patient

satisfaction and gaps in care if a navigation

program is not implemented, using data to

#### **Potential CBO Partners:**

Partnering with community-based organizations can help bridge gaps in services. Consider working with:

- Local health departments for community services such as prevention, screening, health education and public health initiatives
- Federally Qualified Health Centers (FQHCs) for under resourced populations
- American Cancer Society for cancer care and patient support
- United Way for social services and support
- Area Agencies on Aging for older adult populations needing additional care coordination



#### **Resource Links:**

Background and Rationale Template (see Appendix 5)

demonstrate urgency.

Patient Navigation in Cancer Care 2.0 - Navigating the Cancer Continuum in the Context of Value-Based Care

#### **Public Sites for Data on Communities:**

- Community Health Rankings and Roadmaps
- United States Census Bureau American Community Survey



### Section 1.3 | Organizational Assessment

#### **Purpose**

Organizations will vary in readiness for patient navigation. This section describes the ideal state for supporting the program, identifies gaps between current and desired states, and outlines changes to improve efficiency, promote health equity, and reduce risks. It also assesses the risks and benefits of maintaining the current state versus transitioning, guiding informed decisions for successful implementation. See Organizational Assessment Risk Table in Appendix 1 for tracking risks, likelihood of impact, and mitigation plans, with an added focus on equity-related risks.

#### **Helpful Tips:**

For Organizational Assessment, use tools such as ACCC's <u>Pre-Assessment</u> <u>Tool</u> or <u>NCCCP Navigation Matrix</u> to assess readiness and ensure the program supports long-term objectives. You can also find boilerplate language in <u>Appendix 5</u>.

#### **Key Elements:**

#### **Assess the Current State**

Examine the existing operations, workflows, patient caseloads, and IT infrastructure to understand how patient navigation would be implemented given the current state. Analyze whether the current caseload distribution allows navigators to provide effective, personalized care or if it causes strain, which can reduce program efficiency and negatively impact patient outcomes. Include an assessment of how well the current system serves underserved populations and addresses health disparities. Identify where social determinants of health (SDOH) are currently being integrated or overlooked in patient care coordination.

#### Define the Ideal State

 Describe the ideal operations, workflows, caseload distribution, and IT setup needed to support the patient navigation program, including tools, software, and EMR updates for PIN billing and documentation. In the ideal state, ensure that the infrastructure is designed to promote health equity, and the caseload for navigators is balanced to optimize care quality while preventing burnout. Ideally, caseloads should be manageable, with adjustments to account for complex cases, such as those involving higher-risk patients or under resourced populations.

### **Identify Gaps and Required Changes**

 Compare the current and ideal states to find gaps. Focus on changes needed to improve efficiency, cost-effectiveness, and reduce risks, including IT updates, caseload management strategies, training, and workflow adjustments.
 Address caseload imbalance if present, and develop plans for equitable assignment of patients to navigators, ensuring that SDOH and health disparities are considered when allocating resources.

#### **Evaluate Risks and Benefits**

Compare the current and ideal states to find gaps, with a focus on improving efficiency and reducing risks while also closing equity gaps. Assess the organization's current capacity to:

- Manage and optimize patient caseloads to prevent navigator burnout and ensure highquality care for all patients.
- Identify and address health disparities in patient outcomes.
- Offer culturally and linguistically appropriate services (CLAS) within the navigation program.
- Train staff in equitable care practices and implicit bias reduction to improve navigation services for diverse patient populations.
- Prioritize updates to IT systems and workflows that allow for better tracking of disparities and interventions aimed at improving health equity.

- Toolkit Appendix 1: <u>Organizational Assessment Risk</u> <u>Table</u>
- Readiness Assessment Tools (HealthIT.gov)
- <u>Utilizing a Gap Analysis to Strengthen the Strategy</u>
   of Navigation Programs Journal of Oncology &
   Navigation Survivorship (JONS)
- <u>Cancer Care Patient Navigation: A practical guide</u> <u>for community cancer centers (Association of</u> <u>Cancer Care Centers - ACCC)</u>



## **Section 2.0 | Program Description**

#### **Purpose:**

Explain how the navigation program will address the identified business problems or opportunities by aligning with organizational priorities and leveraging available resources. This section should connect <a href="Program Design and Scope">Program Design and Scope</a> and <a href="Program Objectives">Program Objectives</a> to the specific needs and gaps identified through the Needs Assessment in the <a href="Organizational Assessment">Organizational Assessment</a> (Section 1.3), detailing how the program's benefits will be measured and achieved.

#### **Helpful Tips:**

Program design decisions should be made based upon the results of the Needs Assessment, the organization's priorities, and the resources available.

#### **Key Elements:**

**Current State** 

Summarize the existing navigation program's original intent and objectives, highlighting gaps between initial goals and current outcomes. Note any major changes to scope or approach, the reasons for these shifts, and whether the original goals were met.

**Defining Benefits** 

Link benefits to caseload management, demonstrating impact on key metrics such as reduced no-show rates, better patient outcomes, and improved organizational efficiency.

<u>Program</u> <u>Objectives</u> Define clear, measurable objectives related to managing patient caseloads, such as reducing navigator workloads, improving care coordination, and ensuring equitable service distribution.

<u>Program</u> <u>Outcomes</u> Measure success through caseload-related metrics, including reduced patient wait times, increased navigator capacity, and improved patient satisfaction. Ensure that outcomes are specific, measurable, and time bound.

- <u>Background and Rationale Template (see Appendix 5)</u>
- A Guide to Writing a Business Plan Rural Network Allied Health Training Program (National Rural Health Resource Center)
- <u>Describe the Program: Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide</u> (<u>CDC, Office of Policy, Performance, and Evaluation</u>)
- Program Evaluation: Describe the Program (Boston University School of Public Health)

### **Section 2.1 | Defining Benefits**

#### **Purpose**

Start the program description by defining the benefits to clearly demonstrate the value of the navigation program. Linking benefits to specific, measurable goals sets the stage for the program's objectives and outcomes, illustrating how the program directly supports the organization's strategic priorities. This section helps connect the <u>Background and Rationale</u> (<u>Section 1.0</u>) with the specific objectives and performance metrics outlined in the following two sections, which are <u>Program Objectives</u> (<u>Section 2.2</u>) and Program Outcomes (Section 2.3).

#### **Helpful Tips:**

Some goals to consider include defining how personalized support improves patient outcomes (e.g., reduced readmissions), how better care coordination cuts costs, and how optimized health outcomes lead to increased revenue opportunities and operational efficiency.

#### **Key Elements:**

Improved Patient Outcomes & Health Equity Patient navigation enhances support, leading to better treatment adherence, patient satisfaction, and improved health outcomes, particularly for under resourced populations.

Enhanced Care Coordination & Operational Efficiency

Streamlined communication reduces errors, improve patient experiences, and optimizes workflows, ensuring culturally competent care and access to resources.

Cost Savings and Revenue Growth Patient navigation reduces no-show rates, ER visits, and readmissions, lowering healthcare costs. Revenue opportunities are generated through billing and capturing missed reimbursements.

Increased Patient Volume & Retention Comprehensive care attracts and retains patients, focusing on equitable access to enhance overall patient volume and patient loyalty, retention, and positive word-of-mouth referrals.

Staff Satisfaction & Commitment to Equity Clear roles and professional development boost job satisfaction, reduce turnover, and ensure compliance, while health equity training fosters a dedicated workforce and manages operational risks.

Quality Incentives Accreditation Participation in quality programs offers financial incentives and enhanced payment rates for meeting healthcare quality metrics.

