

ANESTHESIOLOGIST ASSISTANTS

STRATEGIES FOR ENGAGING PHYSICIAN-ONLY PRACTICES

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TEAMHEALTH ANESTHESIA

CHAIR-ASA COMMITTEE ON PRACTICE MANAGEMENT

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

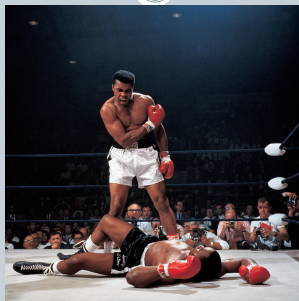
LEADERSHIP ON BOARD

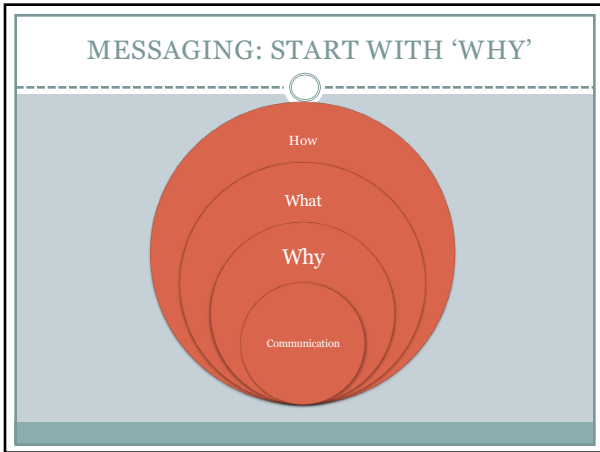
- Full support of your group's leadership
- Visible support of your group's leader
- Consider a formal presentation to your group and hospital leadership
 - Anesthesiologist
 - Anesthesiologist Assistant

WORKGROUP



YOU NEED A CHAMPION.....





- STAKEHOLDERS**
- Your partners
 - Your hospital administration
 - Your surgeons
 - Your perioperative team
 - Your organizations '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

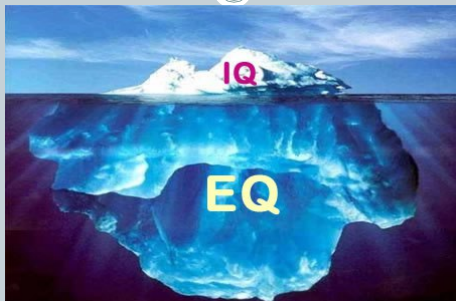
IMPLEMENTATION

- **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



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
