ANESTHESIOLOGIST ASSISTANTS

STRATEGIES FOR ENGAGING PHYSICIAN-ONLY PRACTICES

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WI LICENSES AAs IN 2012

“Now your work really starts”

Ellen Allinger, CAA
Former Director of Legislative Affairs, AAAA

GOALS

- Planning
- Messaging
  - Who are the key stakeholders?
- Implementation
- Surprises and Wildcards
- Culture
LEADERSHIP ON BOARD

- Full support of your group’s leadership
- Visible support of your group’s leader
- Consider a formal presentation to your group and hospital leadership
  - Anesthesiologist
  - Anesthesiologist Assistant

WORKGROUP

YOU NEED A CHAMPION.....
MESSAGING: START WITH ‘WHY’

- Why
- What
- How

STAKEHOLDERS
- Your partners
- Your hospital administration
- Your surgeons
- Your perioperative team
- Your organization’s ‘financial team’
- Your billing company
- Medical Records

DEFINE YOUR MESSAGING
- Why are we hiring AAs?
  - Reduce costs?
  - Changes in clinical practice?
  - Desire medical direction model?
  - Post-call relief?
  - All of the above?

WHAT IS YOUR VISION FOR THE PRACTICE?
MESSAGING-COSTS

- Reduce Costs: 30,000 Foot View
  - Employed: need to align with the hospital
  - Contracted: need to stay competitive
  - Simple Math: Bundled Payments
- Stay competitive
- Do your partners understand the healthcare ecosystem?

IMPLEMENTATION

- Pick the right site
- Pick the right surgeons and cases
- Educate the perioperative staff
- Considerations
  - Efficient schedule
  - Established site
  - Physical layout

IMPLEMENTATION

- Start with a ‘Select Team’:
  - Anesthesiologists who have directed before
  - Anesthesiologists who have bought in
  - Anesthesiologists with good communication skills
  - Anesthesiologists who can delegate
  - Anesthesiologists who are efficient in their day
IMPLEMENTATION

- Compliance
  - Required Education-no exceptions
  - Medical Direction Rules
  - EHR
  - Relief, breaks et al
  - Self-audit

IMPLEMENTATION

- Survey anesthesiologists: formal and informal
- Evaluations: one month, three months, six months, annually
- Engage AAs
  - Place on department committees
  - Participate in department meetings
- Social interaction

CULTURE

- IQ
- EQ
CULTURE
- Opportunities to educate
- Get issue on agenda for every relevant meeting: highlight the positives
- One anesthesiologist at a time
- Address poor treatment of AAs immediately
- Address rumors immediately
- Address compliance issues immediately

YOU MAY NEED TO USE THE COLD WATER
- Value = Quality/Cost
- Show me the business plan for bundled payments that justifies your value sitting on a stool for an ASA PSI patient having colonoscopy
- The hospital cares more about costs than about your perceived value
- Do you see any other physicians in the hospital who do NOT use ‘extenders’?

BUT KEEP IT POSITIVE
- Patience and courage
- Understand and acknowledge that this change is difficult for your partners
- It is not personal
- Emphasize how it benefits the group in multiple ways