Category: Clinical Trial Operations (Trial Start-up, Regulatory, Data Management, IITs) – Completed Project

Streamlining Clinical Trial Cost Recovery: Enhancing Invoicing Accuracy and Collaboration at the UFHCC

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1. Background

Like many academic research institutions, University of Florida Health Cancer Center (UFHCC) strives to optimize cost recovery for clinical trials. Subject visit tracking spreadsheets are inefficient and prone to manual data entry errors. Central unit invoicing requires detailed understanding of cancer-specific trials and budgets, making scalability difficult. Communication breakdowns exacerbate billing inconsistencies and delay issue resolution.

2. Goals

UFHCC's cost recovery initiative aimed to increase reimbursement of clinical and data team effort by 25 percent between FY2022 (baseline) and FY2025 (target) by:

- 1. Utilizing OnCore to centralize financial and clinical trial data
- 2. Enhancing communication between clinical and finance teams via educational opportunities
- 3. Optimizing internal finance staffing
- 4. Increasing financial transparency and accountability through regular audits, pre-award education, and development of coordinator tools
- 5. Instituting regular follow-ups on outstanding transactions

3. Solutions and Methods

The finance team shifted from using Excel spreadsheets to OnCore for tracking subject visits/payments due, centralizing all trial and finance data. This allowed for one-glance monitoring of all aspects of the trial as well as more accurate and real-time reporting. Invoicing responsibilities transitioned from a central unit to an internal finance team, with a deeper understanding of cancer-specific trials and budgets as well as established relationships with the clinical team. With the transition from the central unit, UFHCC was able to increase the dedicated FTE count from one Research Administrator to two Research Administrators and a Graduate level intern.

The finance team trained coordinators on how to record visits to maximize invoicing. For instance, the financial team communicated the importance of supporting documentation and that some sponsors would not pay without it. Ongoing updates and dialogue ensure clinical teams stay informed regarding billing needs. Study-specific cheat sheets are created for clinical teams, outlining key budget details and coordinator responsibilities.

Weekly audits of subject visits are completed to confirm alignment with budget and contract terms. This proactive approach identifies discrepancies before invoicing, preventing errors and ensuring that only invoiceable items are considered. Additionally, finance reviews are conducted upon first enrollment to ensure proper OnCore entry for billing. Frequent automated reports from OnCore reveal unresolved invoices, reducing time spent generating manual reports. Weekly deposit reviews identify unpaid items, so the finance team can proactively act on outstanding payments.

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4. Outcomes

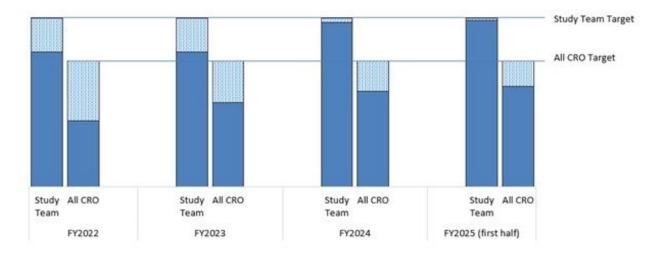
Between FY2022 and FY2025 (first half), cost recovery increased 24 percent, almost at our 25 percent increase goal, which we hope to meet by the end of the fiscal year.

5. Lessons Learned and Future Directions

Consistent communication between teams is essential so that everyone understands their roles and responsibilities in cost recovery. Pre-award training for clinical teams about how payments connect to study tracking was instrumental in reducing post-award issues. Third, efficient electronic resources are crucial: moving the process to OnCore improved tracking and access to financial information. Finally, real-time tracking and audits are more effective than traditional closeout audits, as they ensure that discrepancies are identified early.

UFHCC is developing comprehensive reports and dashboards to support detailed, real-time auditing. These tools can be used for education, to ensure that best financial practices are embedded across teams and throughout the clinical trial lifecycle. We have also expanded our cost recovery goal to now increase the percentage of entire CRO-wide effort covered by clinical trial revenue by 25 percent.

Figure



Effort Cost Recovery FY2022-2025