- Appendix 2 Revenue Generation Opportunities
- <u>Defining Benefits Template (see page 28, number 11)</u>
- World Health Organization (WHO) Policy Brief 44 What are patient navigators and how can they improve integration of care?
- The Benefits of Patient Navigation Journal of Oncology & Navigation Survivorship (JONS)

# Section 2.2 | Program Objectives

#### **Purpose:**

Outline what the program will accomplish in clear and measurable terms, with a focus on improving health equity as well as overall patient outcomes. These objectives can be used in a post-implementation evaluation to assess the program's success, including its effectiveness in reducing disparities in access to care and outcomes for under-resourced or marginalized populations.

#### **Key Elements:**

See table below for an example of developing a SMART goal based on improving patient satisfaction.

#### **Helpful Tips:**

Objectives should focus on goals, not operations, and should be verifiable through some type of formal measurement. Ensure that some objectives specifically address health disparities and how the program will improve equity in access to care.

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Specific	Measurable	Achievable	Relevant	Time-bound
Who, what, where, when, why	What is not measured can't be improved	Make it challenging but not impossible	Closely connected to the objective	A completion date requires accountability
Increase patient satisfaction by enhancing communication and support throughout their care trajectory.	Achieve a 10% improvement in patient satisfaction scores, as measured by postcare surveys, within 12 months.	Implement regular follow-ups and feedback mechanisms for 90% of patients enrolled in the navigation program.	Patient satisfaction goal aligns with the program's objective to provide personalized support and improve patient experience.	Complete within 12 months, with quarterly reviews of satisfaction data to track progress.

- Program Objectives Template (see page 26, number 4)
- CDC Evaluation Briefs Writing SMART objectives
- ACS AONN+ Navigation Metrics Toolkit
- <u>Navigating the Cancer Continuum in the Context of Value-Based Care</u> Page 22 Figure 2. Goals of Oncology Navigation

### Section 2.3 | Program Outcomes

#### **Purpose:**

Outline how the program's outcomes will be measured, detailing the impact on key stakeholders, and including specific key performance indicators (e.g., patient satisfaction scores, time to treatment, readmission rates). **See Figure 2** (below) for guidance.

#### **Key Elements:**

#### **Target outcome**

- Description: Define the primary objectives of the program with a focus on reducing health disparities and improving equity in patient care. Ensure that the objectives include specific efforts to address barriers faced by underserved populations.
- Measurement: Success will be tracked through key performance indicators (KPIs) that reflect improvements in equitable access to care (e.g., reducing gaps in time to treatment for minority patients, increasing enrollment of underrepresented groups in treatment programs).
- Timeframe: Set a clear deadline for achieving these equity-focused outcomes, such as a reduction in disparities within two years.

#### Secondary outcomes

- Description: Detail additional goals of the program.
- Measurement: Clarify how these will be evaluated.
- Timeframe: Provide a defined period for achieving these outcomes.

#### **Helpful Tips:**

Identify key stakeholders and their needs, and establish a data collection and analysis plan with input from IT on trackable, essential metrics.

#### **Key stakeholders**

- Identification: List those impacted, including internal teams (e.g., oncology care team, IT) and external groups (e.g., patients, healthcare providers).
- Requirements: Outline general expectations and needs of each stakeholder, which includes different levels of data (e.g., monthly or quarterly reports vs yearly).

#### Data plan

 Collection & Analysis: Describe how data will be gathered, analyzed, and reported.

 Storage: Identify data storage locations, such as cancer registries, EMRs, or program-specific databases.

#### **Resource Links:**

- <u>Program Outcomes Template (see page 27, number 8)</u>
- <u>Patient Navigation in Cancer Care Review of Payment Models</u> Table 2. Summary of impact of navigators on health outcomes measures
- Stakeholder Mapping 101: A Quick Guide to Stakeholder Maps
- <u>A Method for Stakeholder Mapping in Connection with the Implementation of a Development Project</u>

#### Figure 2 | Performance Metrics

To complete a performance metrics table like the one below, first identify the KPI, which represents the key goals of your program. Next, set a benchmark (the target or standard to achieve) and determine the baseline (the current level of performance). Finally, record the actual performance data for each year (Y1 to Y3) to show progress over time toward achieving the KPI. The performance metrics and timing of measurement should be tailored to the intended stakeholders for these reports, ensuring relevance and alignment with their expectations and strategic priorities.

КРІ	Benchmark	Baseline	Υl	Y2	<b>ү</b> 3
Health Equity	10% increase in cancer screenings for underrepresented groups	40% compliance among targeted populations	45%	50%	55%
Patient Satisfaction Rate	90% satisfaction	75%	80%	85%	90%
Reduced Care Delays for Under resourced Populations	20% decrease in time to treatment for underserved groups	30-day average time to treatment	27 days	24 days	20 days

### Section 2.4 | Program Design and Scope

#### **Purpose:**

Outline the program's design and scope, including staffing, timeframe, patient population, geographic areas, collaborators, eligibility, and key departmental roles.

#### **Key Elements:**

Patient navigation program design: Define the scope of navigator engagement, activities, and roles, considering patient caseloads. Use caseload data to assess whether hiring new staff or repurposing existing personnel is necessary for managing patient volumes and ensuring program sustainability. Consider the scope or license of the current staff.

**Department/Organization:** Evaluate caseload capacity across departments or sites involved in the program. Identify where adjustments are needed to maintain manageable caseloads and effective patient care.

Patient Population: Define the specific patient group, considering how caseload distribution will impact underserved populations. Ensure that navigator caseloads reflect the diverse needs of the target population, prioritizing equity in service delivery.

**Helpful Tips:** 

When designing a patient navigation program, define navigator engagement, key collaborator roles, and staffing needs. Specify the patient population, geographic areas, and involved departments, while noting any services or populations outside the program's focus. See <u>Appendix 5</u> for language to include.

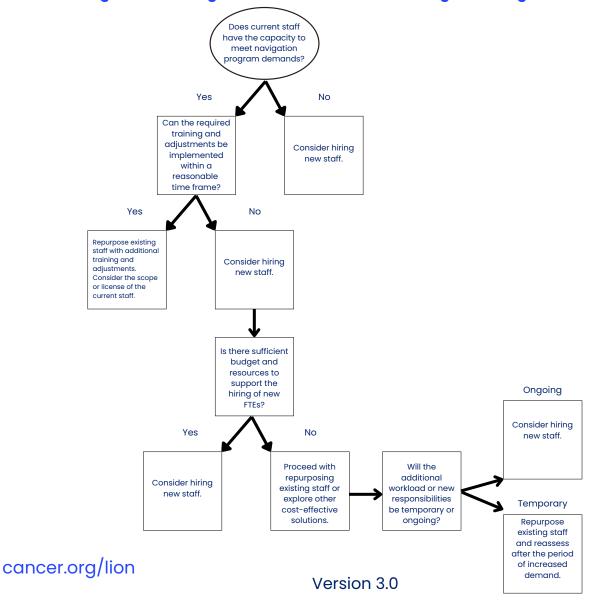
**Where:** Prioritize geographic areas with high health disparities (e.g., low access to care, high uninsured rates). Expand eligibility to underserved and rural populations, as appropriate.

**Who:** Collaborate with community health centers, advocacy groups, and public health departments focused on vulnerable populations. Define their role in reducing care barriers like transportation, language, and financial issues.

What is out of scope: Identify any services, activities, or patient populations that fall outside the program's core objectives, resources, or operational capacity.

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### Section 2.5 | Program Services

#### **Purpose:**

Describe specific services to be provided by the navigation program and clarify team responsibilities. Ensure the program's scope is well-defined, roles are clear, and expectations are set for consistent, accountable care delivery.

#### **Key Elements:**

#### **List of services**

Define the scope of navigation services, ensuring they address health equity by supporting underserved populations, such as providing language interpretation, financial assistance, and transportation. Assess whether current staff can meet these needs or if additional hires are required to fully support equitable care delivery.

