Optometry Business Plan and Operations Starter Kit

A working kit for independent optometry practices. It builds the patient panel month by month from new patients and returns, prices an exam from the fee down to the cash each payer sends, sets frames, lenses and contacts on their own capture and cost, and scores the plan on six pass-or-fail tests.

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PAGE 2

Start here

In this example a cold-start optometry practice fills its schedule over years: the first returning patients arrive in month 13, most exams pay a plan amount well below the fee, and the optical shop carries most of the revenue. This kit writes those numbers down and tests them before a lender asks.

WHAT IS INSIDE

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19	The worked example's twelve-month cash forecast, filled in

HOW TO USE IT

1. Build exams on page 6 from the panel on page 7, and costs on pages 5 and 8. Run the cash forecast on page 11, then score the plan on page 4. Draft pages 3 and 4 last.
2. Use pencil. Fees, plan contracts, capture and the new-patient plan move before the first patient arrives, and every worksheet expects your own figures.
3. After opening, use the page 14 checklists at each day's close and review the numbers weekly. Post new patients and returns to page 7 at month end, and update page 10 when capture moves.

HOW THIS KIT WAS BUILT

- **AI tools helped create this kit.** Example figures are illustrative, not benchmarks.
- **The owner question** on page 3 is one of the optometry practice questions published at businessconsultant.services; the answer is general guidance, not a research finding.
- **The six questions** on page 14 were drafted by AI models from World Consulting Group desk research and challenged by a second AI model. None was measured in the field, so treat them as hypotheses to test, not findings.

SCOPE

This kit gives general operational information. It is not legal, tax, accounting, clinical, employment, billing and payer contract or financial advice. Clinical, billing, payer contract and patient privacy requirements vary by location; the kit states no rule. Review them with qualified professionals before you commit money.

PAGE 3

Business plan, part one

A lender or a landlord wants to know how one optometrist and two lanes cover rent, staff and loan payments through the years it takes to fill a schedule, with plans paying late. Answer here in short sentences; draft the full sections on separate sheets.

1. Executive summary (write it last)

In one paragraph: the practice, who it serves, how much money you need and what it pays for, from the build-out to the first payroll; then give the month the page 6 forecast first clears cash break-even from page 8, and the page 4 result.

2. Exams, optical and patients

Describe the exams you offer, routine and medical, the optical lines you will stock, and the fee for each exam. Say which vision and medical plans you intend to accept, and roughly how many patients will pay out of pocket.

3. Positioning and the office

Name the patients the practice is built for, families, older adults, contact lens wearers, and the cases you refer out. Count the exam lanes, the pretest room, the frames on display and the hours you see patients.

4. Exams, fees and what each payer allows

List each exam type with its posted fee, what each plan actually allows, what the patient still owes, and the lane minutes it takes. A fee borrowed from a competitor's sign, with no allowed amount beneath it, is a guess.

EXAM TYPE	POSTED FEE	PLAN ALLOWS	LANE MINUTES

> *Owner question: where will about 980 new patients come from in year 1, and will they come back?*
>
> All year-1 exams in this example are new patients, because nobody seen this year is due back before month 13. Name each source, from referrals and plan directories to schools and local employers, with the new patients you expect from it each month, then track on page 7 which of them book their next exam.

PAGE 4

Business plan, part two

5. Operations

Describe a day from the first exam to the last: who confirms tomorrow's patients, who runs pretest, how a patient moves from the lane to the optical shop, and who follows up an order that is late from the lab.

6. Team

List each role, the hours a week and the pay, with a market wage for your own hours as the optometrist. Name the person whose absence would stop exams or optical sales.

7. Marketing and sales

Explain where new patients come from and what each one costs. Check each month that new patients and returns add up to the exams on page 7.

8. Financials and funding

Attach pages 5, 6, 8 and 11 and the result below, with the money needed, its sources and its runway.

DOES THE PLAN PASS? SCORE IT BEFORE ANYONE ELSE READS IT

TEST	PASS?
Gate 0. The lease, quotes for the build-out, lanes and equipment, the lab and frame accounts, each plan and payer agreement and the requirements of every registration the practice needs are in writing, reviewed by a qualified professional where needed.	
1. In the expected case, sales reach cash break-even at the month-12 run rate (page 8) and closing cash, payer timing included, holds your floor for 24 months (page 11).	
2. Slow start (tested share of sales, page 11): closing cash holds at or above your floor every month (if not, note the reserve that would hold it).	
3. Planning debt service coverage at full-run sales and at the month-12 run rate (page 8) meets your lender's ratio, on your lender's definition.	
4. The settled peak month's exams fit the optometrist's hours, the lanes and pretest (pages 6 and 7), and the planned panel reaches break-even (page 8).	
5. A list of referral sources, plan directories live and first exams booked back the opening months; a website forecasts visits, not patients.	
6. The full-run steady-state year (seasons in; not the forecast year) leaves net cash above zero after principal, before income tax set-aside, replacements and stock build-up; set aside its largest fall in running net cash, the year run twice.	

Not ready: Gate 0 fails. **Green:** Gate 0 and all six tests pass. **Amber:** Tests 1 and 3 pass, but Test 2, 4, 5 or 6 fails, so fix the plan before you sign a lease, a lab or frame account, or an equipment loan. **Red:** Test 1 or 3 fails, so change the plan before you commit money. Tests 1 and 3 score the plan as written; Test 2 is the slow start, and the page 13 what-ifs stress-test Tests 1, 3 and 6. Count a test without evidence as a fail. Result: _____

PAGE 5

Startup budget worksheet

Fill the estimate column first, then record each source: a written quote from the landlord, the contractor, the equipment seller or the frame supplier, or a documented calculation. In this example working capital, not equipment, decides whether the practice carries its climb, so leave no line blank without a reason. Against published figures: this example's reserve sits well above the $50,000 to $120,000 or more one vendor guide gives for three to six months, because it carries the owner's wage and the loan through a year of filling the panel; its loan sits above the $575,000 one trade publication reports as the average cold-start loan; no published startup total is cited, so none is compared.

