A GIFT FROM

My FINANCIAL I’S AND O’S

Do you know how money flows in and out of your home and your practice? Here is a helpful exercise to help you find out, provided by Dr. Vicki Rackner, MD, a retired surgeon, and Reginald A.T. Armstrong, CPWA®, from their book, The Myth of the Rich Doctor.

Armstrong Wealth Rx FOR DOCTORS

www.FinancialRxForDoctors.com
In order to build wealth you want to
- Plug money leaks
- Save aggressively
- Invest wisely

Let’s look at how money flows in and out of your practice and your household.

**HOUSEHOLD**

**MONEY INFLOW**

On average, how much money do you bring home each month from your practice?

______________________________

On average, how much money does your partner bring home each month?

______________________________

On average, how much passive revenue do you generate each month?

______________________________

On average, how much portfolio revenue do you bring in each month?

______________________________

Do you have other sources of revenue?

______________________________

**What are your fixed expenses each month?**

- Mortgage or rent _____________________
- Property taxes _____________________
- Homeowner’s insurance ____________
- Utilities _____________________________
- Phone/Internet ______________________

**What do you spend each month for transportation?**

- Car payments _______________________
- Auto insurance ______________________
- Maintenance _________________________

**What do you spend each month to maintain your home?**

- Housecleaning ______________________
- Yard maintenance ______________________
- Home repairs _______________________

**What do you spend in the average month on medical and dental expenses?**

- Medical insurance _____________________
- Medical and dental care _____________
- Medications _________________________
- Long-term care insurance ____________
What do you spend in the average month for food and entertainment?

What do you spend each month for vacations?

What do you spend each month on clothing, health, and beauty?

What do you spend each month on gifts?

What do you spend each month on professional services?

How much do you spend each month on luxury services?

How much do you spend each month on your kids’ tuition, sports, band, and other expenses?

How much do you spend each month for charitable donations?

How much do you spend each month in membership dues?

How much do you spend each month in taxes?

How much do you save each month for your retirement?

How much do you save each month for your kids’ college education?

How much do you spend each month for the care of your parents or other relatives?

LESSONS FROM A DRIPPING FAUCET

You see a little drip from your kitchen faucet. No big deal, right? **Wrong**!

A slow leak of thirty drips per minute wastes

<table>
<thead>
<tr>
<th>Daily</th>
<th>Monthly</th>
<th>Yearly</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.32 gallons</td>
<td>129.6 gallons</td>
<td>1576 gallons</td>
</tr>
</tbody>
</table>

A family of four consumes 12,000 gallons of water annually washing their clothes.

So, too, the slow dripping of little expenditures adds up.
WHAT ARE YOUR ASSETS and LIABILITIES?

ASSETS
What is the value of your home?

What is the value of other real estate holdings?

What is the value of your cars, art, furnishings, and jewelry?

How much do you have in savings and checking accounts?

How much do you have in your stock/bond portfolio?

What is the cash value of your insurance policies?

What is the value of other assets you own?

What is the value of any IP you own or ownership stakes in businesses?

What is the value of your medical practice?

Tip: Take a video to document the items in your home. In the event of fire or theft, it will make your life much easier! And load the video into the cloud.

LIABILITIES
How much do you owe on your mortgage?

How much credit card debt are you carrying?

How much do you owe on personal debts?

How much do you owe on medical school debts?

How much do you owe for your cars?

How much do you owe for investments you have made in your practice?

What is my net worth?

Add up your assets, subtract your liabilities, and you have your net worth.
MY PRACTICE I’S AND O’S

Now, let’s take a look at your practice.

MONEY INFLOW

How much do you bill insurance companies for your clinical services in an average month?

How much do you collect from insurance companies in the average month?

What percentage of your revenue is generated by Medicare patients?

Medicaid?

How much do you bill patients in your average month?

How much do you collect from patients in your average month?

What are your three most profitable clinical activities?

What are the three insurance carriers from whom you collect the most generous fees?

