

## A Question of Reimbursement

### Question

As manager of the small editorial and production office at a large institution, you have traditionally received funding from a budgeted portion of the overall clinical research budget. As your budget has remained the same for the last few years, you have found it necessary to downsize by not replacing staff who leave. Your department has survived this downsizing by absorbing and finding more efficient ways to handle the existing workload. However, pressure

is increasing on research administration, to whom you report, to continue to cut costs, and you have been asked to develop a recharge system for generating revenue before funding for your department is cut even further. You will, of course, look to other managing editors for ideas, systems, and procedures to manage this situation and need to focus your queries before seeking further information.

- Will your recharge system be only inter-

nal within your organization, or will you need to seek and recharge external clients (authors) as well?

- Will the basis for the recharge system be a unit of time (for example, hourly) or a physical unit (for example, manuscript or galley pages)?
- What basic editorial services will be included—journal selection, manuscript or graphics organization or development, micro (sentence) editing, copyediting, authorship and acknowledgment, copy-

right review with reference check?

- Will you also charge for consultation time (for example, about how to draft a response to a journal's reviewer's comments or convert documents using different platforms)?
- Do you need a business plan for the transition with some supporting documentation (for example, estimate forms stating charges for editorial services with a client signature line)?
- How can you best communicate the new policy to existing client-authors so that they will plan to include requests for editorial services in their grant proposals?

### Solutions

(Note: The following solutions come from experienced editors representing a range of settings. The first is from the director of a long-standing editorial service at a private clinical institution, the second from an experienced editor-physician who recently established an editorial service at an academic research institute, and the third from a well-established freelance editorial consultant. Additional responses to the question are invited; please submit them as noted at the end of this column.)

**Setting a fee.** Once a decision is made to charge for your editorial service, the first step is to establish a fee. We decided on an hourly rate because it seemed less likely to penalize better writers, whose manuscripts take less time. An hourly rate also encourages authors to supply us with electronic copy, which can be easier to correct and thus faster to process. When an institution finds it desirable to continue supporting the editorial service to any extent, an hourly fee based on a unit of time can cover salary and benefits or overhead.

**Defining gratis services.** Continuing to provide authors with some free editorial hours or services can ease the transition to a fee-for-service program. When we instituted our "chargeback" program at The Menninger Clinic in 1991, clinicians were given 5 free hours of editorial support over each of the

next 3 years. Today, we still provide at no charge some small services, such as phone or e-mail responses to grammar questions. In addition, we continue to assist residents, fellows, and trainees in the Karl Menninger School of Psychiatry and Mental Health Sciences at no charge and to conduct low-cost writing workshops and seminars.

**Selling externally.** Although selling our editorial service externally was tempting, we decided that the problems (such as promotion, conflicting demands, and billing) outweighed potential benefits.

**Delineating basic services.** To respond to authors' needs better, we have developed a fairly definitive list of all the potential projects our editorial service is willing and able to handle. Some umbrella tasks have been subdivided into smaller tasks; for example, providing assistance on a book proposal might require input on formulating the proposal and selecting a publisher as well as on editorial review of the sample chapter, outline, curriculum vitae, and cover letter. For the tasks that we exclude (such as editing of dissertations and book indexing), we refer authors to freelance editors and writers.

**Implementation plan.** Processing a recharge plan through management can facilitate its implementation. Users of our service were polled on whether they found it helpful and on whether they or their program would pay for it. Other institutions were also surveyed. As the change was instituted, there was grumbling but little opposition, partly because of the precedent set by other departments (for example, our professional library and audiovisual services).

**Off-line requirements.** At first, we relied on a preprinted paper request form that required the responsible author to detail the work (such as deadline and purpose). A time estimate was then forwarded with the manuscript to that author's administrator for a decision about whether to pay for the assistance. Dated signatures were required at all 3

stages. This procedure often slowed work on time-sensitive projects.

