
The Afternoon Sweep

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Morning huddles offer an exceptional method for preparing for the day; however, it's not uncommon for the results to fall short of one's expectations. Even if your reminder calls went out previously, it's likely that you've had a couple of cancellations that morning. Filling empty slots that are mere minutes away is virtually impossible – and it may prove too difficult to ensure that everything is in place for what always seems like a chaotic morning.

Develop a winning combination by adding an afternoon sweep to your daily routine. Every afternoon, ideally between 3:00 and 4:00 p.m., review tomorrow's appointments. Look for gaps in the schedule, and contact patients before you leave the office for the evening to fill those slots.

Whether during the afternoon sweep or via a new office routine, gap management offers considerable benefit. The revenue associated with that appointment isn't lost, and more patients can be accommodated. Don't leave messages; call until you reach a willing patient. Don't just dial anyone – develop a waitlist with patients' names and contact phone numbers, also incorporating the original appointment date in order to effectively purge the list. Alternatively, call patients scheduled a week or two from now and see if they want to be seen earlier. Finally, maintain a record of patients due for a particular service – like their Medicare Annual Wellness Visit – to contact regarding their interest in being seen.

An afternoon sweep offers a cushion of time to not only address gaps but also review the schedule in order to prepare for the next day. This may include scheduling an interpreter, ensuring that equipment is ready, or tracking down an important test result.

Whether huddling or sweeping, always ask the team for feedback about mistakes. Spend a minute revealing the trials and tribulations of the day – and determine how to learn from these challenges.

REMINDER: If you feel that you are being unfairly penalized for the EHR Incentive Program in 2017, or are being fined in error, file a *reconsideration application*. The Centers for Medicare & Medicaid Services will reconsider the 3% penalty, being applied to all Medicare reimbursement, for the following reasons: new, hospital-based or ineligible professional; PECOS-related issues; hardship; and/or, EHR vendor or MU attestation issue. The form includes a space to provide a brief description. The deadline is February 28, 2017.

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