What is your average total accounts receivables?

What percentage of your practice revenue comes from insurance payments?

Patient payments?

How many days, on average, elapse between the time you bill and the time you collect?

What percentage of your insurance claims are rejected?

What do you do with rejected claims?

What percentage of your patients’ co-pays do you collect?

What percentage of your practice revenue comes from procedures for which patients pay cash?
If you sell products in your practice or offer ancillary services like in-house formularies, how much revenue does it generate in your average month?

How much revenue do you collect in the average month for activities outside of your main clinical practice?

Consulting

Speaking

Expert in med mal cases

Writing

Locums work/shifts in nursing homes

Leadership positions

If you sold your practice today, what would the sale price be?

Will any junior physicians buy into your practice in the next one to five years?

If so, what revenue would that generate for you?

Does your employer or corporation contribute to a retirement account?

How much?

If you own your building, how much rent do you collect each month?

MONEY OUTFLOW

What are your fixed expenses each month?

Rent

Payroll

Phone/Internet/Answering service

Vendors (medical billing, bookkeeping, EMR)

Insurance

Med mal

Disability

Health

How much bad debt do you write off each month?

How much do you pay in taxes each month?
What is your monthly marketing and advertising budget?

How much do you spend on CME, subscriptions, books, and access to educational content?

How much do you pay in dues, licenses, and fees?

How much do you spend each month on professional fees? (CPA, lawyers)

How much do you spend to maintain your office and its furnishings?

How much do you spend in office supplies, mailing, and other expenses?

How much do you spend for leases or payments of medical equipment?

What is your total practice debt?

How much do you spend each month to maintain a professional image (clothing, hair and makeup, manicures)?

Are you incorporated?

What percentage of your expenses do you run through your corporation?

To learn more about what critical steps physicians and dentists can take to enjoy the freedom to retire five to ten years earlier, get a copy of the book by visiting FinancialRxForDoctors.com

To schedule your NO-OBLIGATION DISCOVERY MEETING with Reginald Armstrong, call Armstrong Wealth at 843.292.9997
Have you saved enough? Did you start early enough? What do you do to prepare? What do you do when things change? Find out the answers to these and other most commonly asked financial questions doctors ask, by Dr. Vicki Rackner, MD, a retired surgeon, and Reginald A.T. Armstrong, CPWA®, from their book, *The Myth of the Rich Doctor.*

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Question

HAVE I SET ASIDE ENOUGH MONEY FOR RETIREMENT?

My doctor clients have very different dreams about their retirement. I can think of one doctor who plans to travel internationally. I know another who can’t wait to putter in his garden for days on end.

Clearly the amount of money that you need is tied to the amount you want to spend and how much of a financial cushion you want and need.

The biggest fear most doctors have is compromising their lifestyle in retirement. Put this fear to rest by putting pencil to paper and calculating your financial needs.

I recognize that this is an exercise some avoid, just as a patient who needs to lose weight avoids stepping on a scale. Three things usually happen. First, it’s a relief to replace worry with information. Second, doctors are often surprised that their actual cash flow is very different than they expected. Third, this discussion makes it easier to take that next step and create a concrete plan.

In terms of specific advice, there is no substitute for supercharging your salary deferrals into retirement plans that qualify for any tax-deferred or tax-exempt status like a 401(k). Take full advantage of it and maximize the available plans. We recently consulted with a physician with a major hospital system who was unaware of the availability of a 457(f) plan that he could use to double the amount he was deferring toward retirement.

Don’t forget to also invest in nonqualified accounts you purchase with after-tax dollars that are held in tax-deferred accounts, plans, or trusts. They are more accessible before retirement without governmental penalties.

If you cannot find extra dollars to save and invest, I recommend you review your current spending habits. Do you have too much in house and car payments? Bottom line is you must run the numbers (or have an advisor do so).