LINE ITEM	INITIAL ESTIMATE	QUOTE OR SOURCE	APPROVED BUDGET	ACTUAL OR COMMITTED
BUILD-OUT AND LANES				
Build-out of about 1,600 square feet				
Two exam lanes, pretest and imaging equipment				
OPTICAL SHOP AND FURNISHINGS				
Opening optical inventory: frames and contact lens stock				
Frame boards, furniture, computers and practice software				
PRE-OPENING				
Setup, plan enrollment, hiring and training, launch marketing, deposits				
WORKING CAPITAL				
Working capital reserve (cash you open with)				
Contingency for overruns on the lines above				
Total				

Size the reserve in two passes: run the page 11 expected case with opening cash of zero (no reserve, no other cash), set the reserve to your floor, plus one more month of fixed costs and principal as a buffer, plus how far its lowest closing cash falls below zero (zero if it never does), rounded up to the next $100, then rerun. If the Test 6 cushion (page 4) is larger than that buffer, add the difference. If the build-out runs over, the contingency pays first and the reserve second; then rerun page 11.

PAGE 6

Sales forecast builder

Every other number depends on exams, so build them from new patients and the returns they bring, not from the rent you need to cover. Count exams first, month by month from page 7; the optical lines follow the exams.

```
Monthly sales for a line = units times average collections per exam times days open in the month (or
times 1 for units counted per month)
Days open in a month = days open per week times 52, divided by 12
```

SALES LINE	UNIT	UNITS PER DAY OR MONTH	AVERAGE COLLECTIONS PER EXAM	DAYS OPEN PER MONTH (OR 1 FOR MONTHLY UNITS)	MONTHLY SALES
Exams	exams				
Recovered denials	exams				
Frames	exams				
Lenses	exams				
Contacts	exams				

Full-run month

RAMP AND SEASONS

MONTH	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12
Ramp, % of full run												
Season, % of full-run month (M1 = opening month)												
Expected sales												

Expected sales for each month = exams on page 7 times the clean collectible per exam (page 9), plus recovered denials after each payer's recovery lag (two months in the example), plus exams times each optical line's capture times its sale (page 10). Use 100 percent where a factor does not apply, and leave the Ramp and Season rows at 100: the page 7 panel carries the climb and the season. The new-patient plan is your assumption; write down the evidence, such as referral sources and first exams booked.

CAPACITY CHECK

```
Optometrist minutes a month = days x hours x 60; lane minutes = lanes x open hours x 60 x days; pretest
minutes = technician hours x 60; minutes used = exams in the settled peak month x minutes per exam on
each
```

Take the settled peak month from page 7 and set its exams against the optometrist's hours, the lanes and the pretest technician. If the plan needs more exam minutes than the optometrist works, the plan is wrong, however short one lane's wait looks.

PAGE 7

The patient panel: new patients, returns and exams

A new practice opens with no patients due back. Every exam this year is a new patient or a return from an earlier one, and the first returns cannot come before month 13, so the schedule fills over years, not months. Write your own new-patient plan and return shares here.

Exams in a month = new patients (my plan x the month season) + patients due back that month; each exam returns one third after 12 months and two thirds after 24, less monthly attrition over the wait. Year 2 holds new patients at month 12's planned level before season, applies each month's season, and counts the returns already due. Active patients = everyone seen in the last 24 months who is not yet back, less attrition.

	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12
New patients	52.8	51.6	65.0	67.2	72.0	80.0	88.4	100.8	91.2	104.0	100.0	110.0
Returning	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Exams	52.8	51.6	65.0	67.2	72.0	80.0	88.4	100.8	91.2	104.0	100.0	110.0
Active patients	53	103	167	231	298	373	454	547	628	720	807	902
Year 2 exams	110.1	99.8	117.3	113.9	115.2	121.3	127.6	138.9	120.3	131.7	126.7	139.3

The example applies no separate season list; the new-patient season on this page carries it. Season index by month 96, 86, 100, 96, 96, 100, 104, 112, 96, 104, 100, 110 (August and December busy, February slow; size illustrative). Return shares are illustrative: many adults come back every two years, children and older adults every year. Capacity inputs: 20 doctor days a month, 8 exam hours a day; 25 doctor minutes, 35 lane minutes and 15 pretest minutes an exam; 2 lanes open 9 hours a day; one pretest technician, 173 hours a month. Annual attrition 20 percent (1.842 percent a month). Full run 200.0 exams a month needs 61.3 new patients a month at steady state; settled-year peak 224.0 exams.

CAPACITY AT THE SETTLED PEAK MONTH	SHARE USED
Optometrist	58%
Lanes	36%
Pretest	32%

MY MONTH	NEW PATIENTS	DUE BACK	EXAMS	LANE HOURS

PAGE 8

Break-even and coverage

Use this one numbered cost list everywhere in the kit. Loan interest is a fixed cost here. Loan principal is not an operating cost: it enters cash break-even below and the cash forecast on page 11, so interest and principal are each counted once. A line that starts or steps up during year 1 goes in at its amount once in place, and one that steps down after year 1 at its later amount; page 11 uses each month's amount.

FIXED COSTS PER MONTH	PER MONTH
1. Rent, about 1,600 square feet	
2. Insurance package: liability, professional, property, workers' compensation and cyber	
3. Optician, technician, front desk and billing, with payroll costs (the minimum staff)	
4. Owner-optometrist's market wage	
5. Loan interest (startup loan)	
6. Practice software for records, scheduling and optical orders	
7. Marketing	
8. Utilities	
9. Equipment service	
10. Lab supplies, frame-board repairs, cleaning, accounting and claims clearing	
11. Professional dues and continuing education (inside line 10 in this example)	
12. Bank fees (inside line 10 in this example)	
Total fixed costs	

VARIABLE COSTS AS A SHARE OF NET SALES	SHARE
13. Optical cost of goods, blended across frames, lenses and contacts	
14. Hourly help above the minimum staff that moves with exams (none in this example)	
15. Card processing, an effective 1.95 percent of sales (2.9 percent on patient card payments)	
16. Unplanned costs (none held in this example)	
Total variable cost share	

```
Contribution margin ratio = 1 minus variable cost share; contribution = sales times the line's ratio
Operating break-even sales = fixed costs divided by contribution margin ratio
Cash break-even sales = (fixed costs with line 4 even if undrawn, plus principal and other recurring
cash out) divided by contribution margin ratio; page 13 covers a result with no usable number
Break-even exams = (fixed costs with line 4 even if undrawn, plus principal and other recurring cash
out) divided by one exam's contribution with its optical and recovered denials; 0 if covered
Month-12 run rate = average monthly sales over year 2, with new patients held at month 12's pre-season
level and the returns already due counted (page 7, Year 2 exams, seasons included)
Planning debt service coverage (before income tax and replacements) = (full-run sales times contribution
margin ratio, minus fixed costs other than line 5) divided by (line 5 + principal)
```

RESULT	PER MONTH	PER WEEK	PER DAY OPEN
Operating break-even sales			
Cash break-even sales			
Break-even exams a month (use cash break-even)	one figure per month		
Rent share and debt service coverage at full-run sales		ratios, monthly only	

Weekly = monthly times 12, divided by 52; per day open = weekly divided by days open per week. Rent share = line 1 divided by net sales.

