

Taking Your Pediatric Practice to the Next Level

Strategies for Surviving & THRIVING in Pediatric Practice

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Faculty Disclosures

- In the past 12 months, I have had the following financial relationships with the manufacturer(s) of any commercial product(s) and/or provider(s) of commercial service(s):

Medical Director, Connexin Software/Office Practicum

However, I acknowledge that today's activity is certified for

CME credit and this will not be discussed today.

- I do not intend to discuss a unapproved/investigative use of a commercial product/device in my presentation.

Objectives

- Understand the competitive marketplace
- Discuss ways to set your practice apart from the competition
- Develop strategies to thrive in today's healthcare market
- Explore the logistical and practical aspects of running an efficient practice that patients love!

Warning: this talk is *not* for...

- those who have a 9-5 mentality
- those who say "this is not my problem"
- those who say "I'm an awesome pediatrician, all I have to do is show up and practice great medicine"



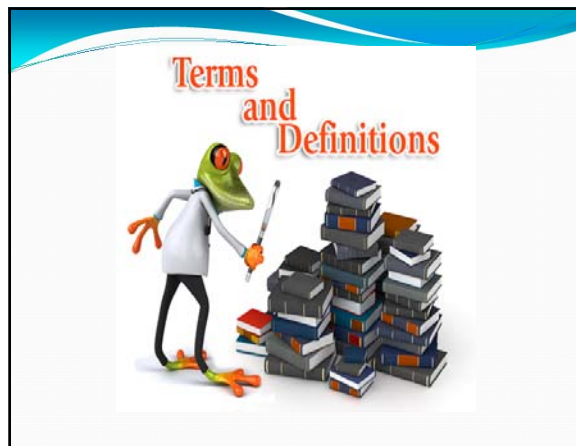
Section on Administration and Practice Management
The Carlisle Council for Practice Management
A Section of the American Academy of Pediatrics

"No Margin, No Mission"

Practice Trends....Alice in Wonderland



One pill makes you **LARGER** and one pill makes you **small**



Boutique

- a business that serves a sophisticated or specialized clientele
- a small company that offers highly specialized services or products
- a small shop within a large department store



Concierge

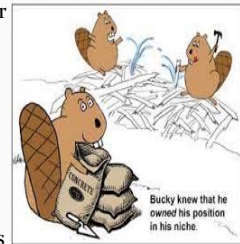


Concierge medicine (also known as **retainer medicine**) is a relationship between a patient and a **primary care physician** in which the patient pays an annual fee or retainer.

- This may or may not be in addition to other charges.
- In exchange for the retainer, doctors provide enhanced care, including principally a commitment to limit patient loads to ensure adequate time and availability for each patient.

Niche

- a place, employment, status, or activity for which a person or thing is best fitted
- the situation in which a business's products or services can succeed by being sold to a particular kind or group of people
- a specialized market
- a habitat supplying the factors necessary for the existence of an organism or species



Micro-practice



- One doctor, all alone
- No or limited staff
- Enabled by technology

What do they all have in common?

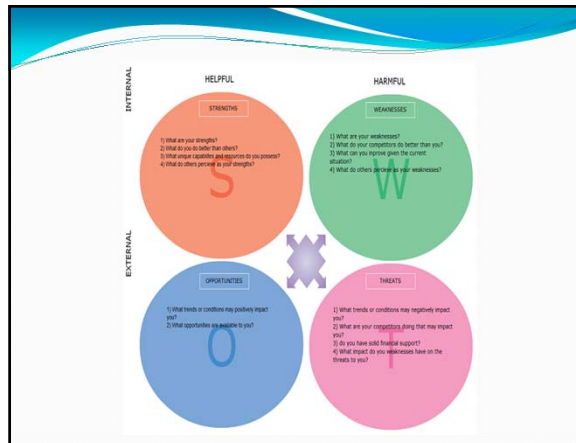


Keys to Success

- Know your market
- Distinguish yourself then market your practice
- Remain customer focused
 - Ask your patients what they want
 - Give them more than they ask

Who are you?

- Mission Statement
- Vision Statement
- Core Values
 - We believe.....
 - We strive.....
 - We treat.....



- | | |
|--|--|
| <ul style="list-style-type: none"> • Personal patient experience • Cutting edge technology • Well respected in community • Staff all nursing professionals | <ul style="list-style-type: none"> • Very limited weekend hours • Cross cover with other solo practices • Don't accept all insurance plans • Only on staff at one local hospital |
| <ul style="list-style-type: none"> • Leverage Medical Home recognition to more payers • Integrate Telehealth for additional convenience • Expand non-covered services | <ul style="list-style-type: none"> • Increased presence of retail-based clinics • Coalescence of small practices into larger integrated networks |

Where's the Business Model?

