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PUBLISHER Lisa Backet

EDITOR Taren Grom

CREATIVE DIRECTOR Marah Walsh

DIRECTOR OF SALES

Darlene Kwiatkowski

CONTRIBUTING EDITORS

Virginia Kirk

Denise Myshko

Elisabeth Pena

Kim Ribbink

Alex Robinson

Lynda Sears

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The doctor will see you now —the magic phrase that gets you past the reception area to the inner sanctum.

Those six little words can set off a chain reaction, which to most patients often goes unnoticed, unless of course: your prescription is not an approved medication on your insurance company's formulary; you have to wait weeks for a follow-up visit; your medical records have disappeared between the clinic/hospital and the office; or you accidentally bump into a well-dressed sample-case touting sales rep, while juggling a sheaf of downloaded information from the Internet and print advertisements for your "preferred" medication of choice. And, if as a patient you think you have it rough, imagine how your doctor feels?

Today's physicians are akin to CEOs of small companies, whether they own their own practice, are part of a large group system, or are active in an academic setting. As such, they are subject to the same pressures and challenges as any other busy executive who has to deliver results to shareholders — who in this scenario are patients — while at the same time having the greater responsibility of delivering high-quality patient care.

In this month's Forum, practicing physicians from different specialties and geographic locations give voice to their biggest day-to-day challenges. The overwhelming majority of physicians interviewed for this article say managed-care and reimbursement issues are the factors that create the most challenges for their operations.

According to physicians, part of the problem is that reimbursement rates have dropped, thus they need to see more patients, more efficiently, in the same period of time to cover their overhead. This is true even in an academic environment. Because physicians have to carry a larger patient base, they often do not get to spend as much time as they would like in a consultative role.

At the same time, according to most physicians, for every minute of reimbursable time that they spend with the patient there is an equal amount of time



Dr. Michael R. Udwin

Managed care has been cutting back on what it contributes to office revenue, so the provider must make up the difference by increasing patient volume. This creates additional strain on an already very busy office environment.

spent on non-reimbursed tasks related to patient care. This time is spent reviewing or completing medical records, communicating with other physicians, documenting care, reviewing X-rays, filling out insurance forms or billing records. These "non-patient care" tasks challenge physicians to be more efficient in their back-room operations as well as in terms of time spent seeing a patient.

Increasingly, physicians rely on technological solutions to aid them in their quest for improved efficiency. The IT application may be a simple Palm Pilot diary to organize schedules and appointments; a more sophisticated system that records prescribing information that can be transferred to a pharmacy and the insurance company; or the Internet used to reference the most up-to-date information on a particular therapy or disease. Physicians are being pressed to keep up, not just as part of their ongoing training, but to meet the expectations of a more savvy patient base.

Physicians agree that they must become more adept at the business of practicing medicine by learning to manage more efficiently the quality of patient care as well as attending to the bottom line.

Taren Grom
Editor

The business of medicine