Please avoid the biggest mistake I see midcareer doctors make. Some doctors in this situation make things worse by investing in high-risk ventures hoping to enjoy big rewards. Do not take on extra risk in order to catch up for lost time. This strategy can backfire. For instance, one of my physicians wanted to invest in a certain social media stock hoping to not miss out on the next big thing. While it may still work out someday, being down 40 percent almost right out of the box is not the way to catch up.

This is the time to be a safe and prudent investor. Work with a professional financial advisor who can help you identify the best plan to get you to retirement.

Question

HOW CAN I SPEED UP RETIREMENT?

Many of my doctor clients are burned out. They used to derive great pleasure from their work, but now the administrative burdens and financial pressures have eroded their joy.

If you are in this situation, you can take either dramatic or small financial steps that can significantly move up your retirement date. A dramatic step might include downsizing...
now if you are empty nesters. You might not need that much house or that much car. Some of my clients would rather exchange a skiing vacation in the Swiss Alps for a stay-cation if it means that they can retire five years earlier than expected.

I also help clients identify simple ways to save and invest. For most doctors, it’s not the big Italian leather sofas that drain the budget; it’s the smaller sums that slip through their hands. In a documentary about Warren Buffett, they show him going through the drive-through window at McDonald’s to pick up breakfast. He said that if the market isn’t doing well, he gets the lower cost breakfast item.

However, I also invite you to take a look at a different question: Are there changes that you can make to return to the joy in medicine?

The way you manage your money can and should reflect your life stage. The post-retirement distribution phase follows different rules than the pre-retirement accumulation phase. The reasons are obvious—there are no do-overs in retirement. If you lose a third of your wealth on a bad investment (what Dr. Rackner calls Dumb Doctor Deals) or in a bear market when you are forty years old and twenty years from retirement, it is painful but not devastating. You can always work longer. The same scenario at age fifty-eight is much more painful with potentially dire, goal-altering consequences.

Retirement normally has three phases, characterized by different financial demands.

The go-go phase of retirement. This is the earliest stage of retirement when you have your health and can enjoy life. Some of my doctor clients are surprised that their expenses do not go down as much as they thought in early retirement. The children may be out of college, but you may be spending money on the grandkids, vacations for yourself, and perhaps still taking care of your elderly parents.

The slow-go phase of retirement. Somewhere around age seventy-five or eighty, expenses often fall. Health concerns may limit travel. The death of a spouse can also change spending patterns. If the surviving spouse has not historically dealt with the finances, their stress level may skyrocket.

The no-go phase of retirement. Finally, as we enter the final phase of retirement, the no-go years, expenses may rise again as health costs pick up. Also, legacy planning, if not yet addressed, likely becomes a focus.

The bottom line is that retirement changes as we go through it, and we each have our unique response to those changes. Having a trusted financial partner to help you anticipate and navigate through each phase is critical.
need to review their options to protect their assets and their freedom of choice in the event of need.

Lawsuits/liability. As a doctor, especially if you are a business owner, you have a bull’s-eye on your back for lawsuits, and not just malpractice suits. For example, if your office manager left a laptop on the plane, and that laptop contained medical records, you are liable for a $250K penalty for each medical record compromised. Make sure you are protected from all the “what if’s” in life.

Question
WHAT’S THE BEST WAY TO SAVE FOR COLLEGE FOR MY CHILDREN OR GRANDCHILDREN?

As a successful medical professional, you may be tempted to think that you will be able to pay for college with current earnings. Certainly that is one option for some doctors, but may be impractical for those with many children. For most doctors, Section 529 plans will likely be the best option.

First, your money potentially grows tax-deferred and is tax-free if used for qualified secondary education expenses. The money can be used at practically any school. Second, there are potential state tax deductions in certain states. For example, in South Carolina under current law there is an almost unlimited state tax deduction. So if a doctor puts $50,000 in 529s for her kids, she gets to deduct $50,000 from her state return, saving her 7 percent on the $50,000 or $3,500. Third, the child is a beneficiary; the parent or grandparent always controls the money.

