



# Introducing Smart Business Great Medicine

Can good business practices translate to great clinical care?

By James Geyer, MD



## Burned Out on Burnout?

If you are anything like me and my partners, you don't need to be told that the health care system is broken or that we are burning out. We live it every day. Like many of you, I am a practicing physician with over 20 years' experience. I run a private practice and hospital-affiliated clinical neurophysiology and sleep programs.

There are hundreds, if not thousands, of articles about the sad state of medicine. Burnout is finally being recognized as a serious problem. Unfortunately, the answers being proposed to address burnout are woefully inadequate. Mostly, we see descriptions of the problem and calls to act, but no concrete steps or solutions that can be put into practice. Most of the suggestions being made to decrease stress and reduce burnout have proven insufficient. Interestingly, many of these suggestions come from individuals not directly in the fray. Some have proposed that the answer to burnout is simply to immerse yourself in the practice of medicine. That would be wonderful, if it didn't come with such a hefty price.

The problem is not simply that we are tired of paperwork or burdened by administrative duties. The quagmire in which we find ourselves is a product of a complex web of mind-numbing repetitive paperwork, burdensome and questionable administrative duties, high (and often unreasonable) patient expectations, among numerous other issues both large and small. How can we expect the patient that is the health care system to get better, if we don't treat the entire problem?

## Let's Take Back Control!

My partners and I have lived this process ourselves. To achieve meaningful improvement, we had to change both the business of medicine and the approach to clinical medicine (and not just its burdensome paperwork). We had to continue the process of adapting and fine-tuning our systems on a regular basis. We needed to drive those improvements so that the system work for us and our patients as well as other stakeholders (eg, insurance companies, hospital administrations, and governmental organizations like CMS), instead of having systems that work well for 1 stakeholder at the expense of others.

This is, of course, easier said than done. Few physicians are trained to run a business, and those lucky enough to have been trained were taught primarily by people with no knowledge of medical practice. Training provided in the university setting does not prepare you for managing a private practice and often doesn't help you fully understand how to practice inside the university itself. Business school, on the other hand, does not provide a true understanding of the realities of medical practice. You can't simply utilize standard business practices and expect to provide outstanding care. Conversely, if you go out of business you can't provide any care at all.

A solo practitioner in a small community faces many challenges. The multispecialty clinic employee physician is also confronted with a wide array of problems. Interestingly, there is incredible overlap in the issues faced in these 2 very different settings. We will discuss common issues with broad strokes and examine specific situations with granular specificity. A 1-size-fits-all approach only works when it works; other times, solutions specific to individuals and settings are needed. We will strive not only to address a problem but also to deliver a concrete solution. We hope you, our readers, will also take an active role in discerning what directly applies to you and what can be happily ignored.

Our website [www.smartbusinessgreatmedicine.com](http://www.smartbusinessgreatmedicine.com) contains an expanded list of problems we've experienced with potential answers as well as "practice vignettes". Some practices may need a few; others may need a complete overhaul. If you have a practice with no problems at all... Congratulations! For the rest of us, there is work to do, and we invite you to join us on social media (Group Addresses to go here) for ongoing discussions). Simply beginning the process is enough to improve the sense of burnout. Leaving everything in somebody else's hands is part of the problem.

## Goals for This Column

We plan to take you through 9 extremely important components of building a smart business to provide great medicine (Box). It is of paramount importance to recognize that small issues can be vital, especially when they arise frequently. We may spend a time dissecting a small problem and numer-



## ▶▶▶ Box: Planned Topics

### Where Is the Money?

Addressing embezzlement is essential.

### Engaging Patients

Technology can be leveraged to everyone's advantage.

### Bugs in the Spreadsheets?

How can our spreadsheets be better and make us better?

### Professionalizing Meetings

Taking you from "mom-and-pop" to the big time.

### Websites Need to Work.

A living and dynamic website can have a big impact.

### Phones, E-mails, and Texts—Oh My!

We don't need a phone system; we need communication!

### Scheduling Snafus Solved

Scheduling doesn't have to be the bane of civilized care.

### The Medical User Experience

Leaving your patient's experience to chance is a mistake.

### Diaries-Schmiaries and Care Metrics

How can we make metrics work for us?

ous approaches to its solution. Conversely larger problems do not always require lengthy discussion. We aim to provide actionable timely information, not a gripe session or empty call to action. No one needs another time sink.