#### **Description of team responsibilities**

Define roles in patient intake, data management, and support, ensuring equitable care delivery for all populations. Determine whether current staff can adjust responsibilities or if new positions are needed to meet equity goals.

#### **Expectations of the team**

Set performance standards emphasizing equitable care, ensuring staff are accountable for addressing barriers faced by vulnerable patients. Clarify if current staff can meet these standards or if additional hires are necessary to meet program needs.

#### **Helpful Tips:**

Create a detailed list of all patient services provided, tailored to meet the specific care needs of the patient population. This list should include every service offered, from initial consultations to follow-up care, and can help provide comprehensive support. Use flowcharts to define team roles and responsibilities, outlining tasks, timelines, and communication expectations for efficient and coordinated care delivery.

#### **Resource Links:**

- Program Services Template (<u>see Appendix 5</u>)
- Health care professional development:
   Working as a team to improve patient care (NIH National Library of Medicine)
- <u>Patient Navigation Job Roles by Levels of Experience: Workforce Development Task Group, National Navigation Roundtable</u>

#### Figure 4 | Program Services

Refer to this table as an example of how to organize services, team responsibilities, role descriptions, and expectations of the navigation team. \*Note - these are examples to consider and are not meant to be representative of all programs.

Service/ Responsibility	Team Member(s) Involved	Role/Duty Description	Expectations
New Patient Appointment	Intake Coordinator	Conduct initial patient assessments and gather relevant medical and personal information.	Complete within 24 hours of patient referral; accurate data collection.
Patient Education	Patient Navigator, Nurse Educator	Provide patients with information about their diagnosis, treatment options, and care plans.	Conduct education sessions within one week of diagnosis; provide clear and comprehensive information.
Care Coordination	Patient Navigator, Case Manager	Coordinate care among different healthcare providers, ensuring seamless communication and transition of care.	Maintain updated documentation; ensure timely referrals and follow-ups.

### Section 2.6 | Program Staffing

#### **Purpose:**

Provide an estimated staffing plan based on the patient services outlined in <u>Program Services (Section 2.5)</u>, focusing on potential new FTEs rather than reallocating existing team members. Use Figure 5 (below) for a template and criteria to consider when determining staffing needs. \*Note: Avoid proposing repurposing staff without leadership approval, even if the program is still pending approval.

#### **Key Elements:**

Description of proposed staffing model

Align staffing with program goals and patient needs by choosing between a broad team of specialists or a focused team based on complexity, volume, and services.

Productivity assumptions Based on caseload management, such as how many patients each navigator can handle per day or week, factoring in visit types (inperson, virtual, initial, and follow-up).

Number of full time and part time positions

Specify the number of full-time and part-time roles required based on caseloads, ensuring adequate staffing to meet patient volume and care complexity demands.

Additional resources needed

Evaluate current resources and partnerships to address care barriers and determine if external resources, such as American Cancer Society (ACS) are needed to fill gaps in support.

#### **Resource Links:**

- Program Staffing Template (see page 27, number 7)
- AONN+ Video Clarity in Defining Roles in a Navigation Program
- NIH National Library of Medicine Evidence Brief: Staffing Models in Specialty Care
- Patient and Family Engaged Care: An Essential Element of Health Equity (National Academy of Medicine)
- <u>Improving Healthcare Resilience Through an Equity Focused Framework (2022 AIA/ACSA Intersections Research Conference)</u>

# Figure 5 | Staffing Considerations

When completing this table, list the proposed position title and specify the FTE (Full-Time Equivalent) for each role. Enter the estimated annual salary, and calculate the estimated benefits by multiplying the annual salary by the fringe percentage from HR. Indicate if the position is new or repurposed from existing staff to support program needs, and include the grade level or other organizational classifications.

Proposed Position Title	FTE	Estimated Annual Salary	Estimated Benefits	Grade Level (or other org-specific info)

#### **Section 2.7 | Direct Costs**

#### **Purpose**

Conduct a point-in-time cost analysis to estimate the financial requirements for implementing and running the patient navigation program. Assess both start-up and operational costs to provide a comprehensive financial overview at this stage of the business case.

#### **Helpful Tips:**

Separate start-up and operational costs in your analysis. Include a contingency budget, and update estimates regularly to stay accurate.

#### **Key Elements:**

#### **Start-up Considerations:**

- Program Design and Oversight: Planning and developing the framework for the patient navigation program.
- Initial Technology Investments: Purchasing or upgrading systems necessary to support the program.
- Supervision and Administrative Support: Costs for hiring or reassigning supervisors or administrative staff (if needed).
- Patient Navigator Salary and Benefits: Compensation for any newly hired patient navigators.

#### **Operational Considerations:**

- Technology Licenses or Changes: Recurring fees for maintaining and updating necessary software and systems.
- **Professional Development and Credentialing:** Costs for training and certification required to maintain program quality.
- Facility and Indirect Costs: Estimate expenses for office space, utilities, or other indirect costs needed to support the staff and program activities.

#### **Table of Considerations for a Cost Analysis**

Consideration	Initial Proposal (Start-Up Phase)	Ongoing Review (Operational Phase)	Justification
Justifying Costs	Establish the necessity for initial investments (e.g., program design, staffing).     Use benchmarking to compare with similar programs to validate costs.	<ul> <li>Provide evidence that recurring costs are necessary and competitive.</li> <li>Use cost-benefit analysis for sustained value.</li> </ul>	<ul> <li>Demonstrates the financial need and benefits of each cost item relative to the program's objectives.</li> <li>Justifies expenditures to stakeholders, ensuring transparency.</li> </ul>
Accuracy	Ensure precise estimates using current market data for start-up costs (e.g., technology investments, salaries).	<ul> <li>Regularly update costs based on operational performance (e.g., tech maintenance, ongoing training costs).</li> </ul>	<ul> <li>Accurate estimates ensure the program is launched within budget and minimize unexpected expenses.</li> <li>Ongoing accuracy helps track deviations from the original budget.</li> </ul>
Detail	Provide clear line items for all start-up expenses (e.g., equipment, personnel, facilities). Include one-time costs (e.g., initial training).	Break down operational costs (e.g., facility expenses, salary).     Track recurring costs in detail for easy review and adjustment.	Detailed costing allows for thorough planning and understanding of financial needs in both phases. This aids in financial reporting.
Contingencies	Include a contingency buffer (typically 5-10%) for unanticipated start-up costs (e.g., higher tech or staffing costs).	<ul> <li>Account for fluctuations in operational costs (e.g., technology upgrades or maintenance over time).</li> <li>Include a buffer for recurring costs that may increase over time.</li> </ul>	<ul> <li>Ensures the program can handle unexpected expenses without exceeding the budget.</li> <li>Provides financial flexibility and preparedness for both phases.</li> </ul>

- <u>Direct Costs Template (see Appendix 5 for language to include)</u>
- <u>Establishing Common Cost Measures to Evaluate the Economic Value of Patient Navigation Programs</u>

# Section 2.8 | Program Investment and Return on Investment (ROI)

#### **Purpose:**

Analyze the costs and benefits of the proposed navigation program and alternatives to compare financial and non-financial impacts.

#### **Key Elements:**

#### Benefit analysis (over X time period)

Quantify benefits like reduced no-show rates and improved patient satisfaction while tracking the program's impact on underserved populations. Measure reductions in healthcare disparities, including ER visits in marginalized communities. Highlight cost savings and improved outcomes, assigning dollar values to illustrate financial impact.

#### **Alternatives**

When evaluating alternatives, evaluate how each option impacts health equity, focusing on access for under resourced patients. Prioritize strategies like community partnerships, language services, or technology that enhance equity. Assess ROI in terms of both financial and social impact, including reduced health disparities.

- Alternative 1: Summary of impact on the organization's strategy, operations, technology, risk, and ROI.
- Alternative 2: Summary of impact on the organization's strategy, operations, technology, risk, and ROI.