Fourth, the money is considered outside of the estate. This can be an important part of estate planning for wealthier families, especially since the money can be shifted to close relations of the original beneficiary. For example, when my grandchildren were born, I shifted part of my daughter’s 529 plan she had not used to them. Not only did I shift assets down another generation, but there are potentially eighteen years of growth ahead for the assets before they go to college.

Keep in mind that as of mid-2017, nonqualified dividends and short-term capital gains can be taxed as much as 43.4 percent in taxable accounts, while long-term capital gains top out at 23.8 percent for those in the highest tax bracket.

Be sure to use the tax code to your advantage. For example, to offer an incentive for saving, the government has created a program called the cash balance plan. For the right doctor, this is potentially a way to significantly reduce your taxes.

Further, a well-executed legacy plan can help you support causes that are important to you while enjoying tax benefits today.

Question
HOW CAN I MINIMIZE MY TAX BURDEN?

As one of my clients who is in his forties mentioned, the two biggest obstacles to his financial freedom are education of children and taxes. And while the kids eventually get out of college, the tax challenge is always with us. So how do we minimize the tax burden?

First, defer as much as you can legally. In 2017, you can put away as much as $54,000 between employee and employer contributions. Second, check if your state has a state tax deduction for Section 529 contributions and take that into consideration. Third, pay attention to tax location, not just allocation. Some investments are better suited for taxable accounts, while others are better in qualified accounts such as IRAs.

Question
IS IT POSSIBLE TO INVEST WHILE KEEPING THE VALUES OF MY FAITH IN MIND?

The short answer is yes. On one hand, most of my doctor clients express their values through their faith. On the other hand, the most successful medical professionals are both proficient at their jobs and at managing their finances. So when you are able to have your values and your finances work together, you are in a great place.
philanthropic efforts. As one of them put it, “Don’t forget that giving whether it is to church, charity, or other worthy causes is important to us as humans at a visceral level. It makes you feel good and prosperous, and there is significant value to that as well. I don’t regret any of the contributions I have made.”

On the other hand, some clients prefer that the investments they select not violate their faith-based value system. The good news is that portfolios can be crafted that screen out companies that violate core ethical principles. Our firm, in fact, specializes in this form of portfolio construction.

**Question**

**WHAT ABOUT INVESTING IN REAL ESTATE?**

**A** You most likely know people who have made money in real estate; you may also know people who lost money in real estate.

Before you purchase real estate, you want to have clarity about your purposes. Would you like to buy a beach-front getaway that you can enjoy with your family? This is the kind of property that could potentially be passed through the generations.

Would you like to buy something that you could potentially rent out and generate cash flow?

Are you interested in investing in commercial real estate that will appreciate in value so you can sell it for a profit?

Many of our doctor clients, especially dentists and veterinarians, own the building that houses their practice. Some upon selling the practice, retain the building for some time to continue a revenue stream during the go-go years of retirement.

As with any other investment, it’s important to make informed choices. You want to get advice from the right people.

**Question**

**WHAT’S THE BEST WAY TO RESPOND TO A DIVORCE, A DEATH, OR EVEN A “BUSINESS DIVORCE” WHERE A DOCTOR BREAKS AWAY FROM THE PRACTICE? WHAT DO YOU DO WHEN YOU’RE SUDDENLY SINGLE?**

**A** Losses from divorce or death can be devastating events—both emotionally and financially. So can a failed medical partnership.

Sometimes there are basic mechanical problems. For many couples one of the partners takes responsibility for the money. They make investing choices and pay the bills. It’s important that all parties put their financial houses in order. Sometimes that means developing new skills or hiring experts.

This is a time to get back to core values. What’s most important? How can spending and investing reflect core values?

**Question**

**SHOULD I PAY OFF MY MORTGAGE EARLY?**

**A** Many doctors want to know if they should pay off their mortgage early. Obviously, this can only be fully answered individually, but here are a few thoughts.

