A colleague of mine has been part of a well-known PM/EMR company’s software support team for 10 years. She often tries to steer people to me when she cannot solve a client’s problems with a software solution. Even though she was once a practice administrator herself, she is a software support person now and the problems she sends to me cannot be solved with software. “Mary Pat,” she asks me, “Why do they think I can solve their practice management issues? All I am empowered to do is to help them use the software.”

Earlier in my career (before EMR) I heard someone call “Practice Management” software “Billing” software and I remember being offended for some reason. I thought “Billing” was such a narrow description of what PM software did — but they were right. That software is meant to deal with everything billing. It all comes down to billing — whether it is the actual billing/claims management itself, running reports to diagnose billing problems, or capturing recalls so patients get reminded to come in for a service and...get billed. Before you unload on me in the comments let me be clear that I am not saying that healthcare is all about billing, I am only saying that Practice Management software was developed to handle the financial side of the house.

Practice Management software cannot “do” practice management. It cannot figure out your workflow so you capture data in the most efficient way, and it cannot analyze your reports and
tell you what to change to increase efficiency or decrease overhead. It certainly cannot tell you the best way to schedule, or how much to charge your self-pay patients. It is only a billing tool.

I have worked in healthcare long enough to have helped practices go from manual billing (you typed or hand-wrote claim information on a 1500 form and mailed it in) to their first practice management system. I did a lot of practice management consulting even though that’s not what I was there to do. I had to get them in shape on paper so they could handle the software. I had to get their workflow optimized so the software would make things better – not worse.

An implementation of Practice Management software is not intended to do anything but set-up the system and train you to use it. Sometimes that perfectly rosy future the salesperson paints is nothing like the painful first steps (and cash flow jam) of a new system. An implementation will not fix the issues that are existing in your practice that have nothing to do with the functionality of your billing system.

**Your Practice Management Software can:**

- Automate your registration process so patients can register and check-in online, or at a kiosk in the practice.

**But your Practice Management Software cannot:**

- Train staff to greet patients and make them welcome in the practice.
Your Practice Management Software can:

- Check the patient’s eligibility for active insurance coverage.

But your Practice Management Software cannot:

- Automatically choose the correct insurance company/payer to attach to each patient account (one of the biggest problems I hear about in the field!)

Your Practice Management Software can:

- Calculate the days since the patient’s last physical, the days left in a global period or visits left in annual cap.

But your Practice Management Software cannot:

- Help the patient understand their benefit plans and understand their financial responsibility.

Good practice management has a lot to do with attracting, training, coaching and retaining the right staff, as well as providing them with the tools to do the job you hired them to do. Getting the software right is a must, but don’t expect your software trainers to be able to solve any of your staffing, communication, workflow or cultural problems. That’s up to you, the Practice Manager!

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