#### **Assumptions**

- Identify Key Assumptions: Include factors such as cost of providing culturally appropriate care, language services, and transportation support for low-income patients.
- Assign Ranges: Determine the possible range for each key assumption (e.g., low, medium, high).
  - For example:
    - Staff salaries could range from \$50,000 to \$70,000 annually.
    - No-show rates could be reduced by 10% to 25%
- Calculate Scenarios: Estimate best-case, worstcase, and likely outcomes for each assumption.
  - Best-case scenario: the most favorable outcomes (e.g., highest cost savings, lowest staffing costs).
  - Worst-case scenario: the least favorable outcomes (e.g., minimal cost savings, higherthan-expected investment).
- Analyze Impact: Compare how changes in each assumption (and combination of assumptions) affect the program's total cost and ROI. This will show which assumptions have the most significant impact on program success.

#### **Helpful Tips:**

To fully assess the financial impact of your patient navigation program, compare costs and benefits to calculate ROI. Use benchmarks, consider alternatives, and include a "do nothing" option to evaluate all potential outcomes. For more information on revenue opportunities, see Appendix 2 - Revenue Generation Opportunities. Additionally, for funding strategies such as grants, employer partnerships, and research collaborations, see Appendix 3 - Grant/Sponsor Funding for detailed options to support program implementation and sustainability.

# ROI

#### **ROI Calculation**

Combine cost and benefit analyses, including dollar figures for benefits, to estimate the ROI of the patient navigation program. If needed, consult with your organization for assistance with detailed financial calculations and analyses.

- To better understand the financial aspects of your patient navigation program, including revenue sources and expenses, see <u>Appendix 4 - Profit and Loss</u> <u>Statement Template</u> for a detailed guide to tracking financial performance.
- Common Cost Measures to Evaluate the Economic Value of Patient Navigation Programs (NIH National Library of Medicine)
- The Return on Investment of a Successful Navigation
   Program Becoming Familiar with Business Performance
   Metrics as a Method to Evaluate Navigation Services –
   Journal of Oncology & Navigation Survivorship (JONS)
- <u>Navigator Return on Investment (ROI) Calculator (CA Bridge)</u>



### **Section 3.0 | Conclusion**

Thank you for reviewing the Making the Case for Navigation: Business Case Toolkit.

This toolkit underscores the vital role of a well-structured patient navigation program in improving both patient outcomes and organizational efficiency. By providing a comprehensive analysis of program design, investment, return on investment (ROI), and expected benefits, it offers healthcare organizations a valuable resource for making informed decisions about developing or enhancing their navigation programs. Effective patient navigation can lead to significant benefits, including a reduction in missed appointments and emergency interventions, as well as a decrease in hospital readmissions. Furthermore, a well-implemented navigation program can enhance patient satisfaction and potentially lead to increased patient engagement and volume.

Key takeaways include the importance of:

- defining the program's scope clearly
- aligning with organizational objectives
- assessing and refining the program based on performance metrics, and
- leveraging the toolkit's guidance on investment and ROI to advocate for the program's value

Additionally, the toolkit highlights the need for a strategic alignment with organizational goals and the integration of best practices to maximize the program's success.

We hope this toolkit proves valuable in enhancing your patient navigation efforts.

For further thoughts or suggestions, please contact us.

# **Acknowledgements**



This toolkit is informed by a resource of the **National Hospice and Palliative Care Organization (NHPCO)**: Developing the Business Case, which is part of NHPCO's comprehensive Palliative Care Playbook (<a href="https://www.nhpco.org/palliativecare/palliative-care-playbook/">https://www.nhpco.org/palliativecare/palliative-care-playbook/</a>)."

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# Appendix 1 - Organizational Assessment Risk Table

#### **Risk table**

To complete a risk table like the one below:

- 1. Identify the risk, listing potential risks if implementing the patient navigation program
- 2. Assign a score from 1-5 based on the likelihood of each risk occurring.
- 3. Outline a mitigation plan, which is a strategy to reduce or address each risk.

Risk	Likelihood of Impact (low, medium, or high)	Mitigation Plan
Staying in Current State: Inefficiencies	High	Implement quick wins to improve current workflows; monitor key performance indicators to identify inefficiency trends.
Staying in Current State: Compliance Issues	Medium	Conduct regular compliance audits; update policies and training to address gaps.
Transitioning to Ideal State: Disruptions	Medium	Develop a phased implementation plan; ensure clear communication and training for all stakeholders.
Transitioning to Ideal State: Staff Resistance	High	Engage staff early in the process; provide training and support to ease the transition.

### **Appendix 2A - Revenue Generation Opportunities**

Revenue opportunities for oncology patient navigation programs can stem from various sources due to the supportive role navigation plays in improving patient care and the utilization of healthcare services. Below are some potential revenue opportunities.

Medicare and Private Insurer Reimbursements: Medicare and private insurers offer reimbursements for care coordination and navigation services through billing codes like Principal Illness Navigation (PIN) and Principal Care Management (PCM). These include codes such as:

#### Principal Care Management Reimbursement:

- Physician or QHP: 99424 \$83 for 30 min; 99425 \$60 per additional 30 min
- RN or SW (licensed staff incident-to QHP): 99426 \$63 for 30 min; 99427 \$48 per additional 30 min

#### Principal Illness Navigation Reimbursement:

- G0023: \$79 for first 60 min
- G0024: \$49 per additional 30 min

#### Community Health Integration:

- G0019: \$79 for first 60 min
- G0022: \$49 per 30 min after that (same reimbursement as PIN)

#### Complexity-Based Billing: G2211

Billing Code G2211 has been introduced by CMS to recognize the value of longitudinal relationships in cancer care, allowing specialists who provide ongoing care for patients with serious or complex conditions (like cancer) to bill for the complexity involved in such care. With reimbursement at around \$16 per visit, G2211 is designed to be used for long-term care relationships rather than one-time consultations. This code offers practices an additional revenue source while encouraging continuity of care and patient trust.

#### **Increased Service Utilization and Adherence**

- Increased Referrals and Treatments: Patient navigation can lead to more timely diagnosis and treatment, boosting referral volumes.
- Enhanced Compliance with Follow-up Care: Improved patient adherence to follow-up appointments increases service utilization and revenue.

#### **Quality Incentive Programs**

 Value-Based Care Incentives: Participation in programs such as Accountable Care Organizations (ACOs) offers financial incentives for meeting quality metrics and reducing healthcare costs.

#### **Enhanced Patient Satisfaction and Retention**

- Improved Patient Loyalty: Enhanced patient experiences lead to increased patient retention and loyalty, resulting in repeat visits and ongoing care revenue.
- Positive Word-of-Mouth: Satisfied patients are more likely to recommend the healthcare facility to others, potentially increasing the patient base.

#### Patient-Centered Medical Home (PCMH) Recognition

 PCMH Accreditation: Obtain PCMH recognition to qualify for enhanced payment rates and incentives from insurers.

- ACS National Navigation Roundtable (NNRT) Patient Navigation in Cancer Care: Review of Payment Models for a Sustainable Future
- <u>Care Management Services and Proposed Social</u>
   Determinants of Health Codes: A Comparison
- Centers for Medicare & Medicaid Services Quality
   Measure Development Plan: Supporting the Transition to the Merit-based Incentive Payment System (MIPS) and Alternative Payment Models (APMs)
- Exploring Patient Care Navigation in the Medicare Program
- <u>Factors Influencing the Implementation of Patient Navigation</u>
- <u>Financial Considerations of a Patient Navigation Program</u>
- Health Equity Services in the 2024 Physician Fee Schedule Final Rule
- How Patient Navigation Can Cut Costs and Save Lives
- <u>Patient Navigation in Cancer Care Review of Payment</u>
   Models for a Sustainable Future
- Programs for Adults with Complex Needs: A Scoping Review of the Literature
- <u>Reporting CPT codes for oncology navigation services:</u>
   The Cancer Moonshot
- You're Just Too Good to Be True: Billing for Longitudinal Care with G2211 (ASCO)

# Appendix 2B - Quick-Reference Table for Revenue Generation Opportunities

Oncology patient navigation programs play a critical role in improving patient outcomes and optimizing healthcare services. These programs have been shown to generate significant revenue by improving care coordination, patient adherence, and service utilization. Additionally, patient navigation can positively impact financial incentives tied to quality care initiatives, patient satisfaction, and value-based reimbursement models.