**The current process.** With the advent of an institutionwide e-mail system and management's emphasis on reducing paperwork, we rely increasingly on fairly informal written requests, estimates, and approvals. Authors who are denied institutional support must pay personally. Some administrators give blanket approval for a set number of hours for specific clinicians or programs, and the administrators are notified when the maximum is reached. They also are notified when work on a project requires more time than estimated or when an author adds to the job or otherwise greatly changes its focus. Any increase in the rate is announced only to administrators, who process it with program directors; individual clinicians are simply informed of the rate when given an estimate. If the rate goes up in the middle of a project (lengthy multipart projects, such as books, excluded), the finished work is billed at the old rate. The recharge system requires us to instruct the business office to transfer funds for approved and completed work. Supporting documentation is sent with each transfer request, and all involved personnel are copied.

**Ways to improve a recharge system.**

1. Survey other editorial services to direct your own program's development and gain support for how you structure it.
2. Process the recharge system through channels; don't bear the bad news alone.
3. Compile an exhaustive detailed list of work that you can and will do.
4. Specify exactly what work you will not or cannot do (for example, indirectly related projects, such as dissertation proposals or book indexing).
5. Itemize any assistance that is offered at no cost (for example, telephone or e-mail grammar questions or inquiries about your editorial services).
6. Negotiate blanket approvals for heavy individual or departmental users.
7. Keep paperwork to a minimum.

8. Have a plan in place for dealing with problem situations: a) work is approved but for less time or money than it turns out to cost; b) author adds to job after it is begun (for example, changes publishing outlet after manuscript has been reformatted); c) author insists that verbal approval has been given him or her.
9. Beware of the cost of your own learning period when drafted into helping with projects that are outside your expertise.
10. Keep up with your recharges; do them weekly, monthly, or quarterly.
11. Be prepared to deal with external requests for your service, especially from former staff members.
12. Adjust your fees periodically.
13. Develop referral lists of professional associations (such as Council of Biology Editors, Board of Editors in the Life Sciences, American Medical Writers Association, and Society for Technical Communication), external editorial consultants, and independent freelancers.

Benefits. Despite some fear that recharging would suppress writing, that has not been the case. One unexpected benefit is that it has served as a gatekeeper to screen out less rigorous research. Staff members now weigh whether their writing is worth the cost of editorial support, so they submit fewer “old” papers that have been rejected multiple times. Another benefit is continued existence of a centrally managed thus consistent editorial policy, quality standard, and style for published articles emanating from our institution.

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Conduct a needs assessment. The choices of what to offer in an editorial-service department are extensive, and conducting a needs assessment by interviewing the users can be indispensable. We discovered that what investigators really wanted was access to medical

writers to help with drafting a manuscript and, more often, to incorporate revisions on manuscripts after peer review. The needs assessment is a communication strategy that allows promoting development of the editorial-service department and building expectations for future services. We found that the clinical researchers whom we interviewed became our biggest allies when we went to seek funding.

Consider a credit system. One of the innovative funding systems we heard about was based on the concept of a credit system. Each department (or clinical investigator) is given a particular amount of editorial-services “credit” at the start of each year according to the baseline budgeted for editorial services within the overall clinical-research budget. Once this credit is used, each service is charged back to the requesting researcher or department. This system offsets the disadvantages of a free service (which can encourage trivial use or be taken for granted) while encouraging equal access to the service for all researchers and preventing individual researchers from using a disproportionate share. If researchers find themselves consistently charged for editorial services at the end of the year, this might be a sign to increase the overall budget. The disadvantage of the system is that every service must be tracked financially so that departments know when their credit is used up; this adds a layer of administrative duties to manage.

Explore alternative funding sources. Alternative sources of funding, such as pharmaceutical support or fund-raising activities, should be considered. People like contributing to specific projects, such as establishment of a new service. Because we are just starting up, for example, we will be highlighted as an innovation in a telethon fund-raising event. We hope this event will cover all our startup costs (purchase of office furniture, computers, reference sources, and so on).