- Additional income
 - Patient visits/covered services
 - Non-covered services
- Data = leverage
- Control of practice overhead
- Trust relationships/engaged patients lead to decreased use of total healthcare \$\$

Additional Income: Non-covered services

- Know your market
- ASK your market
- Extend your offerings
 - IMPACT baseline testing for pre-high school athletes
 - CPR classes
 - Education sessions
 - Exercise programs
 - Cooking classes
 - Create a community "home" for your patients

Data = Leverage

- Tighter control of quality/cost
- Must have a culture of continuous QI
- Use data to discuss improved payment with payers
 - Use cost data
 - Use quality data



Using Quality Data

- HEDIS measures
 - Well visits (infants, children, adolescents)
 - Immunizations (**ECBT**, adolescent immunizations)
- Clinical Quality measures
 - URI and antibiotics, pharyngitis and antibiotics
 - Asthma patients on controllers

Case Study: QI = Increased \$\$

- HEDIS measures include well visits according to Bright Futures periodicity
 - First 15 months of life (6+)
 - Ages 3-6 years (yearly)
 - Adolescent well visits 12-21 years (yearly)

Increasing Your Rates

- Know your baseline
 - **Who** are your patients on the insurance panel?
 - How well are you doing?
- Create a QI team to improve
 - **Must** include a physician
 - **Can't** only be the physician

Create Policies

- Check for well visit status at **every** point of contact
- Infants
 - Always schedule next well visit before they leave
- Children/Adolescents
 - Practice availability
 - Effective recalls: run frequently, run proactively, run in follow-up

Engage Patients

- Useful reminders according to patient preference
- No shows: reschedule
- Demonstrate the value of the well visit
- 3 stages of letters for patients who repeatedly don't schedule/keep well visits

Recall Coordinator

- As March schedule released:
 - Prepares recall list for patients who will be due between now and end of March and don't already have an appt scheduled
 - Sends messages as reminders
- 2 weeks later, runs same recall
 - Contacts patients until they are scheduled

Results

- All but **one** adolescent had a well visit based on BF schedule for the target payer
- Highest ranking of all pediatric practices in the region
- Increased P4P bonus payment
- Used high rates to negotiate increased payment rates for upcoming year
- Looping in additional payers

Using Cost Data

- Cost Containment
 - Generic medications
 - Formulary adherence
 - Reduce ED utilization
 - Diagnostic test costs
 - Specialist care



Control of Practice Expenses

- Location more important than fancy office building
- Payroll is biggest expense
 - Hire wisely: **staff turnover** is **very** expensive
 - Different models
 - Higher trained staff, cross train and give ownership
 - Minimal staff, physician does much of the work
 - Tiered staff with all working at the top of their scope of practice
- What's the ROI on administrative overhead?

Increased Personal Satisfaction

- Physicians
- Patients
- Staff



leads to.....



Leads to...

- Improved trust relationship
- Improved quality of care
- Improved adherence/compliance to care plans
- Increased loyalty



Who's Stealing Your Lunch?



Competition

- Retail Based Clinics
- Payers themselves
 - Advertising for Phone/Virtual Visits
 - Directing Traffic to RBCs
- Employer Based Clinics
 - On site, coordinate with work c
 - Reduced fees
- Look around....



Why Do Patients Go Elsewhere?

- No established *relationship*
- Convenience
- Don't want to "bother you"
- Cost
- Don't value your "expertise"



What to do about the competition?

- You can only control yourself"
- Focus on **your** practice
- Build a better mousetrap
- Make it personal
(something they can't do)



What's a
Pediatrician
to do?



Market Research

- Who are your patients?
- Who are your potential patients you are missing?
- What do **they** value?
- Ask **before** you act



Care must be PERSONAL

- CHEERS reception: where everybody knows your name

" Sometimes you just want to go where everybody knows your name... and they're always glad you came..."

- Think like you're on island time: no problem!



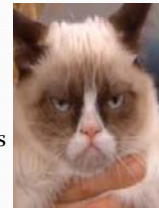
Put yourself in the patient's shoes



- Creates a culture of empathy
- Begins a relationship of trust
- Empower your staff to "do the right thing"

Pitfalls to avoid

- Grumpy staff
- Harried/bothered attitude
- Saying no when you could say yes



But I don't want to feel taken advantage of.....

- Then say yes with a smile, but set the limits
- Then say yes, but with an extra charge
- Or apologize and say, "I'm sorry" but find a way to compromise

Creating Practice Buy In

- Culture from the top down and the bottom up

- Walk the walk


- Create an environment where everyone's ideas matter



Continuous Improvement

- Measure, brainstorm, implement, re-measure and REWARD
- Pay people in the currency that matters to them
 - Celebrations
 - Time off
 - Bonuses
 - Public recognition

Where do you start?

- What is your practice identity?
- What sets you apart?
 - From other pediatric practices
 - From the Retail Based Clinics?
 - From the on-line virtual doc?

“Medicine is neither a profession nor a business, it is a mission”.

- Dictum of Mother Teresa
- We can accomplish it even while earning a living
- A vision and a passion to treat our patients, with compassion is the only requirement

