9 Mistakes You Don’t Want the Patient Care Coordinator to Make

Looking to build the skills of a newly hired Patient Care Coordinator (PCC)? Need an objective approach for showing the PCC how to polish her professionalism? Want to help your PCC go from good to great?

This article offers some options.

It covers the most common mistakes we observe PCCs making while interacting with patients. They are so common, in fact, that even PCCs themselves recognize them. When we cover this topic in our aesthetic practice workshops, the discussion is a lively learning experience for everyone.

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Billing and Collections Staff Knowledge Assessment Tool for Orthopaedics

Message to the manager who may use this assessment tool:
All or portions of the following questions can be used for interviewing/assessing candidates for open positions in various reimbursement related functions in the practice and with existing employees to assess their understanding of topics. If used for existing employees important to stress that it is a knowledge assessment tool to determine where more training or better position placement is needed, not a “test.”

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Profiles in Plastic Surgeons’ Practice Transitions

Aesthetic Society News – Spring 2017
by Karen Zupko, President

“Sorry, I didn’t call you back last week, Karen. I was climbing mountains in Nicaragua.”

That was the message that New Orleans plastic surgeon John Church, MD, left for me after my call requesting an interview.

What a perfect message and precursor to the fascinating, motivating, and instructional conversations I’ve had with nearly a dozen plastic surgeons who have transitioned from active practice – and one who returned to recreate a practice.

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Can This Partnership Be
“Can This Marriage Be Saved?” was a McCall’s Magazine column I used to read with great fascination as a teenager. Each month, a psychologist would address questions from real readers whose marriages were on the rocks. The problems were frequently related to miscommunication, money, incompatibility, or the children. In most cases, the marriage was a risk of falling apart because the couple had not taken the time to set expectations, clarify what each of them really wanted, or have an open and honest conversation.

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11 Ways to Reduce Employee Embezzlement
Physicians are easy targets for employee theft. A Medical Group Management Association (MGMA) survey revealed that 83 percent of practices have experienced from $250 – $250,000 in employee theft.

Given the cash-based nature of aestheticsurgery, your practice is at even great risk than other specialties. Use these 11 proven practices to tighten cash controls. An ounce of prevention is worth a pound of cure.

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Setting Up Your New Physician for Success
Practices and hospitals invest significant time and money in recruiting a new physician. From phone interviews to site visits to contract negotiations, it’s a long and involved process.

Beyond setting up a new physician’s office and appointment schedule, completing human resources paperwork, and ordering business cards, what does your practice do to support new physicians to ensure they are successful? Although a new colleague may arrive with excellent clinical skills, even the most promising surgeon can fall short if not provided with the right expectations, training, and collegial support. Here’s how to fast track your new physician to professional heights.

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New announcements and guidance push providers toward an active program

If your practice is targeted for a Medicare audit, the Office of the Inspector General (OIG) will no longer give you points for having a compliance plan on the shelf. Unless you’ve operationalized that plan into an active program, it’s not going to garner any leniency with the auditors, according to Inspector General Daniel Levinson, who announced new compliance guidance at the 2016 Health Care Compliance Association conference.

“This announcement is a sea change for physicians,” cautioned attorney Michael Sacopulos, JD, founder and president of the Medical Risk Institute in Terre Haute, Ind. “OIG’s perspective is that physicians have had more than enough time to develop active programs and implement self-monitoring through regular internal reviews, training, and self-reporting. But most haven’t done it. So the OIG is taking a new approach and will
be looking for evidence that providers have active programs in place, not just written plans.”
Therefore, if your compliance plan is collecting dust, or if your practice does not have an up-to-date plan, it’s time to get serious. “Given the government’s recent interest and latest guidance, physicians should assume that increased enforcement is not far away,” predicted Mr. Sacopulos.

From carrot to stick

The new guidance is the latest by the OIG, which also has an array of program development tools and educational materials on its website. Unfortunately, the documentation has not prompted many medical practices to integrate compliance and self-monitoring into billing and practice operations, as the following examples show.

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Exit Interview Form
As you prepare to leave our practice, you have a unique perspective on the strengths and weaknesses of our organization. The information you furnish is used as a means to identify issues regarding our working environment. We appreciate your honesty and cooperation and very much value your opinion. All responses are confidential.

Download Form

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33 Questions to Answer About the Hospital’s Offer

Compiled by attorney Patricia Hofstra, Duane Morris LLC, duanemorris.com

Use these questions as you evaluate a hospital employment contract. Diligence and thoughtful discussions on the front end of the contracting process will help you avoid a disconnect in expectations, and a frustrating
– or even failed – employment relationship.

Download Form

Seven Surefire Ways to Start a Nonphysician Practitioner Off Right

The Journal of Medical Practice Management – January/February 2015
by Cheryl Toth, MBA

With the proper planning and preparation, nonphysician practitioners (NPPs) can improve physician productivity and increase patient access to the practice. A thorough training and orientation program is vital to optimizing the effectiveness and retention of an NPP. An organized approach to understanding payer reimbursement guidelines will ensure that his or her services are documented and billed correctly, and paid appropriately. And proper communication and marketing will go a long way toward building the NPP’s patient base.
This article offers seven proven ideas for getting an NPP off to a great start in any physician practice.

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