

# The 5 IT Skillsets Every Physician Practice Manager Needs to Succeed in 2009 and Beyond

*I wrote this article for the **Physician Office Managers Association of America (POMAA)** March/April 2009 Newsletter. If you don't know POMAA, check out their website.*



Each of us have areas of expertise based on our experience, our education and what we find interesting and fun. IT knowledge and skills are no longer optional, however, and I suggest every medical practice manager learn as much as possible about the following five areas. Your work life and the life of your practice may depend on it!

## **Skill 1: Email Etiquette and Management**

Email can rule your work life if you don't make good choices with your messages. Managers need to know how to use the Rules Tool (Outlook) to automatically move messages into folders, and how to turn emails into Tasks and Appointments. Work communication can succeed or fail if you don't have the basics under your command. Knowing how to archive your email will not only save you time when looking for important information, but will save you from the frustration of searching through hundreds of emails. Here are the basics of email management:

1. Most organizational experts recommend **looking at your email twice a day**, and turning off the setting that notifies you immediately when you have new email. Email can be very addictive, and can suck your time away from

projects and other work.

2. Just like paper, try to only **touch an email once**. Once you read the email, decide whether to delete it, answer/forward it and delete it, or do something else with it like dragging it to the task list or calendar. Don't get caught in the ugly cycle of reading it once, and going on to the next email without doing anything about it. If you do that, you'll end up with lots of emails that you have to read again...and maybe a third time.
3. **Never put anything critical (of a criticizing nature) in an email**. If you need to have that type of conversation with a colleague, pick up the phone. A critique to an employee is best done in person, with a follow-up email for the file.
4. Always check your outgoing email for tone. **The best tone for business email is professional**. This means a greeting, a message, a "thank you" and footer with your full name, title, and contact information. Some organizations are more formal, and some are less formal, but I would err on the side of being more professional. You can always **set your email signature** to include the greeting and thank you and your name, so all you have to do is complete the middle.
5. For emails that do need to be saved for reference, **make subfolders under your Inbox to place reference email**. Even better, copy the email to a Word document, and delete the email.
6. **Have high priority (your boss or bosses) and low priority (listservs, subscriptions) email automatically come into their own folders**. The low priority email can wait and the high priority email can be dealt with first.
7. **Group emails** with jokes, homespun wisdom, clever tests and unbelievable pictures **are a waste of your time**. If you need a break from work, go for a walk, but get rid of the group emails. They take personal and server

email space and can border on or be outright offensive, causing a problem if you don't nip it in the bud. Remember that email is legally discoverable.

8. **Be careful about answering emails off the top of your head**, possibly when you're angry, or rushed. If you need to delay answering an email because of your mood, drag the email over to the task list and set the to-do for tomorrow.



## **Skill 2: Understanding Medical Office Software**

Acronyms come and go, but the basic software that supports medical practices remains the same. **Practice Management Systems** (PMS) typically include registration, scheduling, billing and reporting as one component. Today's systems are built around the billing function, with scheduling and registration supporting the ability to generate electronic claims and post payments back to the transactions. Because billing is becoming more standardized, it is the reporting that can make or break a practice.

**Electronic Medical Records** (EMR) are sometimes referred to in a broader sense as EHR (Electronic Health Records) and range from the simplest of systems which act as a repository for the electronic chart to the most sophisticated systems which may include digital imaging, e-prescribing, complex messaging, medication reconciliation, and test alerting, among others.

EMR and PMS can be totally integrated, or can interface with each other, populating the other uni-directionally or bi-directionally. Those managers with a deeper understanding of their own software systems will find it easier to implement pay for performance measures such as PQRI and e-prescribing, and will not have to rely on vendors to educate them.

PACS is **Picture Archiving and Communication System** and allows easy indexing and retrieval of images. PACS exists primarily

in radiology and surgical specialty offices, but as more hospitals extend EMR and PACS privileges to physician offices, managers will need to understand something about the technology.

Other systems that will interface to your system are transcription, outsourced billing systems, data warehouses, claims clearinghouse, electronic posting systems, and web services interfaces. Get or make a **graphic representation of your software and hardware system/network** so you can talk knowledgeably about it and understand the effects of adding new servers, workstations or software modules.



### **Skill 3: Using Technology to Stay Current in Your Field**

Magazines, newspapers and even television news is losing favor as people find the latest and most in-depth news on the Internet. For physician office managers, news and important information is available through websites, newsletters, newsfeeds, webinars, podcasts, listservs and blogs. How does a manager sift through all these options and stay current with the demand of running a day-to-day practice?

One of the most important ways to consolidate this information is to **subscribe to a feedreader or email from websites** you like and have the news come to you (called “push technology”), instead of you checking the website every few days or whenever you remember (aka “pull technology”). These are the programs that will eventually do away with most, if not all, of your magazine subscriptions. You know that guilty pile of professional magazines that you have in your office or at home that you have scanned but still plan to read in-depth? Gone!