PAGE 9

What an exam actually collects, payer by payer

The exam fee is not the price for most patients: a routine vision plan allows a small set amount, a medical plan splits its allowed amount with the patient and denies part of it first, and both pay over the following months. Enter how each of yours pays.

Exam fee (charge) minus the plan's contractual write-down = allowed amount; the plan's part minus first-pass denials = payer collectible; the patient's part minus write-off = patient collectible; the two together = clean collectible; denials recovered later count only when the money arrives, never in receivables

EXAMS: ONE COMPREHENSIVE EXAM (ILLUSTRATIVE)

PAYER	SHARE	ALLOWED (ILLUSTRATIVE)	CHARGE	CONTRACTUAL	PAYER SHARE	DENIED	WRITE-OFF	CLEAN COLLECTIBLE	RECOVERED LATER	% BY MONTH: PAYER; PATIENT
Managed or contracted plans	55%	$70.00	$210.00	$140.00	85.7143%	$1.20	$0.20	$68.60	$0.60	30/65/5; 100
Commercial insurance	15%	$140.00	$210.00	$70.00	70%	$7.84	$3.36	$128.80	$3.92	10/60/25/5; 40/35/20/5
A government program	10%	$132.00	$210.00	$78.00	80%	$5.28	$2.64	$124.08	$3.17	5/80/15; 30/40/20/10
Private pay	20%	$160.00	$210.00	$50.00	0%	$0.00	$1.60	$158.40	$0.00	-; 100

Clean collectible per exam: $101.14; weighted, the line collects 51.1% in month 0, 39.7% in month 1, 8.0% in month 2, 1.2% in month 3 (month 0 is the month of service; any wait to bill sits inside each split); recoveries of $1.23 per exam count when collected.

($000)	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12
Billed, exams and optical, recoveries apart	21.0	20.5	25.9	26.8	28.7	31.9	35.2	40.1	36.3	41.4	39.8	43.8
Collected, recoveries apart	13.1	19.6	23.8	26.1	27.9	30.5	33.8	38.1	37.5	39.7	40.2	42.4
Receivables, month end	7.9	8.8	10.9	11.5	12.3	13.6	15.0	17.1	15.9	17.6	17.3	18.7

Owed to the practice at the end of month 12: about $18,700 of clean collectible billed on exams and optical orders and not yet paid. Denials recovered later never sit in this figure.

What the waiting costs: if every plan, insurer, patient and optical balance paid in the month of the exam, the expected case would bottom out at minus $52,671, not minus $76,376 (month 24), about $23,700 better. A modeled comparison only; your own payers set the real timing.

One row per payer for a single exam at this practice's fee and allowed amounts; the weighted split blends each payer's and each patient's own split by its share of clean collectible. All rates are illustrative. Put in your own, and check each payer's terms with a qualified healthcare billing professional.

PAGE 10

The optical lines: frames, lenses and contacts

The exam brings the patient in; in this example frames, lenses and contacts carry most of the revenue. Each line has its own capture on exams, its own sale and cost of goods, and its own collection timing, so set each one separately.

```
Line sales a month = exams x capture x average net sale; contribution per exam = capture x sale x (1 - cost-of-goods share)
```

LINE	CAPTURE ON EXAMS	NET SALE	COST OF GOODS	PER EXAM	% BY MONTH	MONTH 1
Frames	45%	$200.00	38%	$90.00	60/35/5	$4,752
Lenses	50%	$270.00	33%	$135.00	60/35/5	$7,128
Contacts	20%	$360.00	58%	$72.00	85/15	$3,802

This example pays optical cost of goods in the month of sale; your supplier terms may differ. Capture, average sale and cost shares are illustrative, set inside trade press ranges (page 15): capture 35 to 65 percent for frames, 38 to 70 for lenses and 12 to 30 for contacts; average sale $130 to $280, $180 to $360 and $150 to $700; cost of goods 30 to 50, 25 to 45 and 50 to 80 percent. Enter your own.

MY LINE	CAPTURE	NET SALE	COST SHARE	% BY MONTH

PAGE 11

Twelve-month cash forecast

Rent, payroll and the loan go out on fixed dates; plans pay one to three months after the exam. Enter $000 (51.25 means $51,250).

EXPECTED CASE ($000)	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12
Opening cash												
In: payer, patient and optical payments, when each lands												
Memo, not cash: clean collectible billed this month (page 9)												
In: owner money and loans received												
Out: optical goods, card fees, unplanned (lines 13, 15, 16)												
Out: payroll, line 4 if drawn in cash (lines 3, 4, 14)												
Out: rent (line 1)												
Out: other costs, with loan interest (lines 2, 5 to 12)												
Out: income tax set-aside, equipment replacement, stock build-up												
Out: loan principal												
Out: startup bills still to pay												
Net cash flow (in minus out)												
Closing cash, expected (your floor: _____)												
Actual closing cash, once open												
Memo: sales tax collected (not in closing cash)												
Memo: sales tax remitted												
Memo: tax owed = last month's + collected minus remitted												
Memo: owed to you = last month's + billed minus paid												
SLOW-START CASE												
Sales receipts, slow start												
Out: variable costs, slow start (lines 13 to 16)												
Out: fixed, principal, bills, less funding												
Net cash flow, slow start												
Closing cash, slow start												

Month 1 opening cash is cash on opening day after startup spending is paid; each closing balance opens the next month, and the slow start opens with the same cash. Your floor is at least one full-run month of fixed costs plus principal. Staff, the lab and frame suppliers are paid in the month of the work or the sale. For the slow start, test 70 percent of expected sales in every month (a stress assumption, not a benchmark; a higher share only with evidence); fixed costs, other cash out, principal, startup bills and funding stay as expected, and all variable lines fall with sales; line 14 holds only hours you would cut. The first month either case falls below your floor is your planning deadline: act before it. Then run a second year at the month-12 run rate (page 8), month by month with the seasons continuing, and check the floor holds.

PAGE 12

Runway, and what the years of filling the panel cost

Runway: months from the last closed month (before opening, from opening day) until a month ends under your floor

Worked example: an imagined one-optometrist cold-start practice

Invented figures, not eye-care benchmarks. Cash floor $46,769. Private pay and some patient balances are paid at the visit; the rest follow the page 9 splits.