The table below provides a quick-reference guide to the key revenue opportunities associated with patient navigation programs, backed by evidence from relevant studies. This allows administrators and operational leaders to quickly assess the potential return on investment (ROI) of navigation services and understand how navigation can drive both clinical and financial benefits.

Revenue Opportunity	Study or Resource Document	Key Findings on ROI/Outcomes
Medicare and Private Insurer Reimbursements	Patient Navigation Proving Effective in Oncology (Oncology Times)	Patient navigation programs demonstrate significant value through outcomes such as earlier diagnoses, faster treatment, and reduced disparities in cancer care.
Principal Care Management Reimbursement	Implementation strategies to improve adoption of unmet social needs screening and referrals in care management using enabling technologies: Study protocol for a cluster randomized trial	Implementing technology in patient navigation can improve social risk screening and referrals to community resources for under resourced populations.
ncreased Service Utilization and Adherence	Opportunities to improve models of care for people with complex care needs (Center for Health Care Strategies, Inc.)	Cancer navigation programs improve outcomes and reduce costs by coordinating care, addressing social determinants, and supporting high-risk patients, generating ROI through fewer emergency visits, hospitalizations, and better patient adherence.
Quality Incentive Programs	Transitioning to Medicare's Value-Based Models within Primary Care: Business Practices for Success (Doctoral dissertation)	To enhance oncology navigation ROI, integrating navigators within healthcare networks, standardizing patient data systems and engaging patients can demonstrate improved outcomes and cost savings.
Enhanced Patient Satisfaction and Retention	Examining the Business Case for Patient Experience: A Systematic Review (Journal of Healthcare Management)	Patient experiences are directly associated with increased patient retention and likelihoo of recommendations, suggesting that improving patient navigation can enhance revenue and ROI for healthcare providers.
PCMH Accreditation	Costs of Transforming Established Primary Care Practices to Patient-Centered Medical Homes (PCMHs)	Investing in patient navigation programs can yield a positive ROI through improved patient outcomes, reduced emergency visits and hospital readmissions, and lower no-show rates, which all contribute to better resource allocation and financial sustainability for healthcare practices.

# **Appendix 3 - Grant/Sponsor Funding**

Funding for patient navigation programs can be sourced from a variety of channels, each offering unique opportunities to support and enhance healthcare services. Below are some key avenues for securing grants and sponsor funding.

#### **Grants and Funding**

- Government Grants: Apply for federal, state, and local grants focused on improving healthcare access and outcomes.
- Private Foundations: Seek funding from organizations dedicated to healthcare innovation and patient support.

#### **Employer Health Plans**

• Employer Benefits: Offer navigation services to self-insured employers as part of their employee health benefits.

#### **Research and Innovation**

- Clinical Trials Support: Partner with research organizations and pharmaceutical companies to support clinical trials, improving patient recruitment and retention.
- Innovation Grants: Apply for innovation grants that support new models of patient care and navigation.

#### **Resource Links:**

<u>U.S. Department of Health and Human Services - HHS</u> <u>Grants & Contracts</u>

<u>Medicaid.gov - Managed Care</u>

<u>Building the Case: Oncology Patient Navigation and Payer Engagement</u>

Effects of New Funding Models for Patient-Centered Medical Homes on Primary Care Practice Finances and Services: Results of a Microsimulation Model

<u>Impact of the Patient-Centered Medical Home on Consistently High-Cost Patients</u>

# **Appendix 4 - Profit Loss Statement Template**

On this page, you will find a Profit and Loss Statement template.

To complete the profit and loss template for your patient navigation program, follow these steps:

- List Revenue Sources: Identify all potential revenue sources, such as billing, grants, or partnerships.
- Estimate Expected Revenue: Based on patient volume and reimbursement rates, estimate the expected revenue from each source.

Outline Expenses: List all expenses, including:

- Start-up Costs: Program design, technology investments, etc.
- Ongoing Operational Costs: Salaries, technology maintenance, administrative expenses, professional development, etc.
- 4 Calculate Gross Profit: Subtract the total expenses from the total revenue.
- Regular Review: Regularly review and update the template to ensure accuracy and adjust for any changes.

Category	Description	Amount (USD)
Revenue		
- Billing and Reimbursement	Revenue from patient services, reimbursement, billing codes	\$XXX,XXX
- Grants and Sponsorships	Grants and external funding sources	\$XXX,XXX
- Partnerships	Revenue from partnerships or collaborations	\$XXX,XXX
Total Revenue		\$XXX,XXX
Expenses		
- Start-up Costs	Program design, technology, initial training	\$XXX,XXX
- Salaries and Benefits	Navigator and support staff salaries, benefits	\$XXX,XXX
- Technology Maintenance	Software subscriptions, system updates	\$XXX,XXX
- Administrative Costs	Office supplies, utilities, general operations	\$XXX,XXX
- Professional Development	Ongoing staff training and certifications	\$xxx,xxx
Total Expenses		\$XXX,XXX
Gross Profit/Loss	(Total Revenue - Total Expenses)	\$XXX,XXX

# Appendix 5 - Instructions for Using the Business Case Template

On the following three pages, you will find a Business Case Template. This template is designed to help you structure and present your business case effectively. Each section contains populated example text to guide you in framing your content. Start by replacing the example text (italicized and in blue font) with details specific to your organization's needs, ensuring that you address the key elements such as:

- Executive summary
- Background and Rationale
- Organizational Assessment
- Program Description
- <u>Defining Benefits</u>
- Program Objectives
- <u>Program Outcomes</u>
- Program Design and Scope
- Program Services
- Program Staffing
- Direct Costs, and
- Program Investment and Return on Investment (ROI).

Use the examples as a reference for the type of information to include and the level of detail required. The goal is to create a comprehensive and persuasive business case that clearly communicates the value and feasibility of your project. Be sure to review and customize each section thoroughly, ensuring clarity, accuracy, and relevance to your specific context.

# **Making the Case for Patient Navigation**

# **Business Case Template**

Title: [Organization's Name, Department's Name, etc.] Business Case for Patient Navigation

Prepared by: [Your Name/Title]

Date: [Date]

#### **Executive Summary**

**Purpose:** Provide a concise summary describing the patient navigation program objectives and key benefits.

#### **Example Text:**

"Patient navigation is an evidence-based intervention demonstrated to reduce cancer disparities and improve patient outcomes. We present a comprehensive analysis and strategic proposal for implementing a patient navigation program at [organization name].

In our current healthcare delivery model, we are challenged by [insert specific challenges such as fragmented care, inefficiencies, increased costs, extended patient journey times]. These challenges are exacerbated by a highly competitive environment, making the absence of a structured patient navigation program a noticeable gap in our service offering."

#### **Background and Rationale**

**Purpose:** The purpose of this section is to align the patient navigation program with the organization's strategic goals, assess the impact of inefficiencies due to the lack of navigation, and demonstrate the urgency of addressing gaps in patient care coordination through a structured needs assessment.

#### **Example Problem Statement:**

"Within [organization/clinic/department], the average time from diagnosis to treatment is [insert time frame], yet for [specific patient groups, e.g., Black patients] the time is [insert time frame] and for [other patient groups, e.g., Spanish-speaking patients] it is [insert time frame]."