Prepare a business plan. A business plan, especially if prepared with assistance of an

objective, outside person who has business expertise, can clarify what needs to be done, how, and by when and might engender new ideas that could improve efficiency, services, or promotional activities. A business plan offers a comprehensive document that can become a focus for administrative “buy-in”. It lends structure to changes and promotes an organized project-management approach. The alternative, a series of meetings and internal memos, might make it difficult to ascertain later what was agreed on. A business plan sets up clear expectations and timelines, so that evaluating changes becomes more feasible.

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As an independent consultant, I prefer to bill for services hourly. I determine the hourly rate according to my needs and the usual market rates for someone of my experience. I use the same hourly rate for all tasks rather than different rates for different tasks. Less demanding tasks take less time and cost less, and the converse is true, so clients need not be concerned about being overcharged for simpler tasks.

I charge for everything: initial interview, consultation, editing, and so on. I do not do graphics or production (other than rough drawings), but one might want to charge other than hourly for that aspect only—perhaps by the piece or production-work component. If someone asked me for graphics or production, I would subcontract these and bill the subcontractor’s fee as overhead. I do not charge overhead for US telephone calls, copying, or mileage (I generally work at home, so my only mileage is for attending interviews), because these charges are small (and are business tax deductions anyway).

This method of charging a single hourly rate avoids consideration of the many variables involved in editing a manuscript. If one were to charge a flat rate for the whole job, one would need to determine a rate for each component and put together a rate sheet from which the client could select compo-

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nents to be done. Even then, given the great variability in quality of drafts received for editing, it would be difficult to determine a fixed price. When I bid a flat rate (which some clients insist on), I get thorough detail on the job, calculate the number of hours I think it will take me, and then sometimes add 15% to 25% because of the unpredictability factor and the risk that the client is asking me to take in making a flat bid. I bid only on a draft and 1 revision for a writing assignment, or on 2 passes for an editing assignment; beyond that, I renegotiate or return to the hourly rate. I use a simple contract that contains all applicable qualifiers and restrictions for either an hourly or flat-rate job; often, clients incorporate this into their own contracts.

As for presenting fees to clients, I simply tell them my hourly rate and, if I feel they are hesitant or wary or they need this information (which they usually do), I give them an oral range of what the final cost might be, depending on what they want me to do, the quality of the draft or source materials, and the scope of the project. Estimating this range takes experience: One can track the number of hours it

takes to do various types of projects to produce a reasonable estimate. But I emphasize when speaking to clients that this range (for example, \$2000 to \$3000) is not guaranteed, that it is given to aid them in determining their budget, and that the final cost could be less or more, depending on the quality of the draft or source material or on the number of revisions (tip: This might be related to the number of authors), and similar factors.

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### **New Question: A Question of Consent**

You are asked to edit a manuscript written by several members of a trauma service and a surgery resident who works with them. You have worked with these authors on previous occasions and know that they write fairly well, so you expect few problems with the paper. However, as you read the methods section, you see that they make no reference to having obtained institutional review board (IRB) approval. When you ask them about it, they

say that they didn't think they really needed it—that they got approval for a previous study and their findings came from work that could easily have been viewed as an extension of the first protocol. Would you find it necessary to include a statement to this effect in the cover letter to the journal? Would this be your role, or would you expect the surgery resident to follow through on conferring with the residency director or an IRB representative and rely on the resident to do so?

The situations described as New Questions in this column are not necessarily based on actual situations, and the ones that are may have been modified to focus the question. Send your responses to the new question to Della Mundy, Kaiser Foundation Research Institute, Department of Medical Editing, 1800 Harrison Street, 16th Floor, Oakland CA 94612-3429; telephone 510-987-3573; fax 510-873-5131; e-mail [della.mundy@ncal.kaiperm.org](mailto:della.mundy@ncal.kaiperm.org).