Page 5, budget	Total startup budget $847,800, funded by a $636,300 loan (10 percent over 10 years) and $211,500 of owner money, including a $415,800 working capital reserve unspent at opening. Two-pass reserve: floor $46,769, plus a second month of the same, $46,769, plus $322,234 (the first pass's low below zero, opening with no cash), rounded up to $415,800. Before the reserve: build-out and lanes $280,000; optical shop and furnishings $85,000; pre-opening $35,000; contingency $32,000.
Page 8, costs	Fixed costs $43,516 a month, including $3,733 of rent and $5,156 of loan interest; principal $3,253 a month (both year 1 averages); variable share 32.1 percent, giving a contribution margin ratio of 0.679. Lines 13 to 16 take 30.175, 0, 1.95 and 0 percent of sales (line 13 blended). Lines 1 to 12 run $3,733, $360, $16,395, $11,381, $5,156, $500, $4,000, $500, $400, $1,800, $0 and $0 a month (year-1 averages: line 3 $14,700 to month 6, line 7 $4,000 in year 1; the $43,516 total and year 2 use $18,089 and $1,597).
Page 8, break-even	Operating break-even lands near $64,112 a month. Cash break-even (fixed $43,516 plus principal $3,253, divided by 0.67875) is about $68,905 a month: 172.5 exams a month, the optical lines and recovered denials counted (each line's own cost share, page 10, gives contribution ratios of 0.981 on exams and recovered denials, 0.601 on frames, 0.651 on lenses and 0.401 on contacts), so 173, against the settled-year average of 200 (224 at the August peak).
Page 6, sales	Exams: 224 exams a month at $101.14 (August peak, page 7). Recovered denials: 224 exams a month at $1.23 (paid two months later). Frames: 224 exams a month at $90 (capture x sale, page 10). Lenses: 224 exams a month at $135 (capture x sale, page 10). Contacts: 224 exams a month at $72 (capture x sale, page 10). Full-run month about $79,874, lines at the August peak of 224 (about $89,459); full run uses the settled average of 200; the page 7 panel carries the season.
Page 19, expected case	January sales $21,022; month 1 closes at $376,331, month 12 at $93,566. Low: month 12, closing $93,566, $46,797 over the floor.
Page 19, slow start	At 70 percent, January brings $14,715; month 1 closes at $374,437, month 12 at $19,317. The account drops under its floor in month 12 (closing $19,317), a runway from opening of 11 months.
Page 8, coverage	With 200 exams a month, sales of $79,874, coverage on the plan formula (pre-tax, no replacements) is 1.89 against the 1.25 the imagined lender asks; held at month 12's rate it reads below zero, while Test 3 needs the two together. Rent share is about 4.7 percent.

PAGE 4 RESULT FOR THIS EXAMPLE: RED

Gate 0 is treated as met here. Test 1 fails: held at the month-12 run rate, the practice sells about $48,655 a month, short of the cash break-even of $68,908 at the year-2 sales mix. Test 2 fails: at 70 percent of plan for 12 months, cash drops under the floor in month 12; about $27,500 more opening cash would carry it. Test 3 fails: at month 12's rate coverage reads below zero against the needed 1.25, though a full schedule gives 1.89. Test 4 passes (settled year): the August peak of about 224 exams uses 58, 36 and 32 percent of doctor, lane and pretest time (page 7). With no first exams booked before opening, Test 5 fails. Test 6 passes: a settled year of 200 exams a month leaves about $89,346 after principal, with an $87 dip in month 2 that the page 5 buffer covers. This steady-state year lies years ahead; page 19's first year loses about $322,234 in cash while the panel fills. The example sets aside nothing for tax, lane equipment or frame stock (page 19). A cold start can need three to four years to fill its schedule in this example's climb; month 1 sees 52.8 exams, beside the 54 one trade publication reports for an average cold start (sourced). The month-12 run rate meets cash break-even only with about 41 more new patients every month from month 1 on (1,475 in year 1, against the 983 that page 7's new-patient row adds up to; solved in code), which lifts it to $69,394 against $68,908; Test 1's floor half is tested separately. Cash goes below the floor in month 15 and below zero in month 18 (lowest minus $76,376, month 24). Red scores the plan as written: the reserve does not carry year 2; about $123,200 more opening cash would hold the floor to month 24 at month 12's intake, but would not pass Test 1.

PAGE 13

What moves the result

Each row moves one input of the page 12 practice and reruns the forecast; Test 1, 3 or 6 is named when the row newly fails or passes it, and the slow start (Test 2) closes each row it moves.

WHAT MOVES THE RESULT (FULL-RUN MONTHLY CHANGES; FLOOR DEADLINES RERUN OVER THE 12-MONTH PLAN; SLOW-START LOSSES SCALE WITH SALES)

CHANGE	MONTHLY CASH	CASH BREAK-EVEN AND DEADLINE
Exams 10 percent lower, optical with them (variable costs fall with sales)	minus $5,421	Expected case holds the floor; slow start below the floor in month 11 (closing $33,288)
Exams: average collections per exam 5 percent higher, same volume (only sales-linked fees rise)	plus $992	Break-even exams fall from 172.5 to 169.4 a month, so from 173 to 170: per-unit costs stay the same, so the ratio rises from 0.679 to 0.683 on the new sales
Fixed costs $500 a month lower	plus $500	Cash break-even falls to about $68,168
New patients 20 percent fewer every month (lasting)	minus $10,843	Expected case below the floor in month 12 (closing $44,067); slow start below the floor in month 11 (closing $17,950); would fail Test 6
Annual attrition 25 percent, not 20 (same new patients)	minus $9,875	Expected case keeps above the floor; slow-start month unchanged (month 12); would fail Test 6
Frame and lens capture 10 points lower	minus $5,915	Expected case keeps above the floor; slow start below the floor in month 11 (closing $32,041)
Routine-plan exams 65 percent, private pay 10 (medical plans unchanged)	minus $1,749	Expected case keeps above the floor; slow start below the floor in month 11 (closing $42,964)
Contacts cost of goods 70 percent, not 58	minus $1,728	Expected case keeps above the floor; slow start below the floor in month 11 (closing $43,347)
Owner wage at the 75th percentile ($165,120 a year)	minus $2,379	Expected case keeps above the floor; slow start below the floor in month 11 (closing $22,458)
Build-out overrun of $3,000 beyond the contingency, taken from the reserve	no change	Expected case keeps above the floor; slow start below the floor in month 11 (closing $45,627)
Opening 3 months late (the office rent, insurance, loan interest and principal, $12,502 a month, paid while closed; no sales; the ramp starts at the new opening, and seasons stay on the calendar)	no change	Expected case holds the floor; its low falls to $55,423 in month 15 from the planned opening, $38,143 lower than on time; slow start below the floor in month 13 from the planned opening (month 12 on time)

WHEN A PAGE 8 FORMULA GIVES NO USABLE NUMBER

```
Contribution margin ratio zero or below: break-even is N/A; score Tests 1 and 6 as failed
One unit's contribution, or the count it is multiplied by, zero or below: break-even units are N/A;
score Test 4 as failed
Other lines already cover fixed costs and principal: break-even units are 0, never a negative number
No loan: coverage is N/A; score Test 3 as passed
```

PAGE 14

Day-close and month-end checklists, weekly review, six questions

Operations checklists for running the practice, not a compliance program. Add each clinical, records, billing and privacy step your location and your own advisers call for.