Most websites offer email or RSS options to their users. An

email option asks you to enter your email address and will email you when new information is available, typically offering the full content inside the email itself. This is ideal for anyone who has these emails automatically placed into an email subfolder to read later.

RSS stand for Really Simple Syndication and is a way to push the content of many sites into a feedreader, which is an organizer of website feeds. There are many feedreaders available at no cost and adding a new website feed to your personal feedreader is as simple as clicking on the orange RSS icon on the website page and identifying the feedreader you use. The nice thing about using RSS is that you can group sites into categories you decide upon, it is easy to add new sites and drop sites that you find a waste of your time, and you do not clog up your email program with lots of emails.

**Webinars and podcasts are another way to stay current.** Many webinars are free and allow you to dip your toe into the pool of knowledge on a particular topic. Webinars with a fee attached are usually longer and more in-depth, and can replace the traditional go-to conference which has become a budget breaker for many practices.

**eBooks are quickly becoming** the way to get just the information you want when you want it. Most eBooks are reasonably priced (some are free) and can be stored or printed.

#### **☒ Skill 4: Online Patient Interactions and Web 2.0 Applications**

Patient interactivity via practice websites is growing exponentially. Many practices are using web functionality to communicate with their patients via secure messaging. This allows bi-directional communication such as:

1. Request an appointment (patient) or appointment

reminders (practice)

2. Send statements; patients pay online with a credit card (practice & patient)
3. Inform patients of test results (practice)
4. Create personal health records (patient)
5. Request a prescription refill (patient)
6. Virtual office visits (practice & patient)
7. Complete registration via fillable .pdf forms and download to practice management system (practice & patient)
8. Request medical records; send an electronic copy of same (practice & patient)
9. Complete a history of present illness prior to the on-site visit (patient)
10. Ask & answer questions for the doctor, nurse, or staff (patient & practice)

If you're not looking into ways to communicate with your patients electronically, start now. **Web 2.0 is now more typically referred to as social networking, social media or new media.** What started out as a way for friends to communicate with each other is now an amazing, ever-expanding ability to connect/market to businesses, patients and referrers. Very few medical practices are using social media, but they should, because it is the way of the future, and in many cases, very affordable.



## **Skill 5: Knowledge Management and Retention**

Most medical offices try hard to document processes such as

"How To Make An Appointment For Dr. Jones," but find it difficult to keep up with documenting changes to those written protocols. Documentation is crucial for operations in that it supports job performance and consistency, and is a basis for training new employees. The traditional documentation method for most practices is use of Word documents, which can create an immediate usability logjam. Due to cost, Microsoft Office is not installed on many workstations, and many office employees are not trained to use Word, so the onus for original creation of and changing of protocols falls to one person. Changes in healthcare are happening so quickly that it is not reasonable for one person to be able to update all documentation, unless they are dedicated to it on a full-time basis.

Better and more affordable solutions are becoming available. Speech recognition and office wikis are two possibilities for documenting office processes. **Speech recognition** (you may already be using it for your transcription) is a very affordable solution, but it does take time to train the program to recognize your voice. If you are not used to dictating, it may also be a learning curve, but it is one that will pay dividends down the road. Doctors can use it to help you by dictating their preferences, such as appointments, patient intake, room set-up, procedure set-up, patient phone protocol and after-hours call contact protocol.

**Private wikis** are another good bargain in the marketplace, as many are available at no cost, and may be installed and managed on the web. Wikis need at least one person to function as editor. Since you can have your entire staff work on documentation, the staff becomes very invested in the process of keeping the wiki fresh and up-to-date.

There are other free or low-cost **project management web programs** that can also be used to track changes and remind staff to document changes later. The one area that is most important for tracking changes and managing knowledge in the

practice is in billing. Many practices are held hostage by their billers as their knowledge is so specific and proprietary that the manager feels s/he could not recoup it if they left. No practice should be vulnerable based on knowledge any single employee has, including the manager.

*I am very interested in technology that creates value in medical office practices. If you are using something new and different in your practice, please email me and let me know. Also, if you have any questions about the ideas I discuss in this article, I am glad to answer them: marypatwhaley@gmail.com.*

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# Who's Using Voice Recognition? 70,000 Healthcare Providers, That's Who



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Five years ago I worked for a physician who used Dragon to dictate his office notes. He put in the time to teach Dragon his voice and successfully dictated, edited, and printed his own notes. He eliminated all transcription costs, and was a favorite of the staff as no one ever had to scramble to find his notes. Not surprisingly, he was my physician IT Champion.



For every physician who was able to make it with Dragon five years ago, there were probably ten who didn't tough it out. Today there are 70,000 healthcare providers using Dragon, which is an estimated 10% of the total healthcare provider population. What's the big motivator? One, saving money, which becomes more important every year as there become fewer places to cut costs. Two, direct input into the EMR, which saves time and closes the loop on electronic management of physician assessment and recommendations.