

STAFFING EFFICIENCIES

Why is it important?

- It is a BIG NUMBER

- Second only to Provider comp

- Charges, Payments and Adjustments need to cover your Provider Comp, Staff Costs and additional expenses

Not a Simple Number to Define

- Dependent on:
 - Number of Providers
 - Specialty
 - Where Revenue Cycle “Lives”
 - Electronic Records or Paper Charts
 - Practice Work Flows

Depends on Number of Providers

- Simplest Formula

- One Provider
- One Front Desk
- One Back Office



Depends on Specialty

- ▶ Spectrum of how Labor Intensive the Practice is.

NEUROSURGERY

Low on the Spectrum:

Not a great deal of work in the office

Diagnostics		Hospital
Surgery		Hospital

Depends on Specialty

- ▶ How Labor Intensive is the Practice?
 - ▶ Primary Care
- ▶ Moderate on the Spectrum:
 - Rely Heavily on work that happens in the office.
 - E and M's
 - Documentation
 - Referrals
 - Medical Home
 - Coordination of Care

Depends on Specialty

- ▶ How Labor Intensive is the Practice?

Gastroenterology

Heavy on the Spectrum:

Rely on both the office and the GI Lab

- E and M's in the office
- Education – Procedure and Diagnosis
- Call Backs
- Chart Prep for visits

Managing Patient Data

- ▶ What and how much data do you manage?
 - Provider provides data from visit
 - Scribe
 - Data for Meaningful Use
 - Medical Homes
 - Patient Portal

Revenue Cycle

- ▶ How much of it goes on in your office?

Coding

Billing

Collections

Financial Reports

After the Basics...

- ▶ Change processes before you add people.
- ▶ Grow Staff slowly and
 - Add Flexibility
 - Add Quality
 - Hire for Retention
 - Build a Team

Symptoms to Watch for

- ▶ No Overtime
- ▶ Everybody gets a lunch every day
- ▶ Moving all the time with no accomplishments
- ▶ Peaks in volume that are not permanent
- ▶ Impact of someone being out of the office
- ▶ Constant Fatigue – “ Feel like I never catch up”
- ▶ Have a plan for Provider being off

Always Know...

Staffing is never done!