AT THE CLOSE OF EACH EXAM DAY

- ☐ Confirm tomorrow's patients and offer open exam times to the waiting list.
- ☐ Mark each booked exam as seen, no-show or rescheduled.
- ☐ Book the next exam, at the interval the optometrist sets, before the patient leaves.
- ☐ Take the patient's known share at the visit and the optical deposit at the order.
- ☐ Send the day's claims and plan orders before closing.
- ☐ Record each new patient with the source that sent them.

MONTH END AND THE PATIENT PANEL

- ☐ Post new patients, returns and exams to the page 7 table.
- ☐ Count patients due back this month who did not book, and call them.
- ☐ Set frame, lens and contact orders against exams to get each capture rate.
- ☐ List claims and optical balances unpaid past 30 days and assign each an owner.
- ☐ Count denied claims, the reason given, and those reworked and paid.
- ☐ Check lab orders open past their promised date.

WEEKLY NUMBERS REVIEW

MEASURE	TARGET	THIS WEEK	LAST WEEK	VARIANCE TO TARGET
Exams seen against exam times held				
New patients by source				
Frame, lens and contact capture on exams				
Claims sent, paid and denied, by payer				
Optical orders open at the lab				
Cash on hand against the floor				

SIX QUESTIONS TO INVESTIGATE

1. **Founder dependency.** Do exams, optical questions and plan problems all wait for the optometrist, between patients?
2. **Reactive operations.** Over a week, how many patients waited past their exam time, and how many orders came back from the lab late or wrong?
3. **Growth without structure.** How many patients due back this month booked their exam, and how many new patients came from each source?
4. **Talent and retention.** Which person's departure would most cut optical sales, and who else can fit and dispense?
5. **Revenue plateau.** Has collected cash per exam moved in a year, and how much came from plan mix rather than fees or capture?
6. **Systems gap.** Can you name, today, every claim unpaid past 45 days and every lab order past its promised date?

Hypotheses from AI-assisted World Consulting Group desk research, described on page 2. Check each one against a record: the scheduling system's exam report, the page 7 panel table, the claims report by payer, or the optical order log.

PAGE 15

Your first 30 days

WHEN	DO THIS
Week 1	Start the weekly numbers review and log exam times held, booked and seen every day.
Week 2	Fill the page 9 payer table with your own fees, allowed amounts and payment timing, and mark the payer that pays slowest.
Week 3	Fill the page 7 panel table with every new patient and work out frame, lens and contact capture on page 10.
Week 4	Enter actual closing cash on page 11 and recalculate runway. List claims and optical balances unpaid past 30 days.
After month 1	Compare new patients by source with the plan on page 7 and the cost of each source.

BEFORE YOU SIGN A LEASE, GET WRITTEN ANSWERS TO THESE

- ☐ Will you have to sign a personal guarantee, how much does it cover, and when does it end?
- ☐ Which charges sit on top of base rent, such as common area, property tax and insurance, and how are they settled each year?
- ☐ What does the space need before you can open, and who pays to add or upgrade it?
- ☐ Does the landlord contribute to the build-out, when is that money paid, and must any of it be repaid if you leave early?
- ☐ When does rent start, at signing, at build-out or at opening?
- ☐ Are there limits on operating hours, signage, parking, deliveries or the uses allowed in the space?
- ☐ What happens to the lease and the fixtures if you sell the business?

Have a qualified professional review the lease before you sign. These questions prepare you for that conversation; they do not replace it.

WHAT THE FULL KIT ADDS

The full Optometry Business Plan and Operations Kit adds an editable business plan, a three-year financial model with profit and loss, cash flow and a debt schedule, a payer calculator from fee to collected cash, a patient panel and recall tracker, an optical capture and inventory sheet, and day-close and hiring checklists. Release status is on the kit page.

SOURCES

Public sources. Review of Optometric Business, Get the facts: objective stats about optometry cold starts, 2026-01-22, reviewob.com (54 exams in month 1; average cold-start loan $575,000). Ocuco, Starting an optometry practice, 2026-07-28, ocuco.com (working capital $50,000 to $120,000+ for three to six months). Eyecare Business, GPN exam data, 2025-2026, eyecarebusiness.com (exam season). Optical capture, sale and cost ranges: Essilor Management and Business Academy key metrics (2015), Anagram (2021), 20/20 Jobson MarketPulse (2025), Eyes On Eyecare (2026). Wages: BLS OEWS May 2025 via onetonline.org. All accessed 2026-10-31.
World Consulting Group material. Origin of the questions: AI-assisted World Consulting Group desk research on independent optometry practices, 2026, an internal working file that is not published, described on page 2; the questions are hypotheses and no figure in this kit comes from it. Optometry practices owner questions, businessconsultant.services, 2026.

SCOPE AND DISCLAIMER

General information only. Not legal, tax, accounting, clinical, employment, billing and payer contract or financial advice. Provided as is, without warranty. © 2026 World Consulting Group. Free diagnostic tool at businessconsultant.services. The site's privacy page explains what the diagnostic tool sends to an AI provider for analysis and the third-party analytics on the site.

About the author. Kamyar Shah is the founder of World Consulting Group and works as a fractional COO and CMO. He has more than 25 years of experience and more than 650 engagements across more than a dozen industries. Contact and the latest version: businessconsultant.services.

PAGE 16

Customize this kit with AI

Attach this PDF to an AI assistant and paste the prompt below (copy-ready on the kit page). Use business figures only: never paste patient records, billing or claim exports, screenshots, dates of service, names, member or account numbers, free-text notes, small groups that could identify a person, or login details. From a report with patient-level detail, enter only the totals you need.