### Time is Money

Our columns should give you ways to improve the financial and business footing of your practice. The next will deal directly with money. More specifically it's going to deal with who is stealing money and how to stop them. Many practices, large and small, have suffered from embezzlement, skimming, and simple theft of office supplies and equipment. Hard-won knowledge about how to avoid theft and methods for catching the perpetrators will be reviewed.

### The Patient Experience

Next, we will examine methods for optimally engaging patients. Simply using a web/email portal to communicate with a patient and prove compliance with a governmental program is not optimizing the practice. We can engage patients on a number of levels by showing them that we truly care about them—that's why we got into medicine. We want to gather data in a timely fashion to expedite care and enhance our level of service. We also want to utilize these systems to minimize patient's time in the office. This helps both the bottom line and the patient experience.

### Running the Business

Once you have seen your patients and managed your

money, you're then faced with the monthly meeting. For most practices, this includes a review of the financials. Unless you have an accounting degree, the spreadsheets often provide little truly actionable information. We must change this! Complicating this, the average business meeting is dominated by complaining or rambling thoughts from at least 1 participant. A good business structure with an aggressive approach reminiscent of an excellent trauma team is needed. We will describe such a structure with the recognition that every practice and every physician in every practice is a unique case.

### Communication and Teamwork

Outstanding care requires excellent communication between doctors, nurses, therapists, technologists, office staff, caregivers, and patients. When this communication breaks down, care suffers. Why should your practice be any different? The simple truth is that, for the most part, we suffer from a stunning lack of communication. We have to not only adopt modern communication approaches but must dramatically improve our approach to the simple fundamentals of communication. The better communication becomes, the happier everyone is, including patients. The better the care is, the less time we spend with painful and repetitive work, and the better the financial health of the practice becomes.

### Websites

Many practices either try to save money and produce a simple website or spend large amounts to make a slick website. Unfortunately, it is the rare group that develops a website that helps drive its practice. Your website is not just a splash-page with photos of physicians and directions to the clinic. It should be a truly interactive experience that optimizes your relationship with patients, referring physicians, outside institutions, and even those within your own practice. When built correctly, the website can serve as the hub to connect with patients and caregivers through social media. It can also be a repository of data to optimize patient care being delivered by physicians and staff. Every minute we spend searching for a form or a piece of information, is a minute lost—that can be regained with a well-organized highly functional website.

### Phone Systems

The phone system is a disaster for many offices. Patients, referring physicians, and staff alike complain about these systems regularly. A fortune can be spent on an outstanding system with no guarantee it will be used effectively and efficiently. A mixture of high technology, careful system integration, and foremost—thoughtful planning—can create a phone system that makes your office shine. A good experience on the phone can equal multiple positive web posts and comments to friends. This free advertising cannot be matched. Having a referring office able to smoothly use your phone system



smoothly increases referrals while minimizing office workload. The 1-size-fits-all approach is unlikely to provide adequate answers. Much like treating Ms. Smith's diabetes will not be exactly the same as caring for Mr. Brown's diabetes, developing a communication system must be customized. Telephone systems for physician offices always seem to have radically inflated prices, but answers don't always have to be expensive.

### Office Flow

From scheduling, to locating the office, to check-in, to obtaining the vital signs, to check-out, to the parking lot, almost everything needs improvement. Perfection isn't vital, but improvement is. When a scheduling error occurs, the patient is typically angry, the physician's schedule is derailed, office personnel stress skyrockets, and in the best case, the situation is salvaged. These problems stoke the flames of burnout leaving us planning our escape on the drive home. Reigning in the scheduling snafus will improve your outlook, the office brand, and eventually the finances.

### MIPS, MACRA, Quality Metrics—Oh My

We are being set upon by a host of external regulators demanding specific data sets and quality metrics. Although burdensome, the underlying data and thought processes can be utilized to improve patient care, minimize exposure to regulatory agencies, and even improve your business. Fully leveraging our communications capabilities with our patients and other providers creates an opportunity to collect the data in a format that is actually useful for helping the patient. Simply complying with these programs does not, in and of itself, improve patient care. Better care can produce better business.

### Conclusion

These columns should provide important building blocks for smart business and great medicine, but unfortunately, cannot provide the complete structure. Our website provides additional material ranging from broad issues (eg, utilizing human factors design to help optimize office function)s to small issues (eg, identifying the best method of transmitting orders to a nursing home.) As noted, we have also developed practice vignettes reminiscent of standard clinical vignettes designed around specific ailments of medical practices.

We invite to visit us at [www.SmartBusinessGreatMedicine.com](http://www.SmartBusinessGreatMedicine.com) for a wider range of topics in greater detail and join us on social media outlets further discussion. ■

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