Before paying off a mortgage, ensure the other priorities are in place, such as emergency cash reserve, high-interest ugly and bad debt paid off, fully funding retirement, ensuring adequately insured. Once that has taken place, then it depends where the stock market is. If it is near a bottom like in 2009 or 2010, then putting extra into investments is likely to be more beneficial than paying off the mortgage.

On the other hand, if the market has had a very long run up such as 1999 or 2007, perhaps paying off the mortgage early is the better move. Also, I find most doctors would rather be debt-free in retirement so at some point making the payoff a priority needs to happen. Finally, some doctors are allergic to debt and it really makes them uncomfortable. I have yet to meet a client who regrets...
paying off their home before retirement, but I have met many who regret not paying it off while they were still earning an income.

**Question**

**What are the biggest mistakes doctors in their fifties and sixties make?**

Some doctors in their fifties and sixties regret they did not start saving and investing earlier. They think they need to play catch-up. They take more risks than they should.

So the underlying question is really: Can you protect me from myself?

The short answer is maybe.

We financial advisors can educate, we can coach, we can cajole, we can put in systems, but in the end the doctor has to buy into our process and believe we have their back.

Emotions are dangerous. Many studies have shown that the majority of the value investors will receive from their financial advisor will come from the advisor helping them avoid making bad decisions, and conversely taking action when they felt otherwise. I mean, when US technology stocks (or any sector) are leaving everything in the dust, it is tempting to junk what appears to be a stodgy diversified portfolio. Unfortunately, this often comes at exactly the wrong time.

Similarly, when the markets have plummeted and blood is figuratively running in the streets, it can seem insane to invest in stocks. Yet, I would contest that in the end this is what you hire us for. To make the tough calls.

My clients hire me to show them which risks could devastate their families and cover them.

They hire me to help them take advantage of the tax and retirement plan codes.

They hire me to tell them no.

They hire me to tell them to do it now.

They hire me because I have their best interests at heart. This is what I do, and I do it well.

**Who is doing those things for YOU?**

To learn more about what critical steps physicians and dentists can take to enjoy the freedom to retire five to ten years earlier, get a copy of the book by visiting FinancialRxForDoctors.com

To schedule your no-obligation discovery meeting with Reginald Armstrong call Armstrong Wealth at 843.292.9997
What’s your risk number?
How risky is your account?
Get your portfolio risk analysis using our interactive tool.

CLICK HERE TO RECEIVE YOUR FREE PORTFOLIO RISK ANALYSIS.
Items to consider (but should receive individualized advice before deciding)

CAREER LAUNCH
- Define your values. Let those values guide spending.
- Establish an emergency cash reserve.
- Set a plan for reducing debt.
- Contribute the maximum possible to a retirement plan; use Roth option if available.
- Get individually owned term life insurance.
- Get individually owned "own occupation" disability insurance.
- Get umbrella liability insurance.
- Set initial short-, mid-, and long-range goals.
- Establish and implement a strategy to address the goals.
- Put systems in place to automate savings.
- For the first few years after your training ends-when your income increases five- to tenfold-upgrade your lifestyle with restraint.

LEADING THE PACK
- Minimize current and future taxes.
- Take full advantage of retirement plans.
- Maximize ability to save money.
- Ensure life and disability insurance coverages keep up with need.
- Increase umbrella liability insurance as appropriate.
- Review will; establish durable and health care powers of attorney.
- Ensure beneficiaries are updated on retirement plans, insurance, and investment accounts.
- Keep updating goals.
- Ensure investment strategy adapts to the time frame of goals.
- Review corporate structure in light of any tax law changes as they occur.

HANGING UP THE WHITE COAT
- Continue to minimize taxes.
- Verify you are on track for making work optional.
- Ensure you have a clear idea of expenses in retirement.
- Ensure you have a "hobby strategy" - know what you will do with your time in retirement.
- Monitor asset allocation and investment strategy to manage market risk as retirement approaches.
- Adjust investment accumulation strategy to investment income strategy when appropriate.
- Organize all areas of personal finances; ensure your spouse is informed.
- Finalize estate and gifting plans.