BEFORE YOU RELY ON THE ANSWER

Check every total with a calculator. An AI assistant can misread a file or slip on arithmetic, even when it runs code, so rerun every figure you will act on with the page formulas. Check your AI provider's data settings first, and never paste personal data, account numbers, passwords, customer-level records or anything an agreement restricts, such as patient records or claims. Totals and rounded figures serve the arithmetic, though rounding does not make a record anonymous, and you can run the arithmetic on your own computer.

I run, or am opening, a small independent optometry practice. Attached is the Optometry Business Plan and Operations Starter Kit from businessconsultant.services; help me make it my own plan with my numbers only.

Follow these rules for the whole conversation:
1. Use only numbers I give you, or numbers you calculate from mine with the formulas below. Never invent a fee, allowed amount, rate, wage, percentage or benchmark.
2. The numbers printed in the kit are worked examples. Never use them as my numbers, not even as a placeholder.
3. If a number you need is missing, ask me for it. If I ask you to estimate or use typical figures, write [NEED: ...] instead and tell me which quote, record or calculation will give me the real number. If I give you my own estimate, label it MY ESTIMATE.
4. Use these formulas exactly, and show your arithmetic for every number you calculate:
- Monthly sales = exams (page 7) x clean collectible per exam (page 9) + recovered denials after each payer's lag + each optical line's exams x capture x net sale (page 10). Year 2 holds new patients at month 12's pre-season level, plus returns due (page 7).
- Net sales exclude sales tax. Labor = wages, payroll taxes and benefits, plus a market wage for the owner-optometrist's exam and management time (line 4), never also in line 3 or 14. Shift hours count as cash even if I skip my own pay, so the plan still holds when I step back from the work; only line 4 may go undrawn, and Tests 1 and 6 count it anyway.
- Contribution margin ratio = 1 minus variable cost share; a line's contribution = its sales times its own ratio. Operating break-even sales = fixed costs divided by contribution margin ratio. Cash break-even sales = (fixed costs with line 4 even if I do not draw it, plus monthly loan principal and any recurring other cash out) divided by contribution margin ratio; only the cash forecast drops an undrawn wage. A blended ratio holds only at its own sales mix: name that mix beside each break-even, and recompute from each line's own contribution when a what-if changes one line. Loan interest is fixed; principal is not an operating cost, so it never enters operating break-even or operating profit.
- Weekly = monthly times 12, divided by 52. Daily = weekly divided by days open per week.
- Break-even exams = (fixed costs with line 4 even if undrawn, plus principal and other recurring cash out) divided by one exam's contribution with its optical and recovered denials; 0 if covered. If the other lines already cover fixed costs and principal, report 0 and say so; never report a negative break-even count. Optometrist minutes a month = days x hours x 60; lane minutes = lanes x open hours x 60 x days; pretest minutes = technician hours x 60; minutes used = exams in the settled peak month x minutes per exam on each.
- Rent share = line 1 divided by net sales. Planning debt service coverage, before income tax and equipment replacement = (full-run sales times contribution margin ratio, minus fixed costs other than loan interest) divided by (loan interest + loan principal).
- Month-12 run rate = average monthly sales over year 2 (new patients held at month 12's pre-season level, returns already due counted; page 7, seasons included), not month 12's own sales. Test 1 needs that rate at or above cash break-even and my floor held 24 months; Test 3, coverage at full run and at that rate.
- Test 6 = 12 months of (full-run sales minus their variable costs, minus full-run fixed costs, line 4 included, minus principal), seasons applied to every sales line but booked lines, which run in their own months, and seasonal fixed lines at each month's amount. The cushion to set aside = the largest fall in running net cash from a high to any later low, the year run twice so a dip can cross into month 1 (zero if it never falls).
- Full-run figures (break-even, coverage, floor) take booked lines at full bookings averaged over 12 months, a late-starting fixed line at its full amount, a fixed line that steps down after year 1 at its later amount, and a seasonal fixed line at its year average.
- For pages 7, 9 and 10, use the formulas printed on those pages of the attached kit, exactly as written, with my own figures.
- Cash forecast: closing cash = opening cash + cash in minus cash out. Month 1 opening cash = cash on hand on opening day after startup spending is paid. Place every receipt and payment (deposits, supplier invoices, startup bills, funding) in the month the cash moves. Income tax set-aside, equipment replacement and stock build-up go in their own row. Open month 1 with the cash I give; report the page 5 two-pass size beside it, never as a substitute. Place each receipt in the month my payment terms say, or mark [NEED: payment timing]. Collect each payer on its own split (page 9) and each optical line on its own split (page 10). In the slow-start case, every month's sales on every line are the tested share of expected sales; fixed costs, other cash out, principal, bills and funding stay as planned; all variable lines fall with sales, each figured from the slow-start sales of the same month, on the same payment timing as the expected case (fair because line 14 holds only hours I would cut). Runway = the number of consecutive future months, counted from the latest closed month (before opening, from opening day), before the first month in which closing cash falls below my cash floor.
(Continued on page 17.)

PAGE 17

The prompt, continued

Paste this part directly after the rules on page 16, as one message.

5. Do not give legal, tax, clinical, billing, payer contract and patient privacy requirements, employment, wage or lease advice. Do not name laws, programs, agencies, government fees or wage rates, even as examples. When my question touches these, write only "Review this with a qualified professional" and continue with the rest. You may record and use figures I give from my own records, such as my sales tax rate and when I remit it, without checking, interpreting or advising on them.
6. Do not quote statistics, studies or sources that are not in the kit. For the market and marketing sections, use only what I tell you, and list the local facts I should gather.
7. Work every total step by step and recheck it a second way. In the cash forecast, show the arithmetic for month 1, one later month and the year total; give plain numbers for the other months.
8. If a formula would divide by zero or a contribution margin is zero or below, write N/A, say why, and do not continue that calculation. If my lender defines coverage differently, show both results and label each. If cash never falls below my floor in the forecast, write the runway as more than 24 months; otherwise give the runway in months and, separately, the first month below it, counting year 2. With no loan, Test 3 passes.
9. Use business figures only. Never include or paste patient records, billing or claim exports, screenshots, dates of service, names, member or account numbers, free-text notes or small groups that could identify a person. If a report you received holds patient-level detail, do not paste it; enter only the totals you need. Never paste login details.
10. Mark every output: Draft for my own planning. Not for a lender or investor until a qualified accountant has reviewed it.
11. If your full answer would be very long, deliver outputs 1 to 4 first, then stop and ask me to type "continue" for the rest.
12. Build the cash forecast month by month from the sales build, the cost lines, my payment terms and my opening cash; it needs only the page 7, 9 and 10 results I gave, not the tables. Each month: cash in = sales receipts plus money arriving; cash out = each variable cost, calculated from the sales that created it and placed in the month it is paid under my terms, plus fixed costs (lines 1 to 12, with line 4 only if I draw it in cash), plus loan principal, startup bills and other cash out. Loan interest is already in line 5; never add it again. Supplier payments follow the cost of what I sold plus any stock build-up I give; if I buy ahead or carry supplier balances, ask me for purchases and payments by month instead. If you can run code, do every calculation in code.