#### **Example Text:**

"The effectiveness of patient navigation programs is well-documented, particularly in improving access to care, adherence to treatment plans, and patient satisfaction. Studies show significant improvements in screening rates, treatment adherence, and overall health outcomes."

#### **Organizational Assessment**

**Purpose:** Organizations will vary in readiness for patient navigation. This section describes the ideal state for supporting the program, identifies gaps between current and desired states, and outlines changes to improve efficiency and reduce risks. It also assesses the risks and benefits of maintaining the current state versus transitioning, guiding informed decisions for successful implementation.

#### **Example Text:**

#### Current State:

- Operations & Workflows: ["Currently, patient referrals are managed manually, leading to delays and inefficiencies. Integration of patient navigation will streamline handoff processes and improve referral tracking."]
- IT Infrastructure: ["Our existing EMR system lacks fields for documenting navigation activities, necessitating customization for effective tracking of patient interactions."]

#### Define the Ideal State:

- Operations & Workflows: "The ideal state includes [automated referral tracking and real-time communication between navigators and clinical teams, ensuring efficient workflow integration."]
- IT Infrastructure: ["An updated EMR system with built-in navigation documentation features and secure messaging capabilities is required."]

#### Identify Gaps and Required Changes:

- Identify Gaps: ["Discrepancies include manual referral processes and inadequate IT support for navigation documentation."]
- Required Changes: ["Implement automated referral systems, customize EMR for navigation documentation, and integrate real-time communication tools."]

#### **Program Description**

**Purpose:** Explain how the navigation program will address the identified business problems or opportunities by aligning with organizational priorities and leveraging available resources. This section should connect <u>Program Design and Scope</u> and <u>Program Objectives</u> to the specific needs and gaps identified through the Needs Assessment in the <u>Organizational</u> Assessment (Section 1.3), detailing how the program's benefits will be measured and achieved.

#### **Example Text:**

"Implementing the program will [streamline care pathways, enhance patient satisfaction, and boost our competitive edge through improved care quality and efficiency, reinforcing our commitment to patient-centered care.]"

#### **Defining Benefits**

**Purpose:** Start the program description by defining the benefits to clearly demonstrate the value of the navigation program. Linking benefits to specific, measurable goals sets the stage for the program's objectives and outcomes, illustrating how the program directly supports the organization's strategic priorities. This section helps connect the <u>Background and Rationale (Section 1.0)</u> with the specific objectives and performance metrics outlined in the following two sections, which are <u>Program Objectives (Section 2.2)</u> and <u>Program Outcomes (Section 2.3)</u>.

#### **Example Text:**

"Patient navigation provides personalized support, leading to improved treatment adherence and higher patient satisfaction. Streamlined communication reduces errors and optimizes workflows, saving staff time. The program is designed to [reduce no-show rates, emergency room visits, and readmissions, leading to substantial cost savings.] Additionally, it enhances [patient volume and loyalty, supports staff satisfaction and retention, and qualifies for quality incentive programs."]

#### **Program Objectives**

**Purpose:** Outline what the program will accomplish in clear and measurable terms. These objectives can be used in a post-implementation evaluation to assess the program's success.

#### **Example Text:**

"Reduce the average time from cancer diagnosis to treatment from [8 weeks] to [6 weeks] for patients of all races and ethnicities."

#### **Program Outcomes**

**Purpose:** Outline how the program's outcomes will be measured, detailing the impact on key stakeholders, and including specific key performance indicators (e.g., patient satisfaction scores, time to treatment, readmission rates).

#### **Example Text:**

"Success will be measured through various KPIs including patient satisfaction scores, time to treatment initiation, and readmission rates. The goal is to reduce the average time from diagnosis to treatment by [2 weeks], increase patient satisfaction scores by [20%], and degrees readmissions by [15%]." Society, Inc.

#### **Program Design and Scope**

**Purpose:** Outline the program's design and scope, including staffing, timeframe, patient population, geographic areas, collaborators, eligibility, and key departmental roles.

#### **Example Text:**

"The patient navigation program will be designed to [integrate seamlessly with existing clinical workflows, providing dedicated support to patients from diagnosis through treatment.] The program will use a multidisciplinary approach to address the diverse needs of our patient population."

#### **Program Services**

**Purpose:** Describe the specific services provided to patients.

#### **Example Text:**

"The patient navigation program will offer comprehensive services to support patients throughout their care journey. This includes appointment scheduling, personalized patient education, care coordination, and follow-up engagement. Navigators will provide support in understanding treatment plans, accessing community resources, and addressing any barriers to care."

#### **Program Staffing**

**Purpose:** Provide an estimated staffing plan based on the patient services outlined in <u>Program Services (Section 2.5)</u>, rather than your current care model. Your staffing model could include new FTEs or repurposing existing team members. **Example Text:** 

"The program will require a multidisciplinary team to meet patient needs. We anticipate the need for [3 full-time patient navigators, 1 care coordinator, and 1 administrative support staff.] Each navigator will handle an average of [15] cases per week, including both in-person and virtual visits. We expect [80%] of these visits to be billable based on our patient population mix."

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#### **Direct Costs**

**Purpose:** Provide a comprehensive estimate of the costs associated with implementing and running the patient navigation program over a certain period of time.

#### **Example Text:**

"Direct costs for implementing the patient navigation program over a 12-month period include [staff salaries, training, technology upgrades, and administrative expenses. Estimated costs total \$200,000."]

#### Program Investment and Return on Investment (ROI)

**Purpose:** Analyze the costs and benefits of the proposed navigation program and alternatives to compare financial and non-financial impacts.

#### **Example Text:**

"Expected benefits include [reduced no-show rates and readmissions, improved patient satisfaction, and increased patient volume.] Alternatives such as [virtual navigation using telehealth platforms] were evaluated. Cost and benefit analyses indicate a projected ROI of [150% over 3 years."]

#### Conclusion

Purpose: Summarize the business case and call for approval.

#### **Example Text:**

"This business case outlines the need for a patient navigation program to address gaps in care and improve patient outcomes. The program offers significant benefits, including enhanced patient care, operational efficiencies, and cost savings. Approval of this proposal will enable us to move forward with implementation. Please review and provide feedback by [date]."

#### **Appendices**

Purpose: Provide additional resources and references.

#### **Example Text:**

"Appendices include templates, checklists, and case studies related to patient navigation programs. For further inquiries or support, please contact [point of contact's name, email, phone, etc.]."

# Appendix 6 - Instructions for Using the Business Case PowerPoint Template

On the following pages, you will find a Business Case PowerPoint Template. This template is designed to help you structure and present your business case in an effective PowerPoint format. Each section contains populated example text to guide you in framing your content. Start by replacing the example text (italicized and in blue font) with details specific to your organization's needs, ensuring that you address all key elements such as:

- Executive summary
- Background and Rationale
- Organizational Assessment
- Program Description
- <u>Defining Benefits</u>
- Program Objectives
- Program Outcomes
- Program Design and Scope
- Program Services
- Program Staffing
- Direct Costs, and
- Program Investment and Return on Investment (ROI).

Use the examples as a reference for the type of information to include and the level of detail required. The goal is to create a comprehensive and persuasive business case PowerPoint slide deck that clearly communicates the value and feasibility of your project. Be sure to review and customize each section thoroughly, ensuring clarity, accuracy, and relevance to your specific context.

