MGMA®

Strategic planning

- Review and rework strategic-financial plan.
  - Conduct a SWOT analysis and reset priorities accordingly.
- Run scenario-based planning to model relationship between volume, revenue, expenses and your practice's strategic plan.

Operations management

- Implement a process for rapid decision-making and planning (e.g., Lean Startup models). Consolidate and improve operational efficiencies through Lean Six Sigma strategies.
- Review appointment data/dashboards to track patient access metrics (e.g., no-shows, appointment availability, cancellations and unfilled slots).
  - Expanded hours of operation can improve patient access while still accommodating rotating schedules of providers/staff to ensure social distancing in the practice.
  - Broaden use of telehealth for certain appointment types and specialties, such as behavioral health.
  - Conduct patient origin analysis to determine the geographic distribution of patients and potential areas for practice expansion/outreach.
  - Consider respiratory clinics and dedicated COVID-19 locations to mitigate risk at clinic locations focused on non-COVID-19 care.
- Reorganize office areas to repurpose space previously used by staff who are teleworking.
- Develop strong supply chain management:
  - With data from PPE burn rate calculator, design a plan to deal with any shortages and delays in supply deliveries.

  - Stockpile emergency supplies and establish a rotation schedule using visual tools such as Kanban cards.
  - Network with other practices/organizations on potential supply-sharing arrangements.
  - Evaluate group purchasing organizations for reliable sourcing of materials.
- Verify all biomedical equipment inspections are up to date.
- Review settings on refrigerators used to store medications, vaccinations, testing supplies, etc., and have a temperature check policy in place.
- Develop a communication and training plan for staff around changes in processes and policies.
- Update procedures on cleaning your facility, hand washing, use of PPE, etc.
- If using an outside company for cleaning, review cleaning vendor contract for expectations and cleaning schedule.

Technology

- Revisit existing telehealth platform(s) and technology and evaluate for long-term needs:
  - Does it meet pre-COVID-19 federal and state security and privacy laws?
  - Is it integrated with your EHR and/or practice management system?
  - Are you using provisionally free software that will incur a charge post-COVID-19?
- Evaluate options for automation of posting and reconciliation processes for insurance to improve revenue cycle.

Financial management

- Assess where you are financially based on volume loss, revenue loss, unbudgeted expenses, capital expenditures and other financial obligations.
- Review your billing and collection processes:
  o Set monthly targets.
  o Review and work any denials.
  o Educate staff when needed to prevent errors.
  o Determine how best to handle uninsured/previously insured patients.
- Make sure billing procedures for health insurance plans you accept have not changed during closure.
- Develop 30-, 60- and 90-day plans to restore revenue and close gaps.
  o Include financial contingency plans in concert with these plans (e.g., consider delaying payment of discretionary bonuses or payments in line with certain thresholds).
  o Re-evaluate using a pro forma.
- Develop/review asset management plan:
  o Repay loans (if applicable).
  o Set up bank line of credit if needed.
  o Establish capital reserve account.
- Prepare providers for possible fluctuations in patient volume and reimbursement and have an amendment to their contracts to address any changes if there is another public health emergency.
- Review provider compensation contracts:
  o Make adjustments in base salary, incentive compensation, if necessary.
  o Consider establishing new physician/provider benchmarks for productivity (compare with MGMA DataDive).
- Review potential of participating with a management services organization (MSO).
- Explore opportunities for contracting with hospitals to provide specific services, such as call pay, medical directorships, clinical co-management arrangements, etc.

Revenue cycle

- Make sure your EHR is loaded with the most current fee schedule.
- Tighten your revenue cycle:
  o Enhance communication with patients on payment and financing options when necessary.
  o Complete a reimbursement analysis to verify compliance by insurers.
  o Perform a charge/collection/adjustment analysis by payer (and use for future contract negotiations).
  o Complete a fee schedule and reimbursement review of top 10 CPTs for opportunities for adjustments.
- Develop a coding compliance program:
  o Conduct E/M coding utilization analysis (including telehealth codes) for compliance and compare with CMS and competitors.
  o Conduct documentation chart audits on medical necessity via procedural coding (MGMA DataDive Procedural Profile has data for many specialties).
  o Educate providers on areas of needed improvement, document the training and then down the road, perform another audit and assess.
- Conduct physician referral analysis to determine number of referrals by physician by total charges and payer mix.
- Determine alternate payment models for new revenue sources.
- Use gross collection rate (GCR) and net collection rate (NCR) for possible contract re-negotiation.
- Review benefits of participating with various physician networks (e.g., ACOs, clinical integrated networks, etc.).

Human resources

- Review Equal Employment Opportunity Commission (EEOC) guidance.
- Verify that employees continue to avoid potential exposure to COVID-19.
- Set guidelines around employee self-monitoring.
- Review staffing needs:
  o Determine which positions are needed now (e.g., compare benchmarks such as staff-to-provider staffing ratios).
  o Determine which positions will be needed in future waves of COVID-19, accounting for projected visit volume decreases.
  o Determine which staff/departments can telework.
  o Develop flexible staffing models — what will be needed to catch up, what if second wave hits, etc.
- Develop an action plan for mental health and staff safety to help with stress and anxiety.

Risk management

- Complete a risk management self-assessment and monitor compliance on an ongoing basis.

- Review your insurance coverage with your legal counsel:
  - Notify your professional liability carrier about changes to practice (e.g., resuming full-time service, returning to original scope of practice or permanently adding telehealth services).
  - Reinstate any professional liability, general liability or other relevant business insurance policies and programs suspended during the closure.
  - Verify that clinical employees who have their own professional liability coverage have not let it lapse during closure.
- Review and update your disaster recovery plan:
  - Be aware of Occupational Safety and Health Administration (OSHA) process of mandatory reporting of employee exposure to COVID-19 that results in a positive test. (OSHA's Enforcement Guidance for Recording Cases of Coronavirus Disease 2019).
  - Perform a debrief/review of how well the crisis was handled, documenting what went well and potential areas for improvement.
  - Consider adjustments to normal office processes based on lessons learned.
  - Create, review and revise pandemic preparedness plans to prepare for a second wave of COVID-19-related shutdowns or other future pandemics.
  - Continue to monitor the spread of COVID-19.
  - Develop a scenario-based communication plan.

Patient care and satisfaction

- Develop a flowchart for patient symptoms (who should be seen in office, when and how compared to who should be seen via telehealth).
- Promote patient self-management of their conditions.
- Develop a long-term integrated virtual health plan:
  - Chronic care management (CCM)
  - Medicare Annual Wellness Visits (AWV)
  - Remote patient monitoring
- Plan on how to reach post-acute care providers for continuity of care.
- Engage, educate and activate your patient base to telehealth.
- Prioritize backlog of patients based on the nature of their condition or need.
- Review health records to determine whether patients have executed advanced directives. If not, encourage them to do so.
- Develop an action plan to start in-house procedures and surgeries:
  - Make sure APPs, RNs and other staff are trained and ready for revised patient prep protocols.
- Reorient staff to your practice's documentation policies and privacy/confidentiality protocols.

Marketing

- Update clinic's website and patient portal with information on changes to practice hours, facility entry procedures/waiting areas, visitor policies, etc.
- Inform patients and partners about safety precautions that will keep them safe upon return with dedicated outreach in various channels:
  - Social media
  - Print media
  - Referring physicians
  - Hospitals
  - Community agencies
  - Vendors

For the latest tools and insights into practice operations during the pandemic, visit the MGMA COVID-19 Recovery Center: mgma.com/covid-19.