Step 1. Before you write anything else, ask me for the inputs below in three rounds, one message per round. Ask round A as one numbered list, then wait for my answers. When I answer, ask round B and wait; then round C and wait. Start Step 2 only after I answer round C.
Round A, sales, capacity and evidence:
a. Exams and fees, the payers I accept, the office, lanes and exam hours, new patients and where they come from, how patients return, the optical lines, the staff with hours and pay, and days open per week.
b. Sales build: the page 7 panel inputs in the next item, the page 10 optical inputs in round B, and the slow-start percentage I want to test (this kit sets a 70 percent stress test, a kit rule rather than my estimate; use it unless I give evidence for a higher share). Never daily; the page 7 panel sets the exam line's count. Give counts at full run, with month 1 as my opening month. Give the evidence behind each count (site counts, comparables, signed orders or my history), and the sales lines (exams, recovered denials, frames, lenses, contacts) follow the page 7 panel built from item c, so give no other monthly counts for them.
c. New patients each month 1 to 12 and the season index; shares due back after 12 and after 24 months; annual attrition; full-run exams a month and the steady new patients that hold it (N = full run x (1 - (share at 12 x (1 - x)^12 + share at 24 x (1 - x)^24)), where x is the monthly attrition); exam, lane and pretest minutes, lanes, and doctor and technician hours.
Then wait for my answers.
Round B, costs, the startup budget and my lender:
d. Startup budget: an amount and its source (landlord quote, contractor quote, equipment quote, frame supplier quote or calculation) for each line on page 5, from the build-out to the working capital reserve and contingency.
e. Monthly fixed costs for lines 1 to 12 on page 8, including rent, the optician, technician, front desk and billing, software, insurance, loan interest and my market wage as the optometrist; whether I draw that wage in cash; and my monthly loan principal. Give interest and principal as year 1 monthly averages for break-even and coverage, and, for the cash forecast, any payment, fixed line or other cash line that changes in months 1 to 24 (a payment holiday, a balloon payment, a rent step) with its month. My market wage as the optometrist covers exam and management time (line 4), never also in line 3 or 14.
f. Variable cost shares of net sales for lines 13 to 16: line 13, optical cost of goods, each line at its own share; line 14, hourly help above the minimum staff that moves with exams; line 15, card processing, as an effective share of all sales; line 16, unplanned costs; and any sales line whose own shares differ, given for that line.
g. For each payer: my fee and its allowed amount for an exam, its share of my exams, the share the payer pays and the share the patient owes, its first-pass denial share, the share of denials I recover and how many months later, the share of patient balances I write off, and the share of each month's claims it pays in that month and in each later month. For the cash forecast, collect each payer and each optical line on its own split; never reuse the kit's printed blend.
h. For each optical line: capture on exams, average net sale, cost-of-goods share and the share collected in the month of sale and each later month.
i. The debt service coverage ratio my lender requires and how the lender calculates it, if I know them.
Then wait for my answers.
(Continued on page 18.)

PAGE 18

The prompt, last part

Paste this part directly after the text on page 17, still as one message.

Round C, cash timing, sales tax, deposits and Gate 0:
j. Payment terms: when each payer pays (the share of a month's claims paid that month and in each later month), when patients pay their share and their optical orders, when denied claims are paid after rework, and when staff, the lab and frame suppliers are paid.
k. For every other cash line (payroll, card settlements, insurance, loan payments, rent and fixed bills), when it is paid, or confirm it is paid in the month it is incurred.
l. Monthly cash out beyond operating costs: income tax set-aside, equipment replacement and frame and contact lens stock build-up.
m. Cash on hand on the first day the practice opens after all startup spending, startup bills still to pay by month, owner money or loans still to arrive by month, and my minimum cash floor (at least one full-run month of fixed costs plus principal).
n. If I am already open: what customers owe me and what I owe suppliers and staff, each by the month it will be paid, deposits I already hold, and sales tax already owed with its payment month.
o. Sales tax: the rate I collect on taxable sales, from my own registration, which sales lines (or what share of each) are taxable, and when I remit what I collect (each month, each quarter or another schedule), so the forecast holds collected tax apart until it is paid.
p. Gate 0: which agreements, quotes and approval requirements I already have in writing.
Then wait for my answers.

Step 2. When I answer, produce these as plain tables I can copy back into the kit:
1. Business plan sections 1 to 8 for my practice, drafted from my answers, with gaps marked [NEED: ...].
2. The sales build by line and month (exams, recovered denials, frames, lenses and contacts), with annual sales and the capacity check from page 6.
3. The completed startup budget, line by line as on page 5, with the total. Size the reserve by the page 5 rule; if I gave another, show both and the result for each.
4. Operating and cash break-even per month, per week and per day open; break-even exams a month (use cash break-even); rent share and planning debt service coverage at full-run sales, labeled before income tax and equipment replacement, and on my lender's definition too if I gave it.
5. The 12-month cash forecast for the expected and slow-start cases, in thousands of dollars to two decimals (51.25 means $51,250) to match the kit, with, for each case, the first month below my cash floor and the first month below zero, and the runway; the second year's lowest closing cash (new patients held at month 12's level and the returns already due counted, page 7 Year 2 exams, each month with its own season, not a flat average); any extra reserve the slow start needs; and the Test 6 cushion, with whether the page 5 buffer covers it (add any excess to the reserve). Add memo rows for each month; they track amounts owed and do not change closing cash: sales tax collected, remitted and owed at month end (last month's owed + collected minus remitted), and claims owed by payers (last month's + billed minus paid), money not yet in the bank.
6. The panel by month (new, due back, exams) for months 1 to 24, the 12 year-2 exam figures, the steady new patients for full run, and capacity used at the settled peak; then, if the month-12 run rate falls short of cash break-even, the extra new patients every month from month 1 on (the same number added to each month's plan and held into year 2) at which it reaches break-even, found by trying values in code. Shares must lie between 0 and 100, return shares must not exceed 100 in total, and payer shares and every split must total 100; otherwise mark [NEED: corrected shares].
7. The payer table with clean collectible per exam, the claims owed month by month, and what the waiting costs in cash: the lowest, over 24 months, of closing cash plus that month's claims and balances owed, minus the lowest closing cash, with the second year's 12 closing balances printed (receipts keep arriving on their splits across the year end).
8. Optical sales and cost of goods by line and month, and the contribution each line adds per exam. Then, over 24 months: the lowest closing cash and its month, the first month below my floor and the first below zero, and the extra opening cash that would hold the floor through month 24 (my floor minus that lowest close, rounded up to $100; 0 if none).
9. The kit's page 4 check: Gate 0 and pass or fail for each of the six tests with the reason (if Gate 0 fails, the result is not ready), and the overall result: not ready if Gate 0 fails, with no color; otherwise green, amber or red under the page 4 rules.
10. A final checklist: every MY ESTIMATE figure, every [NEED: ...] gap, every payer term, capture rate or new-patient count I should verify, and every question that needs a qualified professional.

