

Spring Cleaning: Seven Strategies for Your Practice

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The spring offers a chance to shake off the winter blues – and get started on an improvement initiative for your practice. Make a commitment to focus on one area in your practice. Select a task, create a workgroup, pledge to meet once or twice a month, maintain a written agenda, and document an action plan. Choose a quantifiable measure of success – and monitor it. Don't let 2019 slip by without taking a deep dive into an area of opportunity in your practice. The choice is yours, but here's a list of topics to consider for your spring project.

- **Take a Stand.** It comes as no surprise that physicians are increasingly subjected to arduous administrative burden. The American Medical Association, for example, reports that every week a medical practice completes more than 29 prior authorization requirements per physician, which consumes an average of 14.6 hours to process.¹ The AMA is one of many professional associations focused on reducing the burden related to prior authorizations. This is an opportune time to engage in advocacy. Request a written copy of your participation agreements with insurance payers, and understand the contract requirements – instead of just being told “this is what you have to do.” Report problems with payers’ provider enrollment processes, adjudication or reimbursement to your state insurance commissioner, medical society and local legislator. Engage in advocacy at the federal level with your professional society or association. It’s time to assert your voice.
- **Recognize the Power of the Template.** The schedule is the central nervous system of the practice, yet it’s rarely given the attention it deserves. Focus on the framework for the schedule – does your supply (of time slots) meet your demand (for appointments)? Dive deep into the template: When your scheduler searches for the “next available” slot, what does that query deliver? Many systems populate the third-next available appointment, or simply skip to the next day; you could be systematically “losing” slots without realizing it. Evaluate your start times for both the morning and afternoon clinics; does the clinic really commence at 8 a.m. or is that an appointment with the receptionist at your front? Consider your appointment types; do you really need that many? As patients equate access with quality, this evaluation becomes more important than ever. Remember: You can never outperform your schedule.

- **Acknowledge Consumerism.** While we give attention to managing generations at work, we may be overlooking the fundamental change in our customer base. Our customers have high expectations when it comes to quality and service delivery. Marry this with higher financial responsibility, and recognize that a sea change is underway. If we want to be successful at collecting revenue, we must ensure our operations reflect this new reality. Self-scheduling is no longer optional for your practice; it's simply a matter of when and how, since your very survival is dependent on executing strategies that customers don't just want, but expect. We can resist these new customer demands, but we risk our competitors overtaking us. Even if the practice across town remains static, competition is emerging from faraway places. Every one of your patients carries a computer in their pocket – change may come from yet-identified sources. It's vital to recognize the emergence of customer awareness before it's too late.
- **Empower the Patient.** Patient engagement has peppered the soundwaves for several years, but the end game is patient empowerment. This approach has endless possibilities; not only is a more empowered patient a more compliant one, but there are significant benefits to your practice as well. Consider how other industries have empowered customers, such as ATMs at banks, kiosks at airports, and salad bars at restaurants. These solutions provide value to their customer and the business. Patient empowerment offers the same possibilities for your practice. Administrative tasks like completing a medical history that effortlessly populates into the patient's record, and clinical tasks like transmitting biometric data (any type of vitals), translate into advantages for you and your practices. While payment for these activities has been elusive in the past, recent remuneration determinations like the new remote physiologic monitoring CPT codes 99453, 99454 and 99457 are propelling new opportunities. Opportunities may breed additional challenges, however; remember to bolster cybersecurity to manage and protect patients' records.
- **Measure Success.** Most practices have some form of a patient satisfaction survey, however, taking action based on the survey is another story. Keep it simple by focusing on the #1 metric in other industries, Net Promoter Score (NPS) which uses a single question to measure customer loyalty: "How likely are you to recommend our practice to your friends, family and colleagues?"
- **Optimize Technology.** Most practices have implemented electronic health record systems, but workflow integration is only now taking flight. Focus efforts on optimizing technology, such as integrating patients' history and vitals directly into the record, installing biometric switches for your EHR system, and executing smart-phrases, hot keys, and note templates. Create structured technological strategies by engaging with your vendors, posting queries on users' forums, and questioning consultants. Post a position for a graduate student in IT to intern with your practice to identify and implement opportunities. Inconsistent, poorly integrated technology can slow you down. It is an opportune time to optimize your infrastructure, with a focus

on productivity, proficiency and efficiency.

- **Address Revenue Vulnerability.** The reality is that patients have significant financial responsibility which presents significant challenges for them. Indeed, patient payments now account for 35% of provider revenue, the third largest source of provider income behind only Medicare and Medicaid, according to a recent "Forbes" article. Without implementing strategies to address this growing trend, your practice will experience bad debt that has the potential to drown your practice. It's vital to establish clear policies, requiring either full or partial payment in advance of the provision of care. Copayment collection is a necessity; indeed, it's a contractual obligation (via the insurance payer) for you to collect it. Requesting payment on the balance is also business critical; pitch these as a convenience for the patient. Patients certainly don't want to be bothered with a pesky paper invoice weeks from now, so taking care of it is a win/win. Indeed, explain that protocols related to price transparency reduce the stress associated with concerns about what they owe and how they will pay. Financial surprises for patients are not only frustrating, they rarely result in full payment for the business. Instill processes to capture pre-service deposits (or, ideally, full estimated patient responsibility) on non-emergent services, and focus on a methodical approach to post-service collections. Incorporate online payment, and distribute statements to patients twice monthly to align collections with patients' paycheck cycles.

Spring cleaning isn't simply about sorting or getting rid of clutter; it's an opportunity to redefine your processes. While you may choose one area of focus for the spring, the impact will be a lasting one. Your efforts can boost the energy and enthusiasm your staff needs to tackle the many challenges faced by your practice.

(1) - <https://www.ama-assn.org/sites/ama-assn.org/files/corp/media-browser/public/arc/prior-auth-2017.pdf>

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