# Making the Case for Patient Navigation: A Business Case Toolkit

# **Executive Summary**

Background & Rationale	Briefly state the program's purpose and the problem it addresses.
Organizational Assessment	Summarize the organization's readiness to implement the navigation program.
Program Description	Provide a concise overview of the program's goals and scope.
<u>Defining Benefits</u>	Highlight key benefits for patients, providers, and the organization.
<u>Program Objectives</u>	Outline the program's objectives and how they align with organizational goals.
<u>Program Outcomes</u>	List the measurable outcomes and performance metrics.
Program Design & Scope	Define the program's scope, design, and staffing approach.
<u>Program Services</u>	Compile a list of services the program will offer.
<u>Program Staffing</u>	Specify staffing needs and key roles.
<u>Direct Costs</u>	Outline the program's direct costs.
Program Investment & ROI	Summarize the required investment and anticipated return on investment.

**Purpose:** Provide a concise summary describing the patient navigation program objectives and key benefits.

#### **Example Text:**

"Patient navigation is an evidence-based intervention demonstrated to reduce cancer disparities and improve patient outcomes. We present a comprehensive analysis and strategic proposal for implementing a patient navigation program at [organization name].

In our current healthcare delivery model, we are challenged by [insert specific challenges such as fragmented care, inefficiencies, increased costs, extended patient journey times]. These challenges are exacerbated by a highly competitive environment, making the absence of a structured patient navigation program a noticeable gap in our service offering."

# **Background and Rationale**

**Purpose:** The purpose of this section is to align the patient navigation program with the organization's strategic goals, assess the impact of inefficiencies due to the lack of navigation, and demonstrate the urgency of addressing gaps in patient care coordination through a structured needs assessment.

#### **Example Problem Statement:**

"Within [organization/clinic/department], the average time from diagnosis to treatment is [insert time frame], yet for [specific patient groups, e.g., Black patients] the time is [insert time frame] and for [other patient groups, e.g., Spanish-speaking patients] it is [insert time frame]."

#### **Example Text:**

"The effectiveness of patient navigation programs is well-documented, particularly in improving access to care, adherence to treatment plans, and patient satisfaction. Studies show significant improvements in screening rates, treatment adherence, and overall health outcomes."



# **Organizational Assessment**

**Purpose:** Organizations will vary in readiness for patient navigation. This section describes the ideal state for supporting the program, identifies gaps between current and desired states, and outlines changes to improve efficiency and reduce risks. It also assesses the risks and benefits of maintaining the current state versus transitioning, guiding informed decisions for successful implementation.

#### **Example Text:**

- Current State:
  - Operations & Workflows: ["Currently, patient referrals are managed manually, leading to delays and inefficiencies. Integration of patient navigation will streamline handoff processes and improve referral tracking."]
  - IT infrastructure: ["Our existing EMR system lacks fields for documenting navigation activities, necessitating customization for effective tracking of patient interactions."]
- Define the Ideal State:
  - Operations & Workflows: "The ideal state includes [automated referral tracking and real-time communication between navigators and clinical teams, ensuring efficient workflow integration."]
  - IT Infrastructure: ["An updated EMR system with built-in navigation documentation features and secure messaging capabilities is required."]
- Identify Gaps and Required Changes:
  - Identify Gaps: ["Discrepancies include manual referral processes and inadequate IT support for navigation documentation."]
  - **Required Changes:** ["Implement automated referral systems, customize EMR for navigation documentation, and integrate real-time communication tools."]



## **Program Description**

**Purpose:** Explain how the navigation program will address the identified business problems or opportunities by aligning with organizational priorities and leveraging available resources. This section should connect <u>Program Design</u> and Scope and <u>Program Objectives</u> to the specific needs and gaps identified through the Needs Assessment in the <u>Organizational Assessment</u> (Section 1.3), detailing how the program's benefits will be measured and achieved.

**Example Text:** 

"Implementing the program will [streamline care pathways, enhance patient satisfaction, and boost our competitive edge through improved care quality and efficiency, reinforcing our commitment to patient-centered care."]



#### **Key Elements:**

**Current State** 

Summarize the existing navigation program's original intent and objectives, highlighting gaps between initial goals and current outcomes. Note any major changes to scope or approach, the reasons for these shifts, and whether the original goals were met.

**Defining Benefits** 

Link benefits to caseload management, demonstrating impact on key metrics such as reduced no-show rates, better patient outcomes, and improved organizational efficiency.

<u>Program</u> Objectives Define clear, measurable objectives related to managing patient caseloads, such as reducing navigator workloads, improving care coordination, and ensuring equitable service distribution.

<u>Program</u> <u>Outcomes</u> Measure success through caseload-related metrics, including reduced patient wait times, increased navigator capacity, and improved patient satisfaction. Ensure that outcomes are specific, measurable, and time bound.

## **Defining Benefits**

**Purpose:** Provide an estimated staffing plan based on the patient services outlined in Program Services (<u>Section 2.5</u>), focusing on potential new FTEs rather than reallocating existing team members. Use Figure 5 (below) for a template and criteria to consider when determining staffing needs. \*Note: Avoid proposing repurposing staff without leadership approval, even if the program is still pending approval.

#### **Example Text:**

"Patient navigation provides personalized support, leading to improved treatment adherence and higher patient satisfaction. Streamlined communication reduces errors and optimizes workflows, saving staff time. The program is designed to [reduce no-show rates, emergency room visits, and readmissions, leading to substantial cost savings.] Additionally, it enhances [patient volume and loyalty, supports staff satisfaction and retention, and qualifies for quality incentive programs."]

#### **Key Elements:**

Description of proposed staffing model Align staffing with program goals and patient needs by choosing between a broad team of specialists or a focused team based on complexity, volume, and services.

Number of full time and part time positions

Specify the number of full-time and part-time roles required based on caseloads, ensuring adequate staffing to meet patient volume and care complexity demands.

Productivity assumptions

Based on caseload management, such as how many patients each navigator can handle per day or week, factoring in visit types (inperson, virtual, initial, and follow-up).

Additional resources needed

Evaluate current resources and partnerships to address care barriers and determine if external resources, such as <u>American Cancer Society</u> (ACS) are needed to fill gaps in support.

## **Program Objectives**

**Purpose:** Outline what the program will accomplish in clear and measurable terms. These objectives can be used in a postimplementation evaluation to assess the program's success.

#### **Example Text:**

"Reduce the average time from cancer diagnosis to treatment from [8 weeks] to [6 weeks] for patients of all races and ethnicities."

3	IVI		•	•
Specific	Measurable	Achievable	Relevant	Time-bound
Who, what, where, when, why	What is not measured can't be improved	Make it challenging but not impossible	Closely connected to the objective	A completion date requires accountability
Increase patient satisfaction by enhancing communication and support throughout their care trajectory.	Achieve a 10% improvement in patient satisfaction scores, as measured by postcare surveys, within 12 months.	Implement regular follow-ups and feedback mechanisms for 90% of patients enrolled in the navigation program.	Patient satisfaction goal aligns with the program's objective to provide personalized support and improve patient experience.	Complete within 12 months, with quarterly reviews of satisfaction data to track progress.

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## **Program Outcomes**

**Purpose:** Outline how the program's outcomes will be measured, detailing the impact on key stakeholders, and including specific key performance indicators (e.g., patient satisfaction scores, time to treatment, readmission rates).

#### **Example Text:**

"Success will be measured through various KPIs including patient satisfaction scores, time to treatment initiation, and readmission rates. The goal is to reduce the average time from diagnosis to treatment by [2 weeks], increase patient satisfaction scores by [20%], and decrease readmissions by [15%]."

#### **Performance Metrics**

КРІ	Benchmark	Baseline	Υl	Y2	<b>Y</b> 3

## **Program Design and Scope**

**Purpose:** Outline the program's design and scope, including staffing, timeframe, patient population, geographic areas, collaborators, eligibility, and key departmental roles.

#### **Example Text:**

"The patient navigation program will be designed to [integrate seamlessly with existing clinical workflows, providing dedicated support to patients from diagnosis through treatment.] The program will use a multidisciplinary approach to address the diverse needs of our patient population."

