OBJECTIVE: Chemotherapy with innovative state-of-the-art medicine at university level can be very costly. Reimbursement until 2002 was at a flat rate, often not even covering the costs of the pharmaceutical substances. To avoid debt a more cost-effective chemotherapy management system had to be found.

MATERIALS AND METHODS: From this background, an economic model with four steps was developed: 1. Analysis of current financial situation; 2. Precalculation of chemotherapy costs; 3. Assignment to an individual cost-covering reimbursement pathway; and 4. Postcalculation for cost efficiency and elimination of potential mistakes. RESULTS: After successful implementation of this model we were able to reach cost effectiveness for our chemo unit within 12 months and pay back previous debts and were even able to employ new medical staff. CONCLUSION: With this model we are now able to perform chemotherapy cost effectively at a university level without reducing standard of care.