WHEN THE ANSWER COMES BACK

Copy each table into the matching kit page in pencil. Check every [NEED: ...] gap and MY ESTIMATE figure, starting with the new-patient plan, the payer terms and optical capture, before anyone sees the plan, and recheck the page 4 result with a calculator.

The worked example's twelve-month forecast, filled in

The page 12 example entered on the page 11 form, month by month, in dollars. Parentheses mean minus. Each column adds up as printed, so a row can move by a dollar between months with the same sales; each closing balance becomes the next month's opening cash. Cash floor $46,769.

LINE ($)	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12
EXPECTED CASE												
Opening cash	**415,800**	**376,331**	**343,566**	**313,336**	**285,145**	**258,088**	**232,671**	**206,010**	**182,091**	**158,814**	**136,089**	**114,363**
In: sales receipts	13,087	19,637	23,891	26,213	27,963	30,630	33,851	38,185	37,596	39,790	40,275	42,487
In: owner money and loans received	0	0	0	0	0	0	0	0	0	0	0	0
Out: optical goods, card fees, unplanned (lines 13, 15, 16)	6,773	6,619	8,339	8,621	9,237	10,264	11,341	12,932	11,701	13,343	12,830	14,113
Out: payroll, line 4 if drawn in cash (lines 3, 4, 14)	26,081	26,081	26,080	26,081	26,081	26,081	29,469	29,470	29,470	29,470	29,469	29,469
Out: rent (line 1)	3,733	3,733	3,733	3,733	3,733	3,733	3,733	3,733	3,733	3,733	3,733	3,733
Out: other costs, with loan interest (lines 2, 5 to 12)	12,716	12,716	12,716	12,716	12,716	12,716	12,716	12,716	12,716	12,716	12,716	12,716
Out: income tax set-aside, equipment replacement, stock build-up (none in the example; see below)	0	0	0	0	0	0	0	0	0	0	0	0
Out: loan principal	3,253	3,253	3,253	3,253	3,253	3,253	3,253	3,253	3,253	3,253	3,253	3,253
Out: startup bills still to pay	0	0	0	0	0	0	0	0	0	0	0	0
Net cash flow (in minus out)	**(39,469)**	**(32,765)**	**(30,230)**	**(28,191)**	**(27,057)**	**(25,417)**	**(26,661)**	**(23,919)**	**(23,277)**	**(22,725)**	**(21,726)**	**(20,797)**
Closing cash, expected	**376,331**	**343,566**	**313,336**	**285,145**	**258,088**	**232,671**	**206,010**	**182,091**	**158,814**	**136,089**	**114,363**	**93,566**
SLOW-START CASE (70 PERCENT OF EXPECTED SALES IN EVERY MONTH)												
Opening cash, slow start	**415,800**	**374,437**	**337,767**	**302,870**	**269,402**	**236,727**	**205,201**	**171,786**	**140,291**	**109,246**	**78,587**	**48,627**
Sales receipts, slow start	9,161	13,746	16,724	18,349	19,574	21,441	23,696	26,729	26,317	27,853	28,193	29,741
Out: variable costs, slow start (lines 13 to 16)	4,741	4,633	5,838	6,034	6,466	7,184	7,939	9,052	8,190	9,340	8,981	9,879
Out: fixed costs (lines 1 to 12), principal, bills, less funding	45,783	45,783	45,783	45,783	45,783	45,783	49,172	49,172	49,172	49,172	49,172	49,172
Net cash flow, slow start	**(41,363)**	**(36,670)**	**(34,897)**	**(33,468)**	**(32,675)**	**(31,526)**	**(33,415)**	**(31,495)**	**(31,045)**	**(30,659)**	**(29,960)**	**(29,310)**
Closing cash, slow start	**374,437**	**337,767**	**302,870**	**269,402**	**236,727**	**205,201**	**171,786**	**140,291**	**109,246**	**78,587**	**48,627**	**19,317**
STEADY-STATE YEAR FOR TEST 6 (RAMP DONE, SEASONS IN; NOT THE FORECAST YEAR)												
Net cash flow, steady-state year	**5,287**	**(87)**	**7,436**	**5,253**	**5,287**	**7,436**	**9,595**	**13,922**	**5,296**	**9,633**	**7,436**	**12,852**

Reading this forecast. It is in whole dollars, rounded so each column adds up, so a row can differ by $1 between like months; the page 11 form uses thousands. The floor is cash you never plan to spend. The page 5 buffer holds one more month of fixed costs and principal above it, so a small miss spends the buffer, not the floor. The opening cash was sized by the two passes on page 5, buffer included. Variable costs use each sales line's own shares, so a month can differ by a few dollars from the blended share. The example sets aside no income tax (it depends on the owner's whole return, so take the figure from your accountant), replaces no equipment in its first two years and builds no stock beyond the opening stock in the startup budget; enter your own amounts. Second year at the month-12 run rate (new patients held at month 12, returns already due counted, page 7; about $48,655 a month, against month 12's own $43,923): closing cash runs $76,411 in month 1 and minus $76,376 in month 12, lowest minus $76,376 in month 12, below the floor. Sales are net of sales tax, and the example pays each month's tax in the month it is collected, so it owes none at any month end; enter your own rate and payment timing in the page 11 memo rows. If you borrow the reserve, add its interest and principal to the forecast and run both passes again. The slow start lets variable costs fall with sales, which is fair only because hours you cannot cut sit in line 3; waste or purchases you cannot cut make a real slow start worse.