#### **Key Elements:**

Patient navigation program design: Define the scope of navigator engagement, activities, and roles. Use a decision tree to assess whether to hire new staff or repurpose existing personnel for effective program implementation and sustainability.

**Department/Organization:** Details the specific locations/sites, if applicable and departments or group of departments who will be involved in the program.

Patient Population: Define the specific group of patients the program will focus on, including any relevant demographics, disease types, or other criteria that help identify the target population.

**Where:** Define the geographic areas where patients must live or receive care to qualify for the program.

**Who:** Identify key collaborators such as physicians, clinics, hospitals, and insurance plans. Outline their roles and how they interact with the navigation team.

What is out of scope: Identify any services, activities, or patient populations that fall outside the program's core objectives, resources, or operational capacity.

## **Program Services**

Purpose: Describe the specific services provided to patients.

#### **Example Text:**

"The patient navigation program will offer comprehensive services to support patients throughout their care journey. This includes appointment scheduling, personalized patient education, care coordination, and follow-up engagement. Navigators will provide support in understanding treatment plans, accessing community resources, and addressing any barriers to care."

#### Figure 4 | Program Services

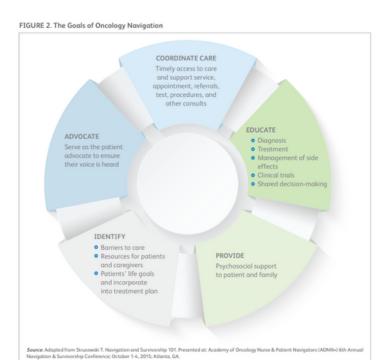
Refer to this table as an example of how to organize services, team responsibilities, role descriptions, and expectations of the navigation team. \*Note - these are examples to consider and are not meant to be representative of all programs.

Service/ Responsibility	Team Member(s) Involved	Role/Duty Description	Expectations
New Patient Appointment	Intake Coordinator	Conduct initial patient assessments and gather relevant medical and personal information.	Complete within 24 hours of patient referral; accurate data collection.
Patient Education	Patient Navigator, Nurse Educator	Provide patients with information about their diagnosis, treatment options, and care plans.	Conduct education sessions within one week of diagnosis; provide clear and comprehensive information.
Care Coordination	Patient Navigator, Case Manager	Coordinate care among different healthcare providers, ensuring seamless communication and transition of care.	Maintain updated documentation; ensure timely referrals and follow-ups.

#### **Resource Links:**

- Program Services Template (<u>see Appendix 5</u>)
- <u>Health care professional development: Working as a team to improve patient care (NIH National Library of Medicine)</u>
- <u>Patient Navigation Job Roles by Levels of Experience: Workforce Development Task Group, National Navigation Roundtable</u>

## **Navigation Goals and Roles**



Service	Delivered by	What is provided
Clinical Navigation	Clinical navigators; may also be referred to as nurse navigators or oncology nurse navigators. Can be provided by clinically licensed social workers, imaging techs, or radiation therapists.	Education and resources to facilitate informed decision-making, timely access to quality health and psychosocial care, and patient's understanding of disease and health system
Non-Clinical Navigation	Patient Navigators; may also be referred to as oncology patient navigators, resource navigators, or financial navigators.	Assistance with accessing health facility or community-based resources to overcome logistical barriers to care
Community Outreach and Education	Community Health Workers	Education on community's needs, health behaviors, chronic diseases and assistance accessing available resources

## **Conclusion**

Purpose: [Summarize the business case and call for approval.]

#### **Example Text:**

"This business case outlines the need for a patient navigation program to address gaps in care and improve patient outcomes. The program offers significant benefits, including enhanced patient care, operational efficiencies, and cost savings. Approval of this proposal will enable us to move forward with implementation. Please review and provide feedback by [date]."

Summary	[Recap the key points of the business case.]
Importance	[Reiterate the importance of the patient navigation program]
Next Steps	[Call to action for approval and next steps, including timeframe to decide.]
Q&A	[Offer the opportunity for leadership and colleagues to ask questions.]

## **Program Staffing**

**Purpose:** Provide an estimated staffing plan based on the patient services outlined in <u>Program Services (Section 2.5)</u>, rather than your current care model. Your staffing model could include new FTEs or repurposing existing team members.

**Example Text:** 

"The program will require a multidisciplinary team to meet patient needs. We anticipate the need for [3 full-time patient navigators, 1 care coordinator, and 1 administrative support staff.] Each navigator will handle an average of [15] cases per week, including both in-person and virtual visits. We expect [80%] of these visits to be billable based on our patient population mix."

#### **Staffing Considerations**

Proposed Position Title	FTE	Estimated Annual Salary	Estimated Benefits (annual salary x 30%)	Grade Level (or other org-specific info)

#### **Example job descriptions:**

<u>CareWays sample job description</u>

Clinical Navigator Job Description Fox Chase Virtua Health Cancer Program

## **Direct Costs**

Purpose: Provide a comprehensive estimate of the costs associated with implementing and running the patient navigation program over a certain period of time.

**Example Text:**"Direct costs for implementing the patient navigation program over a 12-month period include [staff salaries, training, technology upgrades, and administrative expenses. Estimated costs total \$200,000."]

### **Table of Considerations for a Cost Analysis**

Consideration	Initial Proposal (Start-Up Phase)	Ongoing Review (Operational Phase)	Justification
Justifying Costs	<ul> <li>Establish the necessity for initial investments (e.g., program design, staffing).</li> <li>Use benchmarking to compare with similar programs to validate costs.</li> </ul>	<ul> <li>Provide evidence that recurring costs are necessary and competitive.</li> <li>Use cost-benefit analysis for sustained value.</li> </ul>	<ul> <li>Demonstrates the financial need and benefits of each cost item relative to the program's objectives.</li> <li>Justifies expenditures to stakeholders, ensuring transparency.</li> </ul>
Accuracy	Ensure precise estimates using current market data for start-up costs (e.g., technology investments, salaries).	<ul> <li>Regularly update costs based on operational performance (e.g., tech maintenance, ongoing training costs).</li> </ul>	<ul> <li>Accurate estimates ensure the program is launched within budget and minimize unexpected expenses.</li> <li>Ongoing accuracy helps track deviations from the original budget.</li> </ul>
Detail	Provide clear line items for all start-up expenses (e.g., equipment, personnel, facilities). Include one-time costs (e.g., initial training).	Break down operational costs (e.g., facility expenses, salary).     Track recurring costs in detail for easy review and adjustment.	Detailed costing allows for thorough planning and understanding of financial needs in both phases. This aids in financial reporting.
Contingencies	Include a contingency buffer (typically 5-10%) for unanticipated start-up costs (e.g., higher tech or staffing costs).	<ul> <li>Account for fluctuations in operational costs (e.g., technology upgrades or maintenance over time).</li> <li>Include a buffer for recurring costs that may increase over time.</li> </ul>	<ul> <li>Ensures the program can handle unexpected expenses without exceeding the budget.</li> <li>Provides financial flexibility and preparedness for both phases.</li> </ul>

# Program Investment and Return on Investment (ROI)

Purpose: Analyze the costs and benefits of the proposed navigation prógram and alternative options, comparing financial and non-financial impacts.

**Example Text:** 

"Expected benefits include [reduced no-show rates and readmissions, improved patient satisfaction, and increased patient volume.] Additional downstream revenue from increased imaging, biopsies, surgeries, and improved patient retention within the system is anticipated. Alternatives such as [virtual navigation using telehealth platforms] were also evaluated. Cost and benefit analyses project an POL of [150%] evaluated. Cost and benefit analyses project an ROI of 150% over 3 years."]



## **Appendices**

**Purpose:** Provide additional resources and references.

#### **Example Text:**

"Appendices include templates, checklists, and case studies related to patient navigation programs. For further inquiries or support, please contact [point of contact's